

## **ORDINANCE NO. 3497**

### ORDINANCE AMENDING COUNTY FEE SCHEDULE

The Board of Supervisors of the County of San Luis Obispo, State of California, ordains as follows:

**SECTION 1:** The Board finds and determines:

a. That it has the authority to revise fee charges for providing any product, service, or enforcement of various regulations under the general laws of the State of California, including Government Code Sections 54985 et seq. and 66010 et seq.

b. The Board has adopted a policy (Resolution No. 75-396) requiring the County Administrator and the Auditor-Controller to annually review changes in fees and charges for specific County products, services and costs of enforcement with the departments making those charges, and make recommendations to this Board as to whether said charges should remain the same, be increased or be decreased.

c. On November 8, 2022, Ordinance No. 3480 was adopted establishing or reaffirming all county fees. Said ordinance, and any other ordinances subsequently adopted amending the fee schedule, shall continue in effect unless modified by this ordinance. All changes to the fees to be charged in Fiscal Year 2023-24 as set forth in Schedule "B" of this ordinance have been subject to review by the County Administrator and the County Auditor-Controller, which changes to Schedule "B" are attached hereto and incorporated herein by reference.

d. The California Advancing and Innovating Medi-Cal (CalAIM) Act required the California Department of Health Care Services (DHCS) to implement Behavioral Health Payment Reform beginning July 1, 2022. As a component of Behavioral Health Payment Reform, effective July 1, 2023, San Luis Obispo County will no longer be reimbursed by the DHCS Cost-Based model, but by a Fee-for-Service model using Current Procedural Terminology (CPT) codes instead of codes previously utilized for outpatient services.

e. As of November 8, 2022, when the County adopted FY 2023-24 Schedule "B" via Ordinance No. 3480, details of the CalAIM Behavioral Health Payment Reform reimbursement model were not available, but have since become available. Consequently, the Behavioral Health fees associated with fund center 166 of FY 2023-24 Schedule B shall now be modified to reflect the CalAIM Behavioral Health Payment Reform model, effective immediately for the purpose of state reimbursement, by deleting the 16 previous fees established under the cost reimbursed model and adding 1,268 specific CPT-related fees. No County clients have been charged fees under the prior, DHCS Cost-Based model since July 1, 2023.

f. The County Department of Public Health has a need to add footnotes to certain fees in FY 2023-24 Schedule "B", fund centers 160-10 and 160-05, attached hereto and incorporated herein by reference, in order to come into compliance with state regulations, explain adjustments to funding, and improve cost efficiencies.

g. The County Department of Public Health has a need to add a new fee to FY 2023-24 Schedule "B", fund center 160-10, attached hereto and incorporated herein by reference, for a test to detect infection with Legionella, to protect public health and safety.

h. By definition, these charges are not a "tax" and are exempt from voter approval pursuant to California Constitution, Article XIII C. Section 1, paragraph (1)[charge for specific benefit conferred]/(2)[charge for specific service provided]/(3)[charge for issuing license or performing inspection]/(4){charge for use of government property}/(5)[fine or penalty imposed for violation of law] (Prop. 26).

i. Public Notice has been given in accordance with Government Code Section 25124.

**SECTION 2:** The fee schedules are amended as follows:

a. That the fee changes attached and incorporated by reference herein shown on Schedule "B", fund center 166, as "New" and as "Deleted" are hereby approved, and shall be effective on the date of passage of this ordinance.

b. That the changes to footnotes attached and incorporated by reference herein shown on Schedule "B", fund centers 160-10 and 160-05, are hereby approved, and shall be effective November 30, 2023.

c. That the fee change attached and incorporated by reference herein shown on Schedule "B", fund center 160-10, as "New" is hereby approved, and shall be effective November 30, 2023.

**SECTION 3:** All departmental managers and divisional managers whose services are listed in Schedule "B" are hereby directed to, upon the dates specified in Section 2 above, amend their fees for services to reflect the fees shown in Schedule "B" as "New" and as "Deleted".

**SECTION 4:** This ordinance shall take effect and be in full force and effect as set forth in Section 2 above; and before the expiration of fifteen (15) days after passage of this ordinance, it shall be published once with the names of the members of the Board of Supervisors voting for and against the ordinance in a newspaper of general circulation published in the County of San Luis Obispo, State of California.

**INTRODUCED** at a regular meeting of the Board of Supervisors held on October 17, 2023 and **PASSED** and **ADOPTED** by the Board of Supervisors of the County of San Luis Obispo, State of California, on October 31, 2023, by the following roll call vote, to wit:

AYES:	Supervisors Bruce Gibson, Jimmy Paulding, Dawn Ortiz-Legg, Debbie Arnold and Chairperson John Peschong
NOES:	None
ABSENT:	None
ABSTAINING:	None

  
\_\_\_\_\_  
John Peschong  
Chairperson of the Board of Supervisors  
County of San Luis Obispo, State of California

ATTEST:

John Nilon  
Ex-Officio Clerk of the Board of Supervisors  
County of San Luis Obispo, State of California

By: Niki Martin  
Deputy Clerk



FISCAL YEAR 2023-24

**FEE SCHEDULE "B"**

EFFECTIVE DATE: JULY 1, 2023

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Department Name: Public Health - Vital Records and Nursing  
 Fund Center: 160-03,05

Fee Detail					FY 2023-24 FEE SCHEDULE							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
<b>FAMILY HEALTH SERVICES DIVISION</b>												
1000		<b>Health Fees</b>		H&S, Sec. 510 & Gov Code 54985 (a)								
1001	Add Footnote 8	Office Visit- 5 min Client (99211)	Full		\$20.00	per visit	\$78.81	25.4%	2,880	\$57,600.00	\$169,372.80	See Footnote 1, 2, 3, 4, 5, & 8
1002	Add Footnote 8	Office Visit- 10-19 min Established Client (99212)	Full		\$112.00	per visit	\$112.97	99.1%	2,622	\$293,664.00	\$2,543.34	See Footnote 1, 2, 3, 4, 5, & 8
1003	Add Footnote 8	Office Visit- 15-29 New Client (99202)	Full		\$157.00	per visit	\$157.63	99.6%	198	\$31,086.00	\$124.74	See Footnote 1, 2, 3, 4, 5, & 8
1004	Add Footnote 8	Office Visit-30-45 min New Client (99203)	Full		\$236.00	per visit	\$236.44	99.8%	242	\$57,112.00	\$106.48	See Footnote 1, 2, 3, 4, 5, & 8
1005	Add Footnote 8	Office Visit- 20-29 min Established Client (99213)	Full		\$157.00	per visit	\$157.63	99.6%	350	\$54,950.00	\$220.50	See Footnote 1, 2, 3, 4, 5, & 8
1006	Add Footnote 8	Office Visit- 45-59 min New Client (99204)	Full		\$302.00	per visit	\$302.12	100.0%	22	\$6,644.00	\$2.64	See Footnote 1, 2, 3, 4, 5, & 8
1007	Add Footnote 8	Office Visit for administration of single Immunization (90471, 90473)	Full		\$39.00	per visit	\$39.41	99.0%	2,996	\$116,844.00	\$1,228.36	See Footnote 2, 3, 4 & 8
1008	Add Footnote 8	Two or more Immunizations during one office visit (In addition to single Immunization fee) (90472, 90474)	Full	Gov Code 54985 (A)	\$26.00	multiple immunizations	\$26.27	99.0%	5,400	\$140,400.00	\$1,458.00	See Footnote 2, 3, 4 & 8
1009	Deleted	Flu immunization only (90471, 90473)	Full		\$10.00	per visit	\$26.27	38.1%	-	\$0.00	\$0.00	See Footnote 2, 3 & 4
1010	Add Footnote 8	Office Visit- 30-39 min Established Client (99214) - NEW	Full		\$183.00	per visit	\$183.90	99.5%	112	\$20,496.00	\$100.80	See Footnote 2, 3, 4 & 8
1011	Add Footnote 8	Office Visit- 40-54 min Established Client (99215) - NEW	Full		\$210.00	per visit	\$210.17	99.9%	15	\$3,150.00	\$2.55	See Footnote 2, 3, 4 & 8
1012	Add Footnote 8	Office Visit- 60-74 min New Client (99205) - NEW	Full		\$341.00	per visit	\$341.53	99.8%	1	\$341.00	\$0.53	See Footnote 1, 2, 3, 4, 5, & 8
2000		<b>Sliding Fee</b>										
2001	Add Footnote 8	Targeted Case Management (TCM)	Full		\$0-\$600	per visit				\$0.00	\$0.00	See Footnote 7,8
3000		<b>Community Education / Consultation</b>										
3001	Unchanged	Health Education Workshop	Full		\$0-\$500	per person				\$0.00	\$0.00	
3002	Unchanged	Public Health Nursing Consultation, Education Outreach/Hour	Full		\$157.00	per hour	\$157.63	99.6%		\$0.00	\$0.00	Footnote 2, 7
4000		<b>Medical Marijuana</b>										
4001	Unchanged	Medical Marijuana ID Card	Partial	H&S, Section 11362.755	\$89.00	per card	\$89.00	100.0%	25	\$2,225.00	\$0.00	Footnote 6
										\$784,512.00	\$175,160.74	

Fee Statistics	
<b>Fee Category</b>	
	0 New
	0 Decreased
	0 Increased
	15 Unchanged
	1 Deleted
	<b>16 Total</b>
<b>Board Discretion Type</b>	
	15 Full
	1 Partial
	0 None
	<b>16 Total</b>

**Department Name:** Public Health - Vital Records and Nursing  
**Fund Center:** 160-03,05

Footnote #	Footnote Narrative
1	Sliding fee scale based on household income and number of dependents.
2	Under the authority of the Health Officer and mandate of the Department of Public Health to prevent the spread of communicable diseases or occurrence of additional cases (California Health and Safety Code section 120175), fees may be waived or reduced to an amount a patient is able to pay.
3	All significant supplies and medications are additional at a rate not to exceed direct and indirect costs.
4	The Nursing unit uses office visit procedure codes defined by Medi-Cal CPT codes established by the American Medical Association. These office visits include staff time associated with the procedure. Associated supplies are added to office visit based on a quarterly updated supply list as referenced in Footnote #3.
5	The charges do not include Public Health Laboratory fees. Please see Public Health Laboratory fee schedule for specific laboratory tests.
6	All administrative costs for the Medical Marijuana ID Card (MMIC) program at the county level are fee supported. Prop 64 (The Adult Use of Marijuana Act, 2016), Health and Safety Code Section 11362.755 requires the county program to establish application fees for persons seeking to obtain, renew, or replace ID cards. Pursuant to this law, county programs may charge an amount (not to exceed \$100) per MMIC application or renewal, must give Medi-Cal eligible applicants a 50% reduction, and must waive fees for indigent patients eligible for and participating in the County Medical Services Program.
7	In high-risk cases/situations where the health and well being of a client or the public are deemed to be at public health risk, Public Health Nurse Case Managers/Public Health Nurse Supervisors are authorized to waive required fees.
8	Fees may be reduced to comply with state or federal mandates and funding available. Fees may also be reduced to comply with program requirements such as the California Vaccines for Children (VFC) Program reduced rate.

Department Name: Public Health - Laboratory  
 Fund Center: 160-10

Fee Detail					FY 2023-24 FEE SCHEDULE							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Cost	Proposed % Cost Recovery	Proposed Units of Service	Proposed Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
		<b>LABORATORY DIVISION</b>										
1000		Laboratory Fees		H&S Code 101150 & 101155								Footnotes 1, 2, 3 and 4
1001	Add Footnote 3 & 4	Aeromonas-Plesiomonas culture	Full		\$87.00	each	\$ 87.73	99.2%	2	\$174.00	\$1.45	Footnotes 1, 2, 3 and 4
1002	Add Footnote 3 & 4	Antibiotic susceptibility testing	Full		\$55.00	each	\$ 55.52	99.1%	5	\$275.00	\$2.62	Footnotes 1, 2, 3 and 4
1003	Add Footnote 3 & 4	Bacteriologic Isolate ID Setup (formerly named Bacteriologic Isolate ID)	Full		\$89.00	each	\$ 89.14	99.8%	20	\$1,780.00	\$2.74	Footnotes 1, 2, 3 and 4
1004	Add Footnote 3 & 4	Bacteriology primary culture	Full		\$95.00	each	\$ 95.93	99.0%	10	\$950.00	\$9.33	Footnotes 1, 2, 3 and 4
1005	Add Footnote 3 & 4	Blood lead	Full		\$47.00	each	\$ 47.24	99.5%	150	\$7,050.00	\$36.56	Footnotes 1, 2, 3 and 4
1007	Add Footnote 3 & 4	Campylobacter culture	Full		\$84.00	each	\$ 84.78	99.1%	15	\$1,260.00	\$11.73	Footnotes 1, 2, 3 and 4
1008	Add Footnote 3 & 4	Chlamydia amplified assay (Roche)	Full		\$34.00	each	\$ 34.90	97.4%	14,000	\$476,000.00	\$12,587.93	Footnotes 1, 2, 3 and 4
1009	Add Footnote 3 & 4	Coccidioides immitis probe	Full		\$105.00	each	\$ 107.33	97.8%	3	\$315.00	\$6.98	Footnotes 1, 2, 3 and 4. Expect that test will be phasing out in 2023
1010	Add Footnote 3 & 4	Enterovirus PCR (old name Coccidioides PCR)	Full		\$157.00	each	\$ 157.45	99.7%	180	\$28,260.00	\$81.76	Footnotes 1, 2, 3 and 4
1011	Add Footnote 3 & 4	Concentration	Full		\$38.00	each	\$ 76.65	49.6%	300	\$11,400.00	\$11,596.39	Footnotes 1, 2, 3 and 4
1012	Add Footnote 3 & 4	Cyclospora direct exam	Full		\$114.00	each	\$ 114.10	99.9%	2	\$228.00	\$0.20	Footnotes 1, 2, 3 and 4
1013	Add Footnote 3 & 4	Direct microscope exam, food	Full		\$164.00	each	\$ 164.24	99.9%	2	\$328.00	\$0.48	Footnotes 1, 2, 3 and 4
1014	Add Footnote 3 & 4	Domoic acid, shellfish meat	Full		\$195.00	each	\$ 195.23	99.9%	2	\$390.00	\$0.46	Footnotes 1, 2, 3 and 4
1015	Add Footnote 3 & 4	E coli shigatoxin-producing, culture	Full		\$129.00	each	\$ 129.70	99.5%	30	\$3,870.00	\$21.15	Footnotes 1, 2, 3 and 4
1016	Add Footnote 3 & 4	Enteric pathogens culture, food	Full		\$182.00	each	\$ 182.30	99.8%	1	\$182.00	\$0.30	Footnotes 1, 2, 3 and 4
1017	Add Footnote 3 & 4	Enterococci, MPN	Full		\$46.00	each	\$ 46.65	98.6%	1,060	\$48,760.00	\$691.31	Footnotes 1, 2, 3 and 4. Includes ELAP fee
1018	Add Footnote 3 & 4	Gastrointestinal PCR Panel	Full		\$266.00	each	\$ 266.91	99.7%	100	\$26,600.00	\$91.35	Footnotes 1, 2, 3 and 4
1019	Add Footnote 3 & 4	Gonorrhea amplified assay (Roche)	Full		\$34.00	each	\$ 34.90	97.4%	14,000	\$476,000.00	\$12,587.93	Footnotes 1, 2, 3 and 4
1020	Add Footnote 3 & 4	Gram stain	Full		\$40.00	each	\$ 40.24	99.4%	2	\$80.00	\$0.47	Footnotes 1, 2, 3 and 4
1021	Add Footnote 3 & 4	Helminth-Arthropod identification	Full		\$50.00	each	\$ 50.47	99.1%	2	\$100.00	\$0.93	Footnotes 1, 2, 3 and 4
1022	Add Footnote 3 & 4	Heterotrophic Plate Count	Full		\$80.00	each	\$ 80.03	100.0%	20	\$1,600.00	\$0.64	Footnotes 1, 2, 3 and 4. Includes ELAP fee
1023	Add Footnote 3 & 4	HIV antibody differentiation test	Full		\$94.00	each	\$ 101.91	92.2%	25	\$2,350.00	\$197.63	Footnotes 1, 2, 3 and 4
1024	Add Footnote 3 & 4	HIV 1,2 antibody-ANTIGEN, Serum (old name HIV antibody, Serum, Batch size 50)	Full		\$67.00	each	\$ 75.25	89.0%	500	\$33,500.00	\$4,125.22	Footnotes 1, 2, 3 and 4
1025	Add Footnote 3 & 4	Influenza virus PCR	Full		\$142.00	each	\$ 142.86	99.4%	500	\$71,000.00	\$428.62	Footnotes 1, 2, 3 and 4
1026	Add Footnote 3 & 4	Isospora special direct exam	Full		\$101.00	each	\$ 101.41	99.6%	2	\$202.00	\$0.81	Footnotes 1, 2, 3 and 4
1027	Add Footnote 3 & 4	M. avium complex probe	Full		\$109.00	each	\$ 114.77	95.0%	10	\$1,090.00	\$57.68	Footnotes 1, 2, 3 and 4. Expect that test will be phasing out in 2023 once the MALDI-TOF is active.
1028	Add Footnote 3 & 4	M. gordonae probe	Full		\$109.00	each	\$ 114.77	95.0%	3	\$327.00	\$17.30	Footnotes 1, 2, 3 and 4. Expect that test will be phasing out in 2023

Department Name: Public Health - Laboratory  
 Fund Center: 160-10

Fee Detail					FY 2023-24 FEE SCHEDULE							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Cost	Proposed % Cost Recovery	Proposed Units of Service	Proposed Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
1029	Add Footnote 3 & 4	M. kansasii probe	Full		\$109.00	each	\$ 114.77	95.0%	1	\$109.00	\$5.77	Footnotes 1, 2, 3 and 4. Expect that test will be phasing out in 2023
1030	Add Footnote 3 & 4	M. tuberculosis amplification test	Full		\$146.00	each	\$ 146.76	99.5%	120	\$17,520.00	\$91.20	Footnotes 1, 2, 3 and 4
1031	Add Footnote 3 & 4	M. tuberculosis complex probe	Full		\$109.00	each	\$ 114.77	95.0%	8	\$872.00	\$46.14	Footnotes 1, 2, 3 and 4. Expect that test will be phasing out in 2023
1032	Add Footnote 3 & 4	Measles Virus PCR	Full		\$157.00	each	\$ 157.45	99.7%	50	\$7,850.00	\$22.71	Footnotes 1, 2, 3 and 4
1033	Add Footnote 3 & 4	Microsporidia special direct exam	Full		\$77.00	each	\$ 77.05	99.9%	2	\$154.00	\$0.10	Footnotes 1, 2, 3 and 4
1034	Add Footnote 3 & 4	Misc. testing per hour	Full		\$130.00	each	\$ 130.77	99.4%	1	\$130.00	\$0.77	Footnotes 1, 2, 3 and 4
1035	Add Footnote 3 & 4	Mumps Virus PCR	Full		\$157.00	each	\$ 157.45	99.7%	40	\$6,280.00	\$18.17	Footnotes 1, 2, 3 and 4
1036	Add Footnote 3 & 4	Mycobacterial isolate ID setup (formerly named Mycobacterial isolate ID)	Full		\$86.00	each	\$ 86.73	99.2%	5	\$430.00	\$3.63	Footnotes 1, 2, 3 and 4
1037	Add Footnote 3 & 4	Mycology isolate ID setup (formerly named Mycologic isolate ID)	Full		\$112.00	each	\$ 112.55	99.5%	60	\$6,720.00	\$33.16	Footnotes 1, 2, 3 and 4
1038	Add Footnote 3 & 4	Mycology culture (formerly named Mycology culture & identification)	Full		\$127.00	each	\$ 127.93	99.3%	10	\$1,270.00	\$9.34	Footnotes 1, 2, 3 and 4
1039	Add Footnote 3 & 4	Mycology direct exam	Full		\$53.00	each	\$ 53.35	99.4%	5	\$265.00	\$1.73	Footnotes 1, 2, 3 and 4
1040	Add Footnote 3 & 4	N gonorrhoeae culture	Full		\$46.00	each	\$ 46.51	98.9%	2	\$92.00	\$1.02	Footnotes 1, 2, 3 and 4
1041	Add Footnote 3 & 4	Non-diagnostic health assessment -single event program	Full		\$85.00	each	\$ 85.00	100.0%	1	\$85.00	\$0.00	Footnotes 1, 2, 3 and 4
1042	Add Footnote 3 & 4	Non-diagnostic health assessment-multiple event program	Full		\$125.00	each	\$ 125.00	100.0%	3	\$375.00	\$0.00	Footnotes 1, 2, 3 and 4
1043	Add Footnote 3 & 4	Norovirus PCR	Full		\$157.00	each	\$ 157.45	99.7%	60	\$9,420.00	\$27.25	Footnotes 1, 2, 3 and 4
1044	Add Footnote 3 & 4	Ova and Parasites	Full		\$99.00	each	\$ 99.14	99.9%	15	\$1,485.00	\$2.10	Footnotes 1, 2, 3 and 4
1045	Add Footnote 3 & 4	Parasite blood smear exam	Full		\$56.00	each	\$ 56.83	98.5%	5	\$280.00	\$4.14	Footnotes 1, 2, 3 and 4
1046	Add Footnote 3 & 4	Parasite Exam - Trichrome	Full		\$70.00	each	\$ 70.52	99.3%	15	\$1,050.00	\$7.78	Footnotes 1, 2, 3 and 4
1047	Add Footnote 3 & 4	Parasite wet mount, feces	Full		\$67.00	each	\$ 67.47	99.3%	2	\$134.00	\$0.94	Footnotes 1, 2, 3 and 4
1048	Add Footnote 3 & 4	Pinworm Examination	Full		\$47.00	each	\$ 47.62	98.7%	2	\$94.00	\$1.24	Footnotes 1, 2, 3 and 4
1049	Add Footnote 3 & 4	Pox virus PCR	Full		\$157.00	each	\$ 157.45	99.7%	50	\$7,850.00	\$22.71	Footnotes 1, 2, 3 and 4
1050	Add Footnote 3 & 4	Pseudomonas Count	Full		\$52.00	each	\$ 52.69	98.7%	5	\$260.00	\$3.47	Footnotes 1, 2, 3 and 4
1051	Add Footnote 3 & 4	Quantiferon batch size 17	Full		\$95.00	each	\$ 95.85	99.1%	80	\$7,600.00	\$68.28	Footnotes 1, 2, 3 and 4
1052	Add Footnote 3 & 4	Rabies DFA	Full		\$170.00	each	\$ 203.60	83.5%	100	\$17,000.00	\$3,359.74	Footnotes 1, 2, 3 and 4
1053	Add Footnote 3 & 4	Pneumonia PCR Panel	Full		\$305.00	each	\$ 321.46	94.9%	20	\$6,100.00	\$329.22	Footnotes 1, 2, 3 and 4
1054	Add Footnote 3 & 4	Respiratory PCR Panel	Full		\$231.00	each	\$ 231.35	99.8%	1,000	\$231,000.00	\$350.79	Footnotes 1, 2, 3 and 4
1055	Add Footnote 3 & 4	RPR, serum	Full		\$34.00	each	\$ 34.67	98.1%	500	\$17,000.00	\$332.79	Footnotes 1, 2, 3 and 4
1056	Add Footnote 3 & 4	RPR, serum, titer	Full		\$52.00	each	\$ 52.10	99.8%	70	\$3,640.00	\$7.09	Footnotes 1, 2, 3 and 4
1057	Add Footnote 3 & 4	Salmonella culture	Full		\$109.00	each	\$ 109.52	99.5%	50	\$5,450.00	\$26.12	Footnotes 1, 2, 3 and 4
1058	Add Footnote 3 & 4	Shigatoxin	Full		\$251.00	each	\$ 251.72	99.7%	15	\$3,765.00	\$10.76	Footnotes 1, 2, 3 and 4

Department Name: Public Health - Laboratory  
 Fund Center: 160-10

Fee Detail					FY 2023-24 FEE SCHEDULE							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Cost	Proposed % Cost Recovery	Proposed Units of Service	Proposed Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
1059	Add Footnote 3 & 4	Shigella culture	Full		\$109.00	each	\$ 109.52	99.5%	10	\$1,090.00	\$5.22	Footnotes 1, 2, 3 and 4
1060	Add Footnote 3 & 4	Standard Parasitology Panel	Full		\$169.00	each	\$ 169.66	99.6%	25	\$4,225.00	\$16.46	Footnotes 1, 2, 3 and 4
1061	Add Footnote 3 & 4	Stool culture	Full		\$324.00	each	\$ 324.01	100.0%	5	\$1,620.00	\$0.05	Footnotes 1, 2, 3 and 4
1062	Add Footnote 3 & 4	Stool culture isolate ID setup (formerly named Stool Culture isolate ID)	Full		\$88.00	each	\$ 88.11	99.9%	30	\$2,640.00	\$3.42	Footnotes 1, 2, 3 and 4
1063	Add Footnote 3 & 4	Streptococcus Culture	Full		\$45.00	each	\$ 45.36	99.2%	2	\$90.00	\$0.72	Footnotes 1, 2, 3 and 4
1064	Add Footnote 3 & 4	Surface Sanitation Culture	Full		\$31.00	each	\$ 31.79	97.5%	2	\$62.00	\$1.59	Footnotes 1, 2, 3 and 4
1065	Add Footnote 3 & 4	TB Culture: non-tissue (formerly named TB culture & identification batch size 2)	Full		\$106.00	each	\$ 119.13	89.0%	450	\$47,700.00	\$5,909.46	Footnotes 1, 2, 3 and 4
1066	Add Footnote 3 & 4	TB fluorescent smear	Full		\$47.00	each	\$ 77.29	60.8%	525	\$24,675.00	\$15,903.65	Footnotes 1, 2, 3 and 4
1067	Add Footnote 3 & 4	Tick Identification	Full		\$36.00	each	\$ 36.20	99.4%	5	\$180.00	\$1.01	Footnotes 1, 2, 3 and 4
1068	Add Footnote 3 & 4	Total coliforms-Ecoli,MPN	Full		\$41.00	each	\$ 47.13	87.0%	1,050	\$43,050.00	\$6,440.62	Footnotes 1, 2, 3 and 4
1069	Add Footnote 3 & 4	Total coliforms-Ecoli, MPN presence/absence batch size 50	Full		\$37.00	each	\$ 40.87	90.5%	925	\$34,225.00	\$3,577.34	Footnotes 1, 2, 3 and 4
1070	Add Footnote 3 & 4	TP-PA	Full		\$77.00	each	\$ 77.93	98.8%	70	\$5,390.00	\$64.81	Footnotes 1, 2, 3 and 4
1071	Add Footnote 3 & 4	Trichomonas amplified assay (Roche)	Full		\$65.00	each	\$ 66.29	98.1%	200	\$13,000.00	\$257.74	Footnotes 1, 2, 3 and 4
1072	Add Footnote 3 & 4	Urgent Charge - per episode (Testing done outside regularly scheduled hours)	Full		\$176.00	each	\$ 176.57	99.7%	5	\$880.00	\$2.87	Footnotes 1, 2, 3 and 4
1073	Add Footnote 3 & 4	Urine culture	Full		\$53.00	each	\$ 53.84	98.4%	10	\$530.00	\$8.36	Footnotes 1, 2, 3 and 4
1074	Add Footnote 3 & 4	Varicella zoster antibody	Full		\$91.00	each	\$ 125.31	72.6%	20	\$1,820.00	\$686.27	Footnotes 1, 2, 3 and 4
1075	Add Footnote 3 & 4	Varicella Zoster PCR	Full		\$157.00	each	\$ 157.45	99.7%	10	\$1,570.00	\$4.54	Footnotes 1, 2, 3 and 4
1076	Add Footnote 3 & 4	VDRL, CSF	Full		\$44.00	each	\$ 44.35	99.2%	30	\$1,320.00	\$10.47	Footnotes 1, 2, 3 and 4
1077	Add Footnote 3 & 4	Vibrio culture	Full		\$86.00	each	\$ 86.21	99.8%	5	\$430.00	\$1.07	Footnotes 1, 2, 3 and 4
1078	Add Footnote 3 & 4	Yersinia enterocolitica culture	Full		\$87.00	each	\$ 87.48	99.5%	5	\$435.00	\$2.40	Footnotes 1, 2, 3 and 4
1079	Add Footnote 3 & 4	Legionella MPN, Water	Full		\$67.00	each	\$ 67.72	98.9%	20	\$1,340.00	\$14.43	Footnotes 1, 2, 3 and 4
1080	Add Footnote 3 & 4	Legionella culture, water	Full		\$208.00	each	\$ 208.39	99.8%	20	\$4,160.00	\$7.78	Footnotes 1, 2, 3 and 4
1081	Add Footnote 3 & 4	Mycoplasma genitalium amplificaton (Roche)	Full		\$75.00	each	\$ 77.38	96.9%	20	\$1,500.00	\$47.55	Footnotes 1, 2, 3 and 4
1082	Add Footnote 3 & 4	Borrelia burgdorferi (Lyme disease) amplification	Full		\$43.00	each	\$ 43.31	99.3%	50	\$2,150.00	\$15.46	Footnotes 1, 2, 3 and 4
1083	Add Footnote 3 & 4	Herpes virus NAAT (formerly named Herpes virus amplification)	Full		\$133.00	each	\$ 133.43	99.7%	60	\$7,980.00	\$25.63	Footnotes 1, 2, 3 and 4
1084	Add Footnote 3 & 4	DNA Sequencing 2-8 isolates	Full		\$2,637.00	each	\$ 2,637.19	100.0%	48	\$126,576.00	\$9.26	Footnotes 1, 2, 3 and 4
1085	Add Footnote 3 & 4	NSSP Fecal coliforms, ocean water	Full		\$123.00	each	\$ 126.29	97.4%	200	\$24,600.00	\$657.20	Footnotes 1, 2, 3 and 4
1086	Add Footnote 3 & 4	NSSP Total coliforms, process water	Full		\$99.00	each	\$ 118.29	83.7%	275	\$27,225.00	\$5,303.73	Footnotes 1, 2, 3 and 4
1087	Add Footnote 3 & 4	NSSP Fecal coliforms, ocean shellfish	Full		\$244.00	each	\$ 260.52	93.7%	50	\$12,200.00	\$825.97	Footnotes 1, 2, 3 and 4
1088	Add Footnote 3 & 4	NSSP Fecal coliforms, process shellfish	Full		\$244.00	each	\$ 249.28	97.9%	50	\$12,200.00	\$264.18	Footnotes 1, 2, 3 and 4

Department Name: Public Health - Laboratory  
 Fund Center: 160-10

Fee Detail					FY 2023-24 FEE SCHEDULE							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Cost	Proposed % Cost Recovery	Proposed Units of Service	Proposed Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
1089	Add Footnote 3 & 4	Hepatitis C virus antibody	Full		\$60.00	each	\$ 60.85	98.6%	50	\$3,000.00	\$42.50	Footnotes 1, 2, 3 and 4
1091	Add Footnote 3 & 4	Coronavirus SARS-CoV2 Xpert RT_PCR	Full		\$108.00	each	\$ 109.65	98.5%	5	\$540.00	\$8.26	Footnotes 1, 2, 3 and 4
1092	Add Footnote 3 & 4	Coronavirus SARS-CoV2 Roche RT_PCR	Full		\$54.00	each	\$ 54.73	98.7%	5,000	\$270,000.00	\$3,632.85	Footnotes 1, 2, 3 and 4
1093	Add Footnote 3 & 4	Influenza virus /SARS-CoV2 PCR - CDC Flu SC2 RT-PCR	Full		\$142.00	each	\$ 142.86	99.4%	1,000	\$142,000.00	\$857.23	Footnotes 1, 2, 3 and 4
1095	Add Footnote 3 & 4	Sequencing SC2 type	Full		\$240.00	each	\$ 240.85	99.6%	360	\$86,400.00	\$306.66	Footnotes 1, 2, 3 and 4
1096	Add Footnote 3 & 4	MALDI-TOF Identification: Bacteriology	Full		\$84.00	each	\$ 84.68	99.2%	200	\$16,800.00	\$136.80	Footnotes 1, 2, 3 and 4
1097	Add Footnote 3 & 4	MALDI-TOF Identification: Mycobacteriology	Full		\$114.00	each	\$ 114.92	99.2%	100	\$11,400.00	\$91.91	Footnotes 1, 2, 3 and 4
1098	Add Footnote 3 & 4	MALDI-TOF Identification: Mycology	Full		\$100.00	each	\$ 100.61	99.4%	50	\$5,000.00	\$30.41	Footnotes 1, 2, 3 and 4
1099	Add Footnote 3 & 4	Reference laboratory sendout	Full		\$0.00	each	\$ -		25	\$0.00	\$0.00	Footnotes 1, 2, 3 and 4
1100	Add Footnote 3 & 4	SARS-CoV-2/Flu/RSV Xpert PCR	Full		\$145.00	each	\$ 145.99	99.3%	120	\$17,400.00	\$119.18	Footnotes 1, 2, 3 and 4
1101	Add Footnote 3 & 4	Bordetella NAAT	Full		\$127.00	each	\$ 127.15	99.9%	10	\$1,270.00	\$1.52	Footnotes 1, 2, 3 and 4
1102	Add Footnote 3 & 4	TB culture: tissue	Full		\$153.00	each	\$ 153.07	100.0%	75	\$11,475.00	\$5.18	Footnotes 1, 2, 3 and 4
1103	Add Footnote 3 & 4	Salmonella/Shigella serogrouping	Full		\$65.00	each	\$ 65.53	99.2%	25	\$1,625.00	\$13.31	Footnotes 1, 2, 3 and 4
1104	Add Footnote 3 & 4	Mycology identification	Full		\$94.00	each	\$ 94.78	99.2%	60	\$5,640.00	\$46.79	Footnotes 1, 2, 3 and 4
1105	NEW	Legionella urinary antigen - NEW	Full		\$77.00	each	\$ 77.72	99.1%	12	\$924.00	\$8.64	Footnotes 1, 2, 3 and 4
										\$2,526,688.00	\$92,718.68	

Fee Statistics	
<b>Fee Category</b>	
	1 New
	0 Decreased
	0 Increased
	101 Unchanged
	0 Deleted
	<b>102 Total</b>
<b>Board Discretion Type</b>	
	102 Full
	0 Partial
	0 None
	<b>102 Total</b>

**Department Name:** Public Health - Laboratory  
**Fund Center:** 160-10

Footnote #	Footnote Narrative
1	Under the authority of the Health Officer and mandate of the Department of Public Health to prevent the spread of communicable diseases or occurrence of additional cases (California Health and Safety Code section 120175), fees may be waived or reduced to an amount a patient is able to pay
2	Sliding fee scale based on household income and number of dependants
3	Fees may be reduced to comply with state or federal mandates and funding available.
4	At the discretion of the laboratory director, a substitute test may be used in place of an ordered test if the substitute test has comparable or superior performance characteristics and minimally detects all targets of the ordered test. Circumstances that may prompt substitution include supply inventory and overall cost efficiency. The fee charged will be the lower fee between the substitute and ordered tests.

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
<b>1000</b>		<b>Fund Center-16602 Drug and Alcohol Treatment Programs</b>										
1000	Delete	Outpatient Services	Full		\$75.17	Per 15 minutes	\$75.17	100.0%		\$0.00	\$0.00	Footnote 1
1001	Delete	Intensive Outpatient Services	Full		\$48.40	Per 15 minutes	\$48.40	100.0%		\$0.00	\$0.00	Footnote 1
1002	Delete	Recovery Services	Full		\$54.59	Per 15 minutes	\$54.59	100.0%		\$0.00	\$0.00	Footnote 1
1003	Delete	Case Management	Full		\$68.99	Per 15 minutes	\$68.99	100.0%		\$0.00	\$0.00	Footnote 1
1004	Delete	Ambulatory Withdrawal Management	Full		\$187.27	Per Day	\$187.27	100.0%		\$0.00	\$0.00	Footnote 1
1005	Delete	Physician Consultation	Full		\$96.41	Per 15 minutes	\$96.41	100.0%		\$0.00	\$0.00	Footnote 1
1006	Delete	Residential Level 3.1	Full		\$242.85	Day	\$242.85	100.0%		\$0.00	\$0.00	Footnote 1
1007	Delete	Optional Medication Assisted Treatment	Full		\$91.15	Per 15 minutes	\$91.15	100.0%		\$0.00	\$0.00	Footnote 1
1008	Delete	Residential Level 3.3	Full		\$236.13	Day	\$236.13	100.0%		\$0.00	\$0.00	Footnote 1
1009	Delete	Residential Level 3.5	Full		\$279.40	Day	\$279.40	100.0%		\$0.00	\$0.00	Footnote 1
1010	Delete	Withdrawal Management	Full		\$361.92	Day	\$361.92	100.0%		\$0.00	\$0.00	Footnote 1
1011	Delete	Partial Hospitalization	Full		\$190.35	Day	\$190.35	100.0%		\$0.00	\$0.00	Footnote 1
<b>2000</b>		<b>Fund Center-16601 Specialty Mental Health Services</b>										
2001	Delete	Mental Health Services	Full		\$6.52	minute	\$6.52	100.0%		\$0.00	\$0.00	Footnote 1
2002	Delete	Medication Support	Full		\$9.69	minute	\$9.69	100.0%		\$0.00	\$0.00	Footnote 1
2003	Delete	Day Treatment: Intensive (Full Day)	Full		\$507.12	day	\$507.12	100.0%		\$0.00	\$0.00	Footnote 1
2004	Delete	Psychiatric Health Facility (PHF)	Full		\$2,374.86	day	\$2,374.86	100.0%		\$0.00	\$0.00	Footnote 1
<b>3000</b>		<b>SMHS 24 Hour Services</b>										
3001	New	H0019-Adult Residential	None	CA section 1115(a) CalAIM	\$ 207.38	24 hours	\$ 207.38	100.0%		\$0.00	\$0.00	Footnote 1,2
3002	New	H0018-Adult Crisis Residential	None	CA section 1115(a) CalAIM	\$ 668.99	24 hours	\$ 668.99	100.0%		\$0.00	\$0.00	Footnote 1,2
3003	New	H2013-Psychiatric Health Facility	None	CA section 1115(a) CalAIM	\$ 2,085.82	24 hours	\$ 2,085.82	100.0%		\$0.00	\$0.00	Footnote 1,2
<b>4000</b>		<b>SMHS Day Services Rates</b>										
4001	New	H2012-Day Treatment Intensive: Full Day	None	CA section 1115(a) CalAIM	\$ 758.44	Day	\$ 758.44	100.0%		\$0.00	\$0.00	Footnote 1,2
4002	New	H2012-Day Treatment Intensive: Half Day	None	CA section 1115(a) CalAIM	\$ 505.63	Half Day	\$ 505.63	100.0%		\$0.00	\$0.00	Footnote 1,2
4003	New	H2012-Day Rehabilitation: Full Day	None	CA section 1115(a) CalAIM	\$ 353.83	Day	\$ 353.83	100.0%		\$0.00	\$0.00	Footnote 1,2
4004	New	H2012-Day Rehabilitation: Half Day	None	CA section 1115(a) CalAIM	\$ 235.89	Half Day	\$ 235.89	100.0%		\$0.00	\$0.00	Footnote 1,2
4005	New	S9484-Crisis Stabilization	None	CA section 1115(a) CalAIM	\$ 285.08	Day	\$ 285.08	100.0%		\$0.00	\$0.00	
<b>5000</b>		<b>SMHS Mobile Crisis Rates</b>										
5001	New	A0140-Transportation mileage	None	CA section 1115(a) CalAIM	\$ 0.65	Per mile	\$ 0.65	100.0%		\$0.00	\$0.00	Footnote 1,2
5002	New	H2011-Mobile Crisis	None	CA section 1115(a) CalAIM	\$ 2,951.49	Encounter	\$ 2,951.49	100.0%		\$0.00	\$0.00	Footnote 1,2
5003	New	T2007-Transportation, staff time, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 71.51	Per 15 minutes	\$ 71.51	100.0%		\$0.00	\$0.00	Footnote 1,2
<b>6000</b>		<b>SMHS Outpatient Rate</b>										
6001	New	90785-Licensed PhysicianInteractive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6002	New	90785-Physician AssistantInteractive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6003	New	90785-Nurse PractitionerInteractive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6004	New	90785-Registered NurseInteractive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6005	New	90785-Clinical Nurse SpecialistInteractive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6006	New	90785-Licensed Vocational NurseInteractive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6007	New	90785-Registered PharmacistInteractive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6008	New	90785-Psychiatric TechnicianInteractive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6009	New	90785-Psychologist (Licensed or Waivered)Interactive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6010	New	90785-MFT/LPCC (Licensed, Waivered or Registered)Interactive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6011	New	90785-LCSW (Licensed, Waivered or Registered)Interactive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6012	New	90785-Occupational TherapistInteractive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6013	New	90785-Mental Health Rehabilitation SpecialistInteractive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6014	New	90785-Other Qualified PractitionerInteractive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6015	New	90791-Licensed PhysicianPsychiatric Diagnostic Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6016	New	90791-Physician AssistantPsychiatric Diagnostic Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6017	New	90791-Nurse PractitionerPsychiatric Diagnostic Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6018	New	90791-Clinical Nurse SpecialistPsychiatric Diagnostic Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6019	New	90791-Psychologist (Licensed or Waivered)Psychiatric Diagnostic Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6020	New	90791-MFT/LPCC (Licensed, Waivered or Registered)Psychiatric Diagnostic Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6021	New	90791-LCSW (Licensed, Waivered or Registered)Psychiatric Diagnostic Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6022	New	90792-Licensed PhysicianPsychiatric Diagnostic Evaluation with Medical Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6023	New	90792-Physician AssistantPsychiatric Diagnostic Evaluation with Medical Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6024	New	90792-Nurse PractitionerPsychiatric Diagnostic Evaluation with Medical Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6025	New	90792-Clinical Nurse SpecialistPsychiatric Diagnostic Evaluation with Medical Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6026	New	90832-Licensed PhysicianPsychotherapy, 30 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 627.21	Per 30 minutes	\$ 627.21	100.0%		\$0.00	\$0.00	Footnote 1,2
6027	New	90832-Physician AssistantPsychotherapy, 30 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 281.30	Per 30 minutes	\$ 281.30	100.0%		\$0.00	\$0.00	Footnote 1,2
6028	New	90832-Nurse PractitionerPsychotherapy, 30 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 311.90	Per 30 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6029	New	90832-Clinical Nurse SpecialistPsychotherapy, 30 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 311.90	Per 30 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6030	New	90832-Psychologist (Licensed or Waivered)Psychotherapy, 30 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 252.24	Per 30 minutes	\$ 252.24	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6031	New	90832-MFT/LPCC (Licensed, Waivered or Registered)Psychotherapy, 30 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 163.23	Per 30 minutes	\$ 163.23	100.0%		\$0.00	\$0.00	Footnote 1,2
6032	New	90832-LCSW (Licensed, Waivered or Registered)Psychotherapy, 30 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 163.23	Per 30 minutes	\$ 163.23	100.0%		\$0.00	\$0.00	Footnote 1,2
6033	New	90833-Licensed PhysicianPsychotherapy, 30 Minutes with Patient when Performed with an Evaluation and Management Service	None	CA section 1115(a) CalAIM	\$ 627.21	Per 30 minutes	\$ 627.21	100.0%		\$0.00	\$0.00	Footnote 1,2
6034	New	90833-Physician AssistantPsychotherapy, 30 Minutes with Patient when Performed with an Evaluation and Management Service	None	CA section 1115(a) CalAIM	\$ 281.30	Per 30 minutes	\$ 281.30	100.0%		\$0.00	\$0.00	Footnote 1,2
6035	New	90833-Nurse PractitionerPsychotherapy, 30 Minutes with Patient when Performed with an Evaluation and Management Service	None	CA section 1115(a) CalAIM	\$ 311.90	Per 30 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6036	New	90833-Clinical Nurse SpecialistPsychotherapy, 30 Minutes with Patient when Performed with an Evaluation and Management Service	None	CA section 1115(a) CalAIM	\$ 311.90	Per 30 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6037	New	90834-Licensed PhysicianPsychotherapy, 45 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 940.82	Per 45 minutes	\$ 940.82	100.0%		\$0.00	\$0.00	Footnote 1,2
6038	New	90834-Physician AssistantPsychotherapy, 45 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 421.95	Per 45 minutes	\$ 421.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6039	New	90834-Nurse PractitionerPsychotherapy, 45 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 467.85	Per 45 minutes	\$ 467.85	100.0%		\$0.00	\$0.00	Footnote 1,2
6040	New	90834-Clinical Nurse SpecialistPsychotherapy, 45 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 467.85	Per 45 minutes	\$ 467.85	100.0%		\$0.00	\$0.00	Footnote 1,2
6041	New	90834-Psychologist (Licensed or Waivered)Psychotherapy, 45 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 378.37	Per 45 minutes	\$ 378.37	100.0%		\$0.00	\$0.00	Footnote 1,2
6042	New	90834-MFT/LPCC (Licensed, Waivered or Registered)Psychotherapy, 45 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 244.85	Per 45 minutes	\$ 244.85	100.0%		\$0.00	\$0.00	Footnote 1,2
6043	New	90834-LCSW (Licensed, Waivered or Registered)Psychotherapy, 45 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 244.85	Per 45 minutes	\$ 244.85	100.0%		\$0.00	\$0.00	Footnote 1,2
6044	New	90836-Licensed PhysicianPsychotherapy, 45 Minutes with Patient when Performed with an Evaluation and Management Service	None	CA section 1115(a) CalAIM	\$ 940.82	Per 45 minutes	\$ 940.82	100.0%		\$0.00	\$0.00	Footnote 1,2
6045	New	90836-Physician AssistantPsychotherapy, 45 Minutes with Patient when Performed with an Evaluation and Management Service	None	CA section 1115(a) CalAIM	\$ 421.95	Per 45 minutes	\$ 421.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6046	New	90836-Nurse PractitionerPsychotherapy, 45 Minutes with Patient when Performed with an Evaluation and Management Service	None	CA section 1115(a) CalAIM	\$ 467.85	Per 45 minutes	\$ 467.85	100.0%		\$0.00	\$0.00	Footnote 1,2
6047	New	90836-Clinical Nurse SpecialistPsychotherapy, 45 Minutes with Patient when Performed with an Evaluation and Management Service	None	CA section 1115(a) CalAIM	\$ 467.85	Per 45 minutes	\$ 467.85	100.0%		\$0.00	\$0.00	Footnote 1,2
6048	New	90837-Licensed PhysicianPsychotherapy, 60 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6049	New	90837-Physician AssistantPsychotherapy, 60 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6050	New	90837-Nurse PractitionerPsychotherapy, 60 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6051	New	90837-Clinical Nurse SpecialistPsychotherapy, 60 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6052	New	90837-Psychologist (Licensed or Waivered)Psychotherapy, 60 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6053	New	90837-MFT/LPCC (Licensed, Waivered or Registered)Psychotherapy, 60 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 326.47	Per 60 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6054	New	90837-LCSW (Licensed, Waivered or Registered)Psychotherapy, 60 Minutes with Patient	None	CA section 1115(a) CalAIM	\$ 326.47	Per 60 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6055	New	90838-Licensed PhysicianPsychotherapy, 60 Minutes with Patient when Performed with an Evaluation and Management Service	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6056	New	90838-Physician AssistantPsychotherapy, 60 Minutes with Patient when Performed with an Evaluation and Management Service	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6057	New	90838-Nurse PractitionerPsychotherapy, 60 Minutes with Patient when Performed with an Evaluation and Management Service	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6058	New	90838-Clinical Nurse SpecialistPsychotherapy, 60 Minutes with Patient when Performed with an Evaluation and Management Service	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6059	New	90839-Licensed PhysicianPsychotherapy for Crisis, First 30-74 Minutes	None	CA section 1115(a) CalAIM	\$ 1,087.17	30-74 minutes	\$ 1,087.17	100.0%		\$0.00	\$0.00	Footnote 1,2
6060	New	90839-Physician AssistantPsychotherapy for Crisis, First 30-74 Minutes	None	CA section 1115(a) CalAIM	\$ 487.59	30-74 minutes	\$ 487.59	100.0%		\$0.00	\$0.00	Footnote 1,2
6061	New	90839-Nurse PractitionerPsychotherapy for Crisis, First 30-74 Minutes	None	CA section 1115(a) CalAIM	\$ 540.62	30-74 minutes	\$ 540.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6062	New	90839-Clinical Nurse SpecialistPsychotherapy for Crisis, First 30-74 Minutes	None	CA section 1115(a) CalAIM	\$ 540.62	30-74 minutes	\$ 540.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6063	New	90839-Psychologist (Licensed or Waivered)Psychotherapy for Crisis, First 30-74 Minutes	None	CA section 1115(a) CalAIM	\$ 437.22	30-74 minutes	\$ 437.22	100.0%		\$0.00	\$0.00	Footnote 1,2
6064	New	90839-MFT/LPCC (Licensed, Waivered or Registered)Psychotherapy for Crisis, First 30-74 Minutes	None	CA section 1115(a) CalAIM	\$ 282.94	30-74 minutes	\$ 282.94	100.0%		\$0.00	\$0.00	Footnote 1,2
6065	New	90839-LCSW (Licensed, Waivered or Registered)Psychotherapy for Crisis, First 30-74 Minutes	None	CA section 1115(a) CalAIM	\$ 282.94	30-74 minutes	\$ 282.94	100.0%		\$0.00	\$0.00	Footnote 1,2
6066	New	90840-Licensed PhysicianPsychotherapy for Crisis, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 627.21	Per 30 minutes	\$ 627.21	100.0%		\$0.00	\$0.00	Footnote 1,2
6067	New	90840-Physician AssistantPsychotherapy for Crisis, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 281.30	Per 30 minutes	\$ 281.30	100.0%		\$0.00	\$0.00	Footnote 1,2
6068	New	90840-Nurse PractitionerPsychotherapy for Crisis, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 311.90	Per 30 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6069	New	90840-Clinical Nurse SpecialistPsychotherapy for Crisis, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 311.90	Per 30 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6070	New	90840-Psychologist (Licensed or Waivered)Psychotherapy for Crisis, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 252.24	Per 30 minutes	\$ 252.24	100.0%		\$0.00	\$0.00	Footnote 1,2
6071	New	90840-MFT/LPCC (Licensed, Waivered or Registered)Psychotherapy for Crisis, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 163.23	Per 30 minutes	\$ 163.23	100.0%		\$0.00	\$0.00	Footnote 1,2
6072	New	90840-LCSW (Licensed, Waivered or Registered)Psychotherapy for Crisis, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 163.23	Per 30 minutes	\$ 163.23	100.0%		\$0.00	\$0.00	Footnote 1,2
6073	New	90845-Licensed PhysicianPsychoanalysis, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6074	New	90845-Physician AssistantPsychoanalysis, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6075	New	90845-Nurse PractitionerPsychoanalysis, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6076	New	90845-Clinical Nurse SpecialistPsychoanalysis, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6077	New	90845-Psychologist (Licensed or Waivered)Psychoanalysis, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6078	New	90845-MFT/LPCC (Licensed, Waivered or Registered)Psychoanalysis, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6079	New	90845-LCSW (Licensed, Waivered or Registered)Psychoanalysis, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6080	New	90847-Licensed PhysicianFamily Psychotherapy [Conjoint Psychotherapy] (with Patient Present), 50 Minutes	None	CA section 1115(a) CalAIM	\$ 1,045.35	Per 50 minutes	\$ 1,045.35	100.0%		\$0.00	\$0.00	Footnote 1,2
6081	New	90847-Physician AssistantFamily Psychotherapy [Conjoint Psychotherapy] (with Patient Present), 50 Minutes	None	CA section 1115(a) CalAIM	\$ 468.84	Per 50 minutes	\$ 468.84	100.0%		\$0.00	\$0.00	Footnote 1,2
6082	New	90847-Nurse PractitionerFamily Psychotherapy [Conjoint Psychotherapy] (with Patient Present), 50 Minutes	None	CA section 1115(a) CalAIM	\$ 519.83	Per 50 minutes	\$ 519.83	100.0%		\$0.00	\$0.00	Footnote 1,2
6083	New	90847-Clinical Nurse SpecialistFamily Psychotherapy [Conjoint Psychotherapy] (with Patient Present), 50 Minutes	None	CA section 1115(a) CalAIM	\$ 519.83	Per 50 minutes	\$ 519.83	100.0%		\$0.00	\$0.00	Footnote 1,2
6084	New	90847-Psychologist (Licensed or Waivered)Family Psychotherapy [Conjoint Psychotherapy] (with Patient Present), 50 Minutes	None	CA section 1115(a) CalAIM	\$ 420.41	Per 50 minutes	\$ 420.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6085	New	90847-MFT/LPCC (Licensed, Waivered or Registered)Family Psychotherapy [Conjoint Psychotherapy] (with Patient Present), 50 Minutes	None	CA section 1115(a) CalAIM	\$ 272.06	Per 50 minutes	\$ 272.06	100.0%		\$0.00	\$0.00	Footnote 1,2
6086	New	90847-LCSW (Licensed, Waivered or Registered)Family Psychotherapy [Conjoint Psychotherapy] (with Patient Present), 50 Minutes	None	CA section 1115(a) CalAIM	\$ 272.06	Per 50 minutes	\$ 272.06	100.0%		\$0.00	\$0.00	Footnote 1,2
6087	New	90849 -Licensed PhysicianMultiple-Family Group Psychotherapy, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 69.69	Per 15 minutes	\$ 69.69	100.0%		\$0.00	\$0.00	Footnote 1,2
6088	New	90849 -Physician AssistantMultiple-Family Group Psychotherapy, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 31.26	Per 15 minutes	\$ 31.26	100.0%		\$0.00	\$0.00	Footnote 1,2
6089	New	90849 -Nurse PractitionerMultiple-Family Group Psychotherapy, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
6090	New	90849 -Clinical Nurse SpecialistMultiple-Family Group Psychotherapy, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
6091	New	90849 -Psychologist (Licensed or Waivered)Multiple-Family Group Psychotherapy, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 28.03	Per 15 minutes	\$ 28.03	100.0%		\$0.00	\$0.00	Footnote 1,2
6092	New	90849 -MFT/LPCC (Licensed, Waivered or Registered)Multiple-Family Group Psychotherapy, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
6093	New	90849 -LCSW (Licensed, Waivered or Registered)Multiple-Family Group Psychotherapy, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
6094	New	90853 -Licensed PhysicianGroup Psychotherapy (Other Than of a Multiple Family Group), 15 Minutes	None	CA section 1115(a) CalAIM	\$ 69.69	Per 15 minutes	\$ 69.69	100.0%		\$0.00	\$0.00	Footnote 1,2
6095	New	90853 -Physician AssistantGroup Psychotherapy (Other Than of a Multiple Family Group), 15 Minutes	None	CA section 1115(a) CalAIM	\$ 31.26	Per 15 minutes	\$ 31.26	100.0%		\$0.00	\$0.00	Footnote 1,2
6096	New	90853 -Nurse PractitionerGroup Psychotherapy (Other Than of a Multiple Family Group), 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
6097	New	90853 -Clinical Nurse SpecialistGroup Psychotherapy (Other Than of a Multiple Family Group), 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6098	New	90853 -Psychologist (Licensed or Waivered)Group Psychotherapy (Other Than of a Multiple Family Group), 15 Minutes	None	CA section 1115(a) CalAIM	\$ 28.03	Per 15 minutes	\$ 28.03	100.0%		\$0.00	\$0.00	Footnote 1,2
6099	New	90853 -MFT/LPCC (Licensed, Waivered or Registered)Group Psychotherapy (Other Than of a Multiple Family Group), 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
6100	New	90853 -LCSW (Licensed, Waivered or Registered)Group Psychotherapy (Other Than of a Multiple Family Group), 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
6101	New	90865-Licensed PhysicianNarcosynthesis for Psychiatric Diagnostic and Therapeutic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6102	New	90865-Physician AssistantNarcosynthesis for Psychiatric Diagnostic and Therapeutic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6103	New	90865-Nurse PractitionerNarcosynthesis for Psychiatric Diagnostic and Therapeutic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6104	New	90865-Clinical Nurse SpecialistNarcosynthesis for Psychiatric Diagnostic and Therapeutic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6105	New	90867-Licensed PhysicianTherapeutic Repetitive Transcranial Magnetic Stimulation (TMS) Treatment; Initial, Including Cortical Mapping, Motor Threshold Determination, Delivery and Management	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6106	New	90867-Physician AssistantTherapeutic Repetitive Transcranial Magnetic Stimulation (TMS) Treatment; Initial, Including Cortical Mapping, Motor Threshold Determination, Delivery and Management	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6107	New	90867-Nurse PractitionerTherapeutic Repetitive Transcranial Magnetic Stimulation (TMS) Treatment; Initial, Including Cortical Mapping, Motor Threshold Determination, Delivery and Management	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6108	New	90867-Clinical Nurse SpecialistTherapeutic Repetitive Transcranial Magnetic Stimulation (TMS) Treatment; Initial, Including Cortical Mapping, Motor Threshold Determination, Delivery and Management	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6109	New	90868-Licensed PhysicianSubsequent Delivery and Management of TMS, per Session	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6110	New	90868-Physician AssistantSubsequent Delivery and Management of TMS, per Session	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6111	New	90868-Nurse PractitionerSubsequent Delivery and Management of TMS, per Session	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6112	New	90868-Clinical Nurse SpecialistSubsequent Delivery and Management of TMS, per Session	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6113	New	90869-Licensed PhysicianTMS Treatment Subsequent Motor Threshold Re-Determination with Delivery and Management	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6114	New	90869-Physician AssistantTMS Treatment Subsequent Motor Threshold Re-Determination with Delivery and Management	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6115	New	90869-Nurse PractitionerTMS Treatment Subsequent Motor Threshold Re-Determination with Delivery and Management	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6116	New	90869-Clinical Nurse SpecialistTMS Treatment Subsequent Motor Threshold Re-Determination with Delivery and Management	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6117	New	90870-Licensed PhysicianElectroconvulsive e Therapy (Includes Necessary Monitoring)	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6118	New	90870-Physician AssistantElectroconvulsive e Therapy (Includes Necessary Monitoring)	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6119	New	90870-Nurse PractitionerElectroconvulsive e Therapy (Includes Necessary Monitoring)	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6120	New	90870-Clinical Nurse SpecialistElectroconvulsive e Therapy (Includes Necessary Monitoring)	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6121	New	90880-Licensed PhysicianHypnotherapy	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6122	New	90880-Physician AssistantHypnotherapy	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6123	New	90880-Nurse PractitionerHypnotherapy	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6124	New	90880-Clinical Nurse SpecialistHypnotherapy	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6125	New	90880-Psychologist (Licensed or Waivered)Hypnotherapy	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6126	New	90880-MFT/LPCC (Licensed, Waivered or Registered)Hypnotherapy	None	CA section 1115(a) CalAIM	\$ 326.47	Per 60 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6127	New	90880-LCSW (Licensed, Waivered or Registered)Hypnotherapy	None	CA section 1115(a) CalAIM	\$ 326.47	Per 60 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6128	New	90885-Licensed PhysicianPsychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6129	New	90885-Physician AssistantPsychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6130	New	90885-Nurse PractitionerPsychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6131	New	90885-Clinical Nurse SpecialistPsychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6132	New	90885-Psychologist (Licensed or Waivered)Psychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6133	New	90885-MFT/LPCC (Licensed, Waivered or Registered)Psychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6134	New	90885-LCSW (Licensed, Waivered or Registered)Psychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6135	New	90887-Licensed PhysicianInterpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6136	New	90887-Physician AssistantInterpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6137	New	90887-Nurse PractitionerInterpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6138	New	90887-Registered NurseInterpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6139	New	90887-Clinical Nurse SpecialistInterpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6140	New	90887-Registered PharmacistInterpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6141	New	90887-Psychologist (Licensed or Waivered)Interpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6142	New	90887-MFT/LPCC (Licensed, Waivered or Registered)Interpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6143	New	90887-LCSW (Licensed, Waivered or Registered)Interpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6144	New	90887-Occupational TherapistInterpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6145	New	96105-Licensed PhysicianAssessment of Aphasia, per Hour	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6146	New	96105-Physician AssistantAssessment of Aphasia, per Hour	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6147	New	96105-Nurse PractitionerAssessment of Aphasia, per Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6148	New	96105-Clinical Nurse SpecialistAssessment of Aphasia, per Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6149	New	96105-Psychologist (Licensed or Waivered)Assessment of Aphasia, per Hour	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6150	New	96110-Licensed PhysicianDevelopmental Screening, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6151	New	96110-Physician AssistantDevelopmental Screening, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6152	New	96110-Nurse PractitionerDevelopmental Screening, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6153	New	96110-Registered NurseDevelopmental Screening, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6154	New	96110-Clinical Nurse SpecialistDevelopmental Screening, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6155	New	96110-Psychologist (Licensed or Waivered)Developmental Screening, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6156	New	96110-MFT/LPCC (Licensed, Waivered or Registered)Developmental Screening, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6157	New	96110-LCSW (Licensed, Waivered or Registered)Developmental Screening, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6158	New	96110-Occupational TherapistDevelopmental Screening, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6159	New	96112-Licensed PhysicianDevelopmental Testing, First Hour	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6160	New	96112-Physician AssistantDevelopmental Testing, First Hour	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6161	New	96112-Nurse PractitionerDevelopmental Testing, First Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6162	New	96112-Clinical Nurse SpecialistDevelopmental Testing, First Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6163	New	96112-Psychologist (Licensed or Waivered)Developmental Testing, First Hour	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6164	New	96112-Occupational TherapistDevelopmental Testing, First Hour	None	CA section 1115(a) CalAIM	\$ 434.58	Per 60 minutes	\$ 434.58	100.0%		\$0.00	\$0.00	Footnote 1,2
6165	New	96113-Licensed PhysicianDevelopmental Testing, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 627.21	Per 30 minutes	\$ 627.21	100.0%		\$0.00	\$0.00	Footnote 1,2
6166	New	96113-Physician AssistantDevelopmental Testing, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 281.30	Per 30 minutes	\$ 281.30	100.0%		\$0.00	\$0.00	Footnote 1,2
6167	New	96113-Nurse PractitionerDevelopmental Testing, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 311.90	Per 30 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6168	New	96113-Clinical Nurse SpecialistDevelopmental Testing, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 311.90	Per 30 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6169	New	96113-Psychologist (Licensed or Waivered)Developmental Testing, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 252.24	Per 30 minutes	\$ 252.24	100.0%		\$0.00	\$0.00	Footnote 1,2
6170	New	96113-Occupational TherapistDevelopmental Testing, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 217.29	Per 30 minutes	\$ 217.29	100.0%		\$0.00	\$0.00	Footnote 1,2
6171	New	96116-Licensed PhysicianNeurobehavioral Status Exam, First Hour	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6172	New	96116-Physician AssistantNeurobehavioral Status Exam, First Hour	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6173	New	96116-Nurse PractitionerNeurobehavioral Status Exam, First Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6174	New	96116-Registered NurseNeurobehavioral Status Exam, First Hour	None	CA section 1115(a) CalAIM	\$ 509.53	Per 60 minutes	\$ 509.53	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6175	New	96116-Clinical Nurse SpecialistNeurobehavioral Status Exam, First Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6176	New	96116-Psychologist (Licensed or Waivered)Neurobehavioral Status Exam, First Hour	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6177	New	96116-MFT/LPCC (Licensed, Waivered or Registered)Neurobehavioral Status Exam, First Hour	None	CA section 1115(a) CalAIM	\$ 326.47	Per 60 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6178	New	96116-LCSW (Licensed, Waivered or Registered)Neurobehavioral Status Exam, First Hour	None	CA section 1115(a) CalAIM	\$ 326.47	Per 60 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6179	New	96121-Licensed PhysicianNeurobehavioral Status Exam, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6180	New	96121-Physician AssistantNeurobehavioral Status Exam, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6181	New	96121-Nurse PractitionerNeurobehavioral Status Exam, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6182	New	96121-Registered NurseNeurobehavioral Status Exam, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 509.53	Per 60 minutes	\$ 509.53	100.0%		\$0.00	\$0.00	Footnote 1,2
6183	New	96121-Clinical Nurse SpecialistNeurobehavioral Status Exam, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6184	New	96121-Psychologist (Licensed or Waivered)Neurobehavioral Status Exam, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6185	New	96121-MFT/LPCC (Licensed, Waivered or Registered)Neurobehavioral Status Exam, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 326.47	Per 60 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6186	New	96121-LCSW (Licensed, Waivered or Registered)Neurobehavioral Status Exam, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 326.47	Per 60 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6187	New	96125-Licensed PhysicianStandardized Cognitive Performance Testing, per Hour	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6188	New	96125-Physician AssistantStandardized Cognitive Performance Testing, per Hour	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6189	New	96125-Nurse PractitionerStandardized Cognitive Performance Testing, per Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6190	New	96125-Clinical Nurse SpecialistStandardized Cognitive Performance Testing, per Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6191	New	96125-Psychologist (Licensed or Waivered)Standardized Cognitive Performance Testing, per Hour	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6192	New	96127-Licensed PhysicianBrief Emotional/Behavioral Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6193	New	96127-Physician AssistantBrief Emotional/Behavioral Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6194	New	96127-Nurse PractitionerBrief Emotional/Behavioral Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6195	New	96127-Registered NurseBrief Emotional/Behavioral Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6196	New	96127-Clinical Nurse SpecialistBrief Emotional/Behavioral Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6197	New	96127-Psychologist (Licensed or Waivered)Brief Emotional/Behavioral Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6198	New	96127-MFT/LPCC (Licensed, Waivered or Registered)Brief Emotional/Behavioral Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6199	New	96127-LCSW (Licensed, Waivered or Registered)Brief Emotional/Behavioral Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6200	New	96130-Licensed PhysicianPsychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6201	New	96130-Physician AssistantPsychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6202	New	96130-Nurse PractitionerPsychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6203	New	96130-Clinical Nurse SpecialistPsychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6204	New	96130-Psychologist (Licensed or Waivered)Psychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6205	New	96131-Licensed PhysicianPsychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6206	New	96131-Physician AssistantPsychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6207	New	96131-Nurse PractitionerPsychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6208	New	96131-Clinical Nurse SpecialistPsychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6209	New	96131-Psychologist (Licensed or Waivered)Psychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6210	New	96132-Licensed PhysicianNeuropsychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6211	New	96132-Physician AssistantNeuropsychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6212	New	96132-Nurse PractitionerNeuropsychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6213	New	96132-Clinical Nurse SpecialistNeuropsychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6214	New	96132-Psychologist (Licensed or Waivered)Neuropsychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6215	New	96133-Licensed PhysicianNeuropsychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6216	New	96133-Physician AssistantNeuropsychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6217	New	96133-Nurse PractitionerNeuropsychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6218	New	96133-Clinical Nurse SpecialistNeuropsychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6219	New	96133-Psychologist (Licensed or Waivered)Neuropsychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6220	New	96136-Licensed PhysicianPsychological or Neuropsychological Test Administration, First 30 Minutes	None	CA section 1115(a) CalAIM	\$ 627.21	Per 30 minutes	\$ 627.21	100.0%		\$0.00	\$0.00	Footnote 1,2
6221	New	96136-Physician AssistantPsychological or Neuropsychological Test Administration, First 30 Minutes	None	CA section 1115(a) CalAIM	\$ 281.30	Per 30 minutes	\$ 281.30	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6222	New	96136-Nurse PractitionerPsychological or Neuropsychological Test Administration, First 30 Minutes	None	CA section 1115(a) CalAIM	\$ 311.90	Per 30 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6223	New	96136-Clinical Nurse SpecialistPsychological or Neuropsychological Test Administration, First 30 Minutes	None	CA section 1115(a) CalAIM	\$ 311.90	Per 30 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6224	New	96136-Psychologist (Licensed or Waivered)Psychological or Neuropsychological Test Administration, First 30 Minutes	None	CA section 1115(a) CalAIM	\$ 252.24	Per 30 minutes	\$ 252.24	100.0%		\$0.00	\$0.00	Footnote 1,2
6225	New	96137-Licensed PhysicianPsychological or Neuropsychological Test Administration, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 627.21	Per 30 minutes	\$ 627.21	100.0%		\$0.00	\$0.00	Footnote 1,2
6226	New	96137-Physician AssistantPsychological or Neuropsychological Test Administration, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 281.30	Per 30 minutes	\$ 281.30	100.0%		\$0.00	\$0.00	Footnote 1,2
6227	New	96137-Nurse PractitionerPsychological or Neuropsychological Test Administration, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 311.90	Per 30 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6228	New	96137-Clinical Nurse SpecialistPsychological or Neuropsychological Test Administration, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 311.90	Per 30 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6229	New	96137-Psychologist (Licensed or Waivered)Psychological or Neuropsychological Test Administration, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 252.24	Per 30 minutes	\$ 252.24	100.0%		\$0.00	\$0.00	Footnote 1,2
6230	New	96138-Psychiatric TechnicianPsychological or Neuropsychological Test Administration by Technician, First 30 Minutes	None	CA section 1115(a) CalAIM	\$ 114.73	Per 30 minutes	\$ 114.73	100.0%		\$0.00	\$0.00	Footnote 1,2
6231	New	96139-Psychiatric TechnicianPsychological or Neuropsychological Test Administration, Each Additional 30 Minutes	None	CA section 1115(a) CalAIM	\$ 114.73	Per 30 minutes	\$ 114.73	100.0%		\$0.00	\$0.00	Footnote 1,2
6232	New	96146-Licensed PhysicianPsychological or Neuropsychological Test Administration, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6233	New	96146-Physician AssistantPsychological or Neuropsychological Test Administration, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6234	New	96146-Nurse PractitionerPsychological or Neuropsychological Test Administration, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6235	New	96146-Clinical Nurse SpecialistPsychological or Neuropsychological Test Administration, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6236	New	96146-Psychologist (Licensed or Waivered)Psychological or Neuropsychological Test Administration, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6237	New	96161-Licensed PhysicianCaregiver Assessment Administration of Care Giver Focused Risk Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6238	New	96161-Physician AssistantCaregiver Assessment Administration of Care Giver Focused Risk Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6239	New	96161-Nurse PractitionerCaregiver Assessment Administration of Care Giver Focused Risk Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6240	New	96161-Registered NurseCaregiver Assessment Administration of Care Giver Focused Risk Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6241	New	96161-Clinical Nurse SpecialistCaregiver Assessment Administration of Care Giver Focused Risk Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6242	New	96161-Licensed Vocational NurseCaregiver Assessment Administration of Care Giver Focused Risk Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2
6243	New	96161-Registered PharmacistCaregiver Assessment Administration of Care Giver Focused Risk Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6244	New	96161-Psychologist (Licensed or Waivered)Caregiver Assessment Administration of Care Giver Focused Risk Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6245	New	96161-MFT/LPCC (Licensed, Waivered or Registered)Caregiver Assessment Administration of Care Giver Focused Risk Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6246	New	96161-LCSW (Licensed, Waivered or Registered)Caregiver Assessment Administration of Care Giver Focused Risk Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6247	New	96161-Occupational TherapistCaregiver Assessment Administration of Care Giver Focused Risk Assessment, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6248	New	96365-Licensed PhysicianIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis, 1-60 Minutes	None	CA section 1115(a) CalAIM	\$ 961.73	1-60 minutes	\$ 961.73	100.0%		\$0.00	\$0.00	Footnote 1,2
6249	New	96365-Physician AssistantIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis, 1-60 Minutes	None	CA section 1115(a) CalAIM	\$ 431.33	1-60 minutes	\$ 431.33	100.0%		\$0.00	\$0.00	Footnote 1,2
6250	New	96365-Nurse PractitionerIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis, 1-60 Minutes	None	CA section 1115(a) CalAIM	\$ 478.24	1-60 minutes	\$ 478.24	100.0%		\$0.00	\$0.00	Footnote 1,2
6251	New	96365-Registered NurseIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis, 1-60 Minutes	None	CA section 1115(a) CalAIM	\$ 390.64	1-60 minutes	\$ 390.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6252	New	96365-Clinical Nurse SpecialistIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis, 1-60 Minutes	None	CA section 1115(a) CalAIM	\$ 478.24	1-60 minutes	\$ 478.24	100.0%		\$0.00	\$0.00	Footnote 1,2
6253	New	96366-Licensed PhysicianIntravenous Infusion, for Therapy, Prophylaxis, Each Additional 30-60 Minutes past 96365	None	CA section 1115(a) CalAIM	\$ 940.82	30-60 minutes	\$ 940.82	100.0%		\$0.00	\$0.00	Footnote 1,2
6254	New	96366-Physician AssistantIntravenous Infusion, for Therapy, Prophylaxis, Each Additional 30-60 Minutes past 96365	None	CA section 1115(a) CalAIM	\$ 421.95	30-60 minutes	\$ 421.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6255	New	96366-Nurse PractitionerIntravenous Infusion, for Therapy, Prophylaxis, Each Additional 30-60 Minutes past 96365	None	CA section 1115(a) CalAIM	\$ 467.85	30-60 minutes	\$ 467.85	100.0%		\$0.00	\$0.00	Footnote 1,2
6256	New	96366-Registered NurseIntravenous Infusion, for Therapy, Prophylaxis, Each Additional 30-60 Minutes past 96365	None	CA section 1115(a) CalAIM	\$ 382.15	30-60 minutes	\$ 382.15	100.0%		\$0.00	\$0.00	Footnote 1,2
6257	New	96366-Clinical Nurse SpecialistIntravenous Infusion, for Therapy, Prophylaxis, Each Additional 30-60 Minutes past 96365	None	CA section 1115(a) CalAIM	\$ 467.85	30-60 minutes	\$ 467.85	100.0%		\$0.00	\$0.00	Footnote 1,2
6258	New	96367-Licensed PhysicianIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis; Additional Sequential Infusion, 1-60 Minutes after 96365	None	CA section 1115(a) CalAIM	\$ 648.12	1-60 minutes	\$ 648.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6259	New	96367-Physician AssistantIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis; Additional Sequential Infusion, 1-60 Minutes after 96365	None	CA section 1115(a) CalAIM	\$ 290.68	1-60 minutes	\$ 290.68	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6260	New	96367-Nurse PractitionerIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis; Additional Sequential Infusion, 1-60 Minutes after 96365	None	CA section 1115(a) CalAIM	\$ 322.29	1-60 minutes	\$ 322.29	100.0%		\$0.00	\$0.00	Footnote 1,2
6261	New	96367-Registered NurseIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis; Additional Sequential Infusion, 1-60 Minutes after 96365	None	CA section 1115(a) CalAIM	\$ 263.26	1-60 minutes	\$ 263.26	100.0%		\$0.00	\$0.00	Footnote 1,2
6262	New	96367-Clinical Nurse SpecialistIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis; Additional Sequential Infusion, 1-60 Minutes after 96365	None	CA section 1115(a) CalAIM	\$ 322.29	1-60 minutes	\$ 322.29	100.0%		\$0.00	\$0.00	Footnote 1,2
6263	New	96368-Licensed PhysicianIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis; Concurrent Infusion, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6264	New	96368-Physician AssistantIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis; Concurrent Infusion, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6265	New	96368-Nurse PractitionerIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis; Concurrent Infusion, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6266	New	96368-Registered NurseIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis; Concurrent Infusion, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6267	New	96368-Clinical Nurse SpecialistIntravenous Infusion, for Therapy, Prophylaxis, or Diagnosis; Concurrent Infusion, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6268	New	96369-Licensed PhysicianSubcutaneous Infusion for Therapy or Prophylaxis, Initial, 15-60 Minutes	None	CA section 1115(a) CalAIM	\$ 794.47	15-60 minutes	\$ 794.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6269	New	96369-Physician AssistantSubcutaneous Infusion for Therapy or Prophylaxis, Initial, 15-60 Minutes	None	CA section 1115(a) CalAIM	\$ 356.31	15-60 minutes	\$ 356.31	100.0%		\$0.00	\$0.00	Footnote 1,2
6270	New	96369-Nurse PractitionerSubcutaneous Infusion for Therapy or Prophylaxis, Initial, 15-60 Minutes	None	CA section 1115(a) CalAIM	\$ 395.07	15-60 minutes	\$ 395.07	100.0%		\$0.00	\$0.00	Footnote 1,2
6271	New	96369-Registered NurseSubcutaneous Infusion for Therapy or Prophylaxis, Initial, 15-60 Minutes	None	CA section 1115(a) CalAIM	\$ 322.70	15-60 minutes	\$ 322.70	100.0%		\$0.00	\$0.00	Footnote 1,2
6272	New	96369-Clinical Nurse SpecialistSubcutaneous Infusion for Therapy or Prophylaxis, Initial, 15-60 Minutes	None	CA section 1115(a) CalAIM	\$ 395.07	15-60 minutes	\$ 395.07	100.0%		\$0.00	\$0.00	Footnote 1,2
6273	New	96370-Licensed PhysicianSubcutaneous Infusion for Therapy or Prophylaxis, Each Additional 30-60 Minutes after 96369	None	CA section 1115(a) CalAIM	\$ 940.82	30-60 minutes	\$ 940.82	100.0%		\$0.00	\$0.00	Footnote 1,2
6274	New	96370-Physician AssistantSubcutaneous Infusion for Therapy or Prophylaxis, Each Additional 30-60 Minutes after 96369	None	CA section 1115(a) CalAIM	\$ 421.95	30-60 minutes	\$ 421.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6275	New	96370-Nurse PractitionerSubcutaneous Infusion for Therapy or Prophylaxis, Each Additional 30-60 Minutes after 96369	None	CA section 1115(a) CalAIM	\$ 467.85	30-60 minutes	\$ 467.85	100.0%		\$0.00	\$0.00	Footnote 1,2
6276	New	96370-Registered NurseSubcutaneous Infusion for Therapy or Prophylaxis, Each Additional 30-60 Minutes after 96369	None	CA section 1115(a) CalAIM	\$ 382.15	30-60 minutes	\$ 382.15	100.0%		\$0.00	\$0.00	Footnote 1,2
6277	New	96370-Clinical Nurse SpecialistSubcutaneous Infusion for Therapy or Prophylaxis, Each Additional 30-60 Minutes after 96369	None	CA section 1115(a) CalAIM	\$ 467.85	30-60 minutes	\$ 467.85	100.0%		\$0.00	\$0.00	Footnote 1,2
6278	New	96371-Licensed PhysicianSubcutaneous Infusion for Therapy or Prophylaxis, Additional Pump Set-Up, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6279	New	96371-Physician AssistantSubcutaneous Infusion for Therapy or Prophylaxis, Additional Pump Set-Up, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6280	New	96371-Nurse PractitionerSubcutaneous Infusion for Therapy or Prophylaxis, Additional Pump Set-Up, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6281	New	96371-Registered NurseSubcutaneous Infusion for Therapy or Prophylaxis, Additional Pump Set-Up, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6282	New	96371-Clinical Nurse SpecialistSubcutaneous Infusion for Therapy or Prophylaxis, Additional Pump Set-Up, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6283	New	96372-Licensed PhysicianTherapeutic, Prophylactic, or Diagnostic Injection; Subcutaneous or Intramuscular, 15 Minutes. Do not use this code to indicate administration of vaccines/toxoids or intradermal cancer immunotherapy injection.	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6284	New	96372-Physician AssistantTherapeutic, Prophylactic, or Diagnostic Injection; Subcutaneous or Intramuscular, 15 Minutes. Do not use this code to indicate administration of vaccines/toxoids or intradermal cancer immunotherapy injection.	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6285	New	96372-Nurse PractitionerTherapeutic, Prophylactic, or Diagnostic Injection; Subcutaneous or Intramuscular, 15 Minutes. Do not use this code to indicate administration of vaccines/toxoids or intradermal cancer immunotherapy injection.	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6286	New	96372-Registered NurseTherapeutic, Prophylactic, or Diagnostic Injection; Subcutaneous or Intramuscular, 15 Minutes. Do not use this code to indicate administration of vaccines/toxoids or intradermal cancer immunotherapy injection.	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6287	New	96372-Clinical Nurse SpecialistTherapeutic, Prophylactic, or Diagnostic Injection; Subcutaneous or Intramuscular, 15 Minutes. Do not use this code to indicate administration of vaccines/toxoids or intradermal cancer immunotherapy injection.	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6288	New	96373-Licensed PhysicianTherapeutic, Prophylactic, or Diagnostic Injection; Intra Arterial, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6289	New	96373-Physician AssistantTherapeutic, Prophylactic, or Diagnostic Injection; Intra Arterial, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6290	New	96373-Nurse PractitionerTherapeutic, Prophylactic, or Diagnostic Injection; Intra Arterial, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6291	New	96373-Registered NurseTherapeutic, Prophylactic, or Diagnostic Injection; Intra Arterial, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6292	New	96373-Clinical Nurse SpecialistTherapeutic, Prophylactic, or Diagnostic Injection; Intra Arterial, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6293	New	96374-Licensed PhysicianTherapeutic, Prophylactic, or Diagnostic Injection; Intravenous Push, Single or Initial Substance/Drug, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6294	New	96374-Physician AssistantTherapeutic, Prophylactic, or Diagnostic Injection; Intravenous Push, Single or Initial Substance/Drug, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6295	New	96374-Nurse PractitionerTherapeutic, Prophylactic, or Diagnostic Injection; Intravenous Push, Single or Initial Substance/Drug, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6296	New	96374-Registered NurseTherapeutic, Prophylactic, or Diagnostic Injection; Intravenous Push, Single or Initial Substance/Drug, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6297	New	96374-Clinical Nurse SpecialistTherapeutic, Prophylactic, or Diagnostic Injection; Intravenous Push, Single or Initial Substance/Drug, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6298	New	96375-Licensed PhysicianTherapeutic, Prophylactic, or Diagnostic Injection; Each Additional Sequential Intravenous Push of a New Substance/Drug, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6299	New	96375-Physician AssistantTherapeutic, Prophylactic, or Diagnostic Injection; Each Additional Sequential Intravenous Push of a New Substance/Drug, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6300	New	96375-Nurse PractitionerTherapeutic, Prophylactic, or Diagnostic Injection; Each Additional Sequential Intravenous Push of a New Substance/Drug, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6301	New	96375-Registered NurseTherapeutic, Prophylactic, or Diagnostic Injection; Each Additional Sequential Intravenous Push of a New Substance/Drug, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6302	New	96375-Clinical Nurse SpecialistTherapeutic, Prophylactic, or Diagnostic Injection; Each Additional Sequential Intravenous Push of a New Substance/Drug, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6303	New	96376-Licensed PhysicianTherapeutic, Prophylactic, or Diagnostic Injection; Each Additional Sequential Intravenous Drug Provided in a Facility; Has to be More than 30 Minutes after a Reported Push of the Same Drug, 1- 14 Minutes	None	CA section 1115(a) CalAIM	\$ 167.26	1-14 minutes	\$ 167.26	100.0%		\$0.00	\$0.00	Footnote 1,2
6304	New	96376-Physician AssistantTherapeutic, Prophylactic, or Diagnostic Injection; Each Additional Sequential Intravenous Drug Provided in a Facility; Has to be More than 30 Minutes after a Reported Push of the Same Drug, 1- 14 Minutes	None	CA section 1115(a) CalAIM	\$ 75.01	1-14 minutes	\$ 75.01	100.0%		\$0.00	\$0.00	Footnote 1,2
6305	New	96376-Nurse PractitionerTherapeutic, Prophylactic, or Diagnostic Injection; Each Additional Sequential Intravenous Drug Provided in a Facility; Has to be More than 30 Minutes after a Reported Push of the Same Drug, 1- 14 Minutes	None	CA section 1115(a) CalAIM	\$ 83.17	1-14 minutes	\$ 83.17	100.0%		\$0.00	\$0.00	Footnote 1,2
6306	New	96376-Registered NurseTherapeutic, Prophylactic, or Diagnostic Injection; Each Additional Sequential Intravenous Drug Provided in a Facility; Has to be More than 30 Minutes after a Reported Push of the Same Drug, 1- 14 Minutes	None	CA section 1115(a) CalAIM	\$ 67.94	1-14 minutes	\$ 67.94	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6307	New	96376-Clinical Nurse SpecialistTherapeutic, Prophylactic, or Diagnostic Injection; Each Additional Sequential Intravenous Drug Provided in a Facility; Has to be More than 30 Minutes after a Reported Push of the Same Drug, 1- 14 Minutes	None	CA section 1115(a) CalAIM	\$ 83.17	1-14 minutes	\$ 83.17	100.0%		\$0.00	\$0.00	Footnote 1,2
6308	New	96377-Licensed PhysicianApplication of On body Injector for Timed Subcutaneous Injection, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6309	New	96377-Physician AssistantApplication of On body Injector for Timed Subcutaneous Injection, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6310	New	96377-Nurse PractitionerApplication of On body Injector for Timed Subcutaneous Injection, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6311	New	96377-Registered NurseApplication of On body Injector for Timed Subcutaneous Injection, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6312	New	96377-Clinical Nurse SpecialistApplication of On body Injector for Timed Subcutaneous Injection, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6313	New	98966-Physician AssistantTelephone Assessment and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 75.01	5-10 minutes	\$ 75.01	100.0%		\$0.00	\$0.00	Footnote 1,2
6314	New	98966-Nurse PractitionerTelephone Assessment and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 83.17	5-10 minutes	\$ 83.17	100.0%		\$0.00	\$0.00	Footnote 1,2
6315	New	98966-Clinical Nurse SpecialistTelephone Assessment and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 83.17	5-10 minutes	\$ 83.17	100.0%		\$0.00	\$0.00	Footnote 1,2
6316	New	98966-Psychologist (Licensed or Waivered)Telephone Assessment and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 67.27	5-10 minutes	\$ 67.27	100.0%		\$0.00	\$0.00	Footnote 1,2
6317	New	98966-MFT/LPCC (Licensed, Waivered or Registered)Telephone Assessment and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 43.53	5-10 minutes	\$ 43.53	100.0%		\$0.00	\$0.00	Footnote 1,2
6318	New	98966-LCSW (Licensed, Waivered or Registered)Telephone Assessment and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 43.53	5-10 minutes	\$ 43.53	100.0%		\$0.00	\$0.00	Footnote 1,2
6319	New	98967-Physician AssistantTelephone Assessment and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 150.03	11-20 minutes	\$ 150.03	100.0%		\$0.00	\$0.00	Footnote 1,2
6320	New	98967-Nurse PractitionerTelephone Assessment and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 166.35	11-20 minutes	\$ 166.35	100.0%		\$0.00	\$0.00	Footnote 1,2
6321	New	98967-Clinical Nurse SpecialistTelephone Assessment and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 166.35	11-20 minutes	\$ 166.35	100.0%		\$0.00	\$0.00	Footnote 1,2
6322	New	98967-Psychologist (Licensed or Waivered)Telephone Assessment and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 134.53	11-20 minutes	\$ 134.53	100.0%		\$0.00	\$0.00	Footnote 1,2
6323	New	98967-MFT/LPCC (Licensed, Waivered or Registered)Telephone Assessment and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 87.06	11-20 minutes	\$ 87.06	100.0%		\$0.00	\$0.00	Footnote 1,2
6324	New	98967-LCSW (Licensed, Waivered or Registered)Telephone Assessment and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 87.06	11-20 minutes	\$ 87.06	100.0%		\$0.00	\$0.00	Footnote 1,2
6325	New	98968-Physician AssistantTelephone Assessment and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 243.79	21-30 minutes	\$ 243.79	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6326	New	98968-Nurse Practitioner Telephone Assessment and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 270.31	21-30 minutes	\$ 270.31	100.0%		\$0.00	\$0.00	Footnote 1,2
6327	New	98968-Clinical Nurse Specialist Telephone Assessment and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 270.31	21-30 minutes	\$ 270.31	100.0%		\$0.00	\$0.00	Footnote 1,2
6328	New	98968-Psychologist (Licensed or Waivered) Telephone Assessment and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 218.61	21-30 minutes	\$ 218.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6329	New	98968-MFT/LPCC (Licensed, Waivered or Registered) Telephone Assessment and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 141.47	21-30 minutes	\$ 141.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6330	New	98968-LCSW (Licensed, Waivered or Registered) Telephone Assessment and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 141.47	21-30 minutes	\$ 141.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6331	New	99202-Licensed Physician Office or Other Outpatient Visit of New Patient, 15-29 Minutes	None	CA section 1115(a) CalAIM	\$ 459.96	15-29 minutes	\$ 459.96	100.0%		\$0.00	\$0.00	Footnote 1,2
6332	New	99202-Physician Assistant Office or Other Outpatient Visit of New Patient, 15-29 Minutes	None	CA section 1115(a) CalAIM	\$ 206.29	15-29 minutes	\$ 206.29	100.0%		\$0.00	\$0.00	Footnote 1,2
6333	New	99202-Nurse Practitioner Office or Other Outpatient Visit of New Patient, 15-29 Minutes	None	CA section 1115(a) CalAIM	\$ 228.72	15-29 minutes	\$ 228.72	100.0%		\$0.00	\$0.00	Footnote 1,2
6334	New	99202-Clinical Nurse Specialist Office or Other Outpatient Visit of New Patient, 15-29 Minutes	None	CA section 1115(a) CalAIM	\$ 228.72	15-29 minutes	\$ 228.72	100.0%		\$0.00	\$0.00	Footnote 1,2
6335	New	99203-Licensed Physician Office or Other Outpatient Visit of a New patient, 30- 44 Minutes	None	CA section 1115(a) CalAIM	\$ 773.56	30-44 minutes	\$ 773.56	100.0%		\$0.00	\$0.00	Footnote 1,2
6336	New	99203-Physician Assistant Office or Other Outpatient Visit of a New patient, 30- 44 Minutes	None	CA section 1115(a) CalAIM	\$ 346.94	30-44 minutes	\$ 346.94	100.0%		\$0.00	\$0.00	Footnote 1,2
6337	New	99203-Nurse Practitioner Office or Other Outpatient Visit of a New patient, 30- 44 Minutes	None	CA section 1115(a) CalAIM	\$ 384.67	30-44 minutes	\$ 384.67	100.0%		\$0.00	\$0.00	Footnote 1,2
6338	New	99203-Clinical Nurse Specialist Office or Other Outpatient Visit of a New patient, 30- 44 Minutes	None	CA section 1115(a) CalAIM	\$ 384.67	30-44 minutes	\$ 384.67	100.0%		\$0.00	\$0.00	Footnote 1,2
6339	New	99204-Licensed Physician Office or Other Outpatient Visit of a New Patient, 45- 59 Minutes	None	CA section 1115(a) CalAIM	\$ 1,087.17	45-59 minutes	\$ 1,087.17	100.0%		\$0.00	\$0.00	Footnote 1,2
6340	New	99204-Physician Assistant Office or Other Outpatient Visit of a New Patient, 45- 59 Minutes	None	CA section 1115(a) CalAIM	\$ 487.59	45-59 minutes	\$ 487.59	100.0%		\$0.00	\$0.00	Footnote 1,2
6341	New	99204-Nurse Practitioner Office or Other Outpatient Visit of a New Patient, 45- 59 Minutes	None	CA section 1115(a) CalAIM	\$ 540.62	45-59 minutes	\$ 540.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6342	New	99204-Clinical Nurse Specialist Office or Other Outpatient Visit of a New Patient, 45- 59 Minutes	None	CA section 1115(a) CalAIM	\$ 540.62	45-59 minutes	\$ 540.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6343	New	99205-Licensed Physician Office or Other Outpatient Visit of a New Patient, 60- 74 Minutes	None	CA section 1115(a) CalAIM	\$ 1,400.77	60-74 minutes	\$ 1,400.77	100.0%		\$0.00	\$0.00	Footnote 1,2
6344	New	99205-Physician Assistant Office or Other Outpatient Visit of a New Patient, 60- 74 Minutes	None	CA section 1115(a) CalAIM	\$ 628.24	60-74 minutes	\$ 628.24	100.0%		\$0.00	\$0.00	Footnote 1,2
6345	New	99205-Nurse Practitioner Office or Other Outpatient Visit of a New Patient, 60- 74 Minutes	None	CA section 1115(a) CalAIM	\$ 696.57	60-74 minutes	\$ 696.57	100.0%		\$0.00	\$0.00	Footnote 1,2
6346	New	99205-Clinical Nurse Specialist Office or Other Outpatient Visit of a New Patient, 60- 74 Minutes	None	CA section 1115(a) CalAIM	\$ 696.57	60-74 minutes	\$ 696.57	100.0%		\$0.00	\$0.00	Footnote 1,2
6347	New	99212-Licensed Physician Office or Other Outpatient Visit of an Established Patient, 10-19 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	10-19 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6348	New	99212-Physician Assistant Office or Other Outpatient Visit of an Established Patient, 10-19 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	10-19 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6349	New	99212-Nurse Practitioner Office or Other Outpatient Visit of an Established Patient, 10-19 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	10-19 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6350	New	99212-Clinical Nurse SpecialistOffice or Other Outpatient Visit of an Established Patient, 10-19 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	10-19 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6351	New	99213-Licensed PhysicianOffice or Other Outpatient Visit of an Established Patient, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 522.68	20-29 minutes	\$ 522.68	100.0%		\$0.00	\$0.00	Footnote 1,2
6352	New	99213-Physician AssistantOffice or Other Outpatient Visit of an Established Patient, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 234.42	20-29 minutes	\$ 234.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6353	New	99213-Nurse PractitionerOffice or Other Outpatient Visit of an Established Patient, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 259.91	20-29 minutes	\$ 259.91	100.0%		\$0.00	\$0.00	Footnote 1,2
6354	New	99213-Clinical Nurse SpecialistOffice or Other Outpatient Visit of an Established Patient, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 259.91	20-29 minutes	\$ 259.91	100.0%		\$0.00	\$0.00	Footnote 1,2
6355	New	99214-Licensed PhysicianOffice or Other Outpatient Visit of an Established Patient, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 731.75	30-39 minutes	\$ 731.75	100.0%		\$0.00	\$0.00	Footnote 1,2
6356	New	99214-Physician AssistantOffice or Other Outpatient Visit of an Established Patient, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 328.18	30-39 minutes	\$ 328.18	100.0%		\$0.00	\$0.00	Footnote 1,2
6357	New	99214-Nurse PractitionerOffice or Other Outpatient Visit of an Established Patient, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 363.88	30-39 minutes	\$ 363.88	100.0%		\$0.00	\$0.00	Footnote 1,2
6358	New	99214-Clinical Nurse SpecialistOffice or Other Outpatient Visit of an Established Patient, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 363.88	30-39 minutes	\$ 363.88	100.0%		\$0.00	\$0.00	Footnote 1,2
6359	New	99215-Licensed PhysicianOffice or Other Outpatient Visit of an Established Patient, 40-54 Minutes	None	CA section 1115(a) CalAIM	\$ 982.63	40-54 minutes	\$ 982.63	100.0%		\$0.00	\$0.00	Footnote 1,2
6360	New	99215-Physician AssistantOffice or Other Outpatient Visit of an Established Patient, 40-54 Minutes	None	CA section 1115(a) CalAIM	\$ 440.71	40-54 minutes	\$ 440.71	100.0%		\$0.00	\$0.00	Footnote 1,2
6361	New	99215-Nurse PractitionerOffice or Other Outpatient Visit of an Established Patient, 40-54 Minutes	None	CA section 1115(a) CalAIM	\$ 488.64	40-54 minutes	\$ 488.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6362	New	99215-Clinical Nurse SpecialistOffice or Other Outpatient Visit of an Established Patient, 40-54 Minutes	None	CA section 1115(a) CalAIM	\$ 488.64	40-54 minutes	\$ 488.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6363	New	99221-Licensed PhysicianInitial hospital care, per day, for the evaluation and management of a patient. Usually, the problem(s) requiring admission are of low severity. 20-39 minutes	None	CA section 1115(a) CalAIM	\$ 982.63	20-39 minutes	\$ 982.63	100.0%		\$0.00	\$0.00	Footnote 1,2
6364	New	99221-Physician AssistantInitial hospital care, per day, for the evaluation and management of a patient. Usually, the problem(s) requiring admission are of low severity. 20-39 minutes	None	CA section 1115(a) CalAIM	\$ 440.71	20-39 minutes	\$ 440.71	100.0%		\$0.00	\$0.00	Footnote 1,2
6365	New	99221-Nurse PractitionerInitial hospital care, per day, for the evaluation and management of a patient. Usually, the problem(s) requiring admission are of low severity. 20-39 minutes	None	CA section 1115(a) CalAIM	\$ 488.64	20-39 minutes	\$ 488.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6366	New	99221-Clinical Nurse SpecialistInitial hospital care, per day, for the evaluation and management of a patient. Usually, the problem(s) requiring admission are of low severity. 20-39 minutes	None	CA section 1115(a) CalAIM	\$ 488.64	20-39 minutes	\$ 488.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6367	New	99222-Licensed PhysicianInitial hospital care, per day, for the evaluation and management of a patient. Usually, the problem(s) requiring admission are of moderate severity. 40-59 mins	None	CA section 1115(a) CalAIM	\$ 1,358.96	40-59 minutes	\$ 1,358.96	100.0%		\$0.00	\$0.00	Footnote 1,2
6368	New	99222-Physician AssistantInitial hospital care, per day, for the evaluation and management of a patient. Usually, the problem(s) requiring admission are of moderate severity. 40-59 mins	None	CA section 1115(a) CalAIM	\$ 609.49	40-59 minutes	\$ 609.49	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6369	New	99222-Nurse PractitionerInitial hospital care, per day, for the evaluation and management of a patient. Usually, the problem(s) requiring admission are of moderate severity. 40-59 mins	None	CA section 1115(a) CalAIM	\$ 675.78	40-59 minutes	\$ 675.78	100.0%		\$0.00	\$0.00	Footnote 1,2
6370	New	99222-Clinical Nurse SpecialistInitial hospital care, per day, for the evaluation and management of a patient. Usually, the problem(s) requiring admission are of moderate severity. 40-59 mins	None	CA section 1115(a) CalAIM	\$ 675.78	40-59 minutes	\$ 675.78	100.0%		\$0.00	\$0.00	Footnote 1,2
6371	New	99223-Licensed PhysicianInitial hospital care, per day, for the evaluation and management of a patient. Usually, the problem(s) requiring admission are of high severity. (60-79 mins)	None	CA section 1115(a) CalAIM	\$ 1,714.38	60-79 minutes	\$ 1,714.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6372	New	99223-Physician AssistantInitial hospital care, per day, for the evaluation and management of a patient. Usually, the problem(s) requiring admission are of high severity. (60-79 mins)	None	CA section 1115(a) CalAIM	\$ 768.89	60-79 minutes	\$ 768.89	100.0%		\$0.00	\$0.00	Footnote 1,2
6373	New	99223-Nurse PractitionerInitial hospital care, per day, for the evaluation and management of a patient. Usually, the problem(s) requiring admission are of high severity. (60-79 mins)	None	CA section 1115(a) CalAIM	\$ 852.52	60-79 minutes	\$ 852.52	100.0%		\$0.00	\$0.00	Footnote 1,2
6374	New	99223-Clinical Nurse SpecialistInitial hospital care, per day, for the evaluation and management of a patient. Usually, the problem(s) requiring admission are of high severity. (60-79 mins)	None	CA section 1115(a) CalAIM	\$ 852.52	60-79 minutes	\$ 852.52	100.0%		\$0.00	\$0.00	Footnote 1,2
6375	New	99231-Licensed PhysicianSubsequent Hospital Care, per Day, for the Evaluation and Management of a Patient. Usually, Patient is Stable, Recovering or Improving, 6-19 Minutes	None	CA section 1115(a) CalAIM	\$ 627.21	6-19 minutes	\$ 627.21	100.0%		\$0.00	\$0.00	Footnote 1,2
6376	New	99231-Physician AssistantSubsequent Hospital Care, per Day, for the Evaluation and Management of a Patient. Usually, Patient is Stable, Recovering or Improving, 6-19 Minutes	None	CA section 1115(a) CalAIM	\$ 281.30	6-19 minutes	\$ 281.30	100.0%		\$0.00	\$0.00	Footnote 1,2
6377	New	99231-Nurse PractitionerSubsequent Hospital Care, per Day, for the Evaluation and Management of a Patient. Usually, Patient is Stable, Recovering or Improving, 6-19 Minutes	None	CA section 1115(a) CalAIM	\$ 311.90	6-19 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6378	New	99231-Clinical Nurse SpecialistSubsequent Hospital Care, per Day, for the Evaluation and Management of a Patient. Usually, Patient is Stable, Recovering or Improving, 6-19 Minutes	None	CA section 1115(a) CalAIM	\$ 311.90	6-19 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6379	New	99232-Licensed PhysicianSubsequent Hospital Care, per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Responding Inadequately to Therapy or has Developed a Minor Complication, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 878.10	20-29 minutes	\$ 878.10	100.0%		\$0.00	\$0.00	Footnote 1,2
6380	New	99232-Physician AssistantSubsequent Hospital Care, per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Responding Inadequately to Therapy or has Developed a Minor Complication, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 393.82	20-29 minutes	\$ 393.82	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6381	New	99232-Nurse PractitionerSubsequent Hospital Care, per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Responding Inadequately to Therapy or has Developed a Minor Complication, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 436.66	20-29 minutes	\$ 436.66	100.0%		\$0.00	\$0.00	Footnote 1,2
6382	New	99232-Clinical Nurse SpecialistSubsequent Hospital Care, per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Responding Inadequately to Therapy or has Developed a Minor Complication, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 436.66	20-29 minutes	\$ 436.66	100.0%		\$0.00	\$0.00	Footnote 1,2
6383	New	99233-Licensed PhysicianSubsequent Hospital Care, per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Unstable or has Developed a Significant New Problem, 30-40 Minutes	None	CA section 1115(a) CalAIM	\$ 1,191.70	30-40 minutes	\$ 1,191.70	100.0%		\$0.00	\$0.00	Footnote 1,2
6384	New	99233-Physician AssistantSubsequent Hospital Care, per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Unstable or has Developed a Significant New Problem, 30-40 Minutes	None	CA section 1115(a) CalAIM	\$ 534.47	30-40 minutes	\$ 534.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6385	New	99233-Nurse PractitionerSubsequent Hospital Care, per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Unstable or has Developed a Significant New Problem, 30-40 Minutes	None	CA section 1115(a) CalAIM	\$ 592.60	30-40 minutes	\$ 592.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6386	New	99233-Clinical Nurse SpecialistSubsequent Hospital Care, per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Unstable or has Developed a Significant New Problem, 30-40 Minutes	None	CA section 1115(a) CalAIM	\$ 592.60	30-40 minutes	\$ 592.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6387	New	99234-Licensed PhysicianObservation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 35-44 Minutes	None	CA section 1115(a) CalAIM	\$ 1,191.70	35-44 minutes	\$ 1,191.70	100.0%		\$0.00	\$0.00	Footnote 1,2
6388	New	99234-Physician AssistantObservation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 35-44 Minutes	None	CA section 1115(a) CalAIM	\$ 534.47	35-44 minutes	\$ 534.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6389	New	99234-Nurse PractitionerObservation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 35-44 Minutes	None	CA section 1115(a) CalAIM	\$ 592.60	35-44 minutes	\$ 592.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6390	New	99234-Clinical Nurse SpecialistObservation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 35-44 Minutes	None	CA section 1115(a) CalAIM	\$ 592.60	35-44 minutes	\$ 592.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6391	New	99235-Licensed PhysicianObservation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 45-53 minutes	None	CA section 1115(a) CalAIM	\$ 1,609.85	45-53 minutes	\$ 1,609.85	100.0%		\$0.00	\$0.00	Footnote 1,2
6392	New	99235-Physician AssistantObservation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 45-53 minutes	None	CA section 1115(a) CalAIM	\$ 722.01	45-53 minutes	\$ 722.01	100.0%		\$0.00	\$0.00	Footnote 1,2
6393	New	99235-Nurse PractitionerObservation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 45-53 minutes	None	CA section 1115(a) CalAIM	\$ 800.54	45-53 minutes	\$ 800.54	100.0%		\$0.00	\$0.00	Footnote 1,2
6394	New	99235-Clinical Nurse SpecialistObservation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 45-53 minutes	None	CA section 1115(a) CalAIM	\$ 800.54	45-53 minutes	\$ 800.54	100.0%		\$0.00	\$0.00	Footnote 1,2
6395	New	99236-Licensed PhysicianObservation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 54-60 Minutes	None	CA section 1115(a) CalAIM	\$ 1,923.45	54-60 minutes	\$ 1,923.45	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6396	New	99236-Physician Assistant Observation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 54-60 Minutes	None	CA section 1115(a) CalAIM	\$ 862.66	54-60 minutes	\$ 862.66	100.0%		\$0.00	\$0.00	Footnote 1,2
6397	New	99236-Nurse Practitioner Observation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 54-60 Minutes	None	CA section 1115(a) CalAIM	\$ 956.48	54-60 minutes	\$ 956.48	100.0%		\$0.00	\$0.00	Footnote 1,2
6398	New	99236-Clinical Nurse Specialist Observation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 54-60 Minutes	None	CA section 1115(a) CalAIM	\$ 956.48	54-60 minutes	\$ 956.48	100.0%		\$0.00	\$0.00	Footnote 1,2
6399	New	99238-Licensed Physician Hospital inpatient or observation discharge day management; 30 minutes or less on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 334.51	Per 30 minutes	\$ 334.51	100.0%		\$0.00	\$0.00	Footnote 1,2
6400	New	99238-Physician Assistant Hospital inpatient or observation discharge day management; 30 minutes or less on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 150.03	Per 30 minutes	\$ 150.03	100.0%		\$0.00	\$0.00	Footnote 1,2
6401	New	99238-Nurse Practitioner Hospital inpatient or observation discharge day management; 30 minutes or less on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 166.35	Per 30 minutes	\$ 166.35	100.0%		\$0.00	\$0.00	Footnote 1,2
6402	New	99238-Clinical Nurse Specialist Hospital inpatient or observation discharge day management; 30 minutes or less on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 166.35	Per 30 minutes	\$ 166.35	100.0%		\$0.00	\$0.00	Footnote 1,2
6403	New	99239-Licensed Physician Hospital inpatient or observation discharge day management; more than 30 minutes on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 30 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6404	New	99239-Physician Assistant Hospital inpatient or observation discharge day management; more than 30 minutes on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 562.60	Per 30 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6405	New	99239-Nurse Practitioner Hospital inpatient or observation discharge day management; more than 30 minutes on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 623.79	Per 30 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6406	New	99239-Clinical Nurse Specialist Hospital inpatient or observation discharge day management; more than 30 minutes on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 623.79	Per 30 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6407	New	99242-Licensed Physician Office Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Low Severity, 21-34 Minutes	None	CA section 1115(a) CalAIM	\$ 522.68	21-34 minutes	\$ 522.68	100.0%		\$0.00	\$0.00	Footnote 1,2
6408	New	99242-Physician Assistant Office Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Low Severity, 21-34 Minutes	None	CA section 1115(a) CalAIM	\$ 234.42	21-34 minutes	\$ 234.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6409	New	99242-Nurse Practitioner Office Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Low Severity, 21-34 Minutes	None	CA section 1115(a) CalAIM	\$ 259.91	21-34 minutes	\$ 259.91	100.0%		\$0.00	\$0.00	Footnote 1,2
6410	New	99242-Clinical Nurse Specialist Office Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Low Severity, 21-34 Minutes	None	CA section 1115(a) CalAIM	\$ 259.91	21-34 minutes	\$ 259.91	100.0%		\$0.00	\$0.00	Footnote 1,2
6411	New	99243-Licensed Physician Office Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate Severity, 35-49 Minutes	None	CA section 1115(a) CalAIM	\$ 731.75	21-34 minutes	\$ 731.75	100.0%		\$0.00	\$0.00	Footnote 1,2
6412	New	99243-Physician Assistant Office Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate Severity, 35-49 Minutes	None	CA section 1115(a) CalAIM	\$ 328.18	21-34 minutes	\$ 328.18	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6413	New	99243-Nurse PractitionerOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate Severity, 35-49 Minutes	None	CA section 1115(a) CalAIM	\$ 363.88	21-34 minutes	\$ 363.88	100.0%		\$0.00	\$0.00	Footnote 1,2
6414	New	99243-Clinical Nurse SpecialistOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate Severity, 35-49 Minutes	None	CA section 1115(a) CalAIM	\$ 363.88	21-34 minutes	\$ 363.88	100.0%		\$0.00	\$0.00	Footnote 1,2
6415	New	99244-Licensed PhysicianOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate to High Severity, 50-70 Minutes	None	CA section 1115(a) CalAIM	\$ 982.63	50-70 minutes	\$ 982.63	100.0%		\$0.00	\$0.00	Footnote 1,2
6416	New	99244-Physician AssistantOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate to High Severity, 50-70 Minutes	None	CA section 1115(a) CalAIM	\$ 440.71	50-70 minutes	\$ 440.71	100.0%		\$0.00	\$0.00	Footnote 1,2
6417	New	99244-Nurse PractitionerOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate to High Severity, 50-70 Minutes	None	CA section 1115(a) CalAIM	\$ 488.64	50-70 minutes	\$ 488.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6418	New	99244-Clinical Nurse SpecialistOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate to High Severity, 50-70 Minutes	None	CA section 1115(a) CalAIM	\$ 488.64	50-70 minutes	\$ 488.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6419	New	99245-Licensed PhysicianOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate to High Severity, 71-90 Minutes	None	CA section 1115(a) CalAIM	\$ 1,296.24	71-90 minutes	\$ 1,296.24	100.0%		\$0.00	\$0.00	Footnote 1,2
6420	New	99245-Physician AssistantOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate to High Severity, 71-90 Minutes	None	CA section 1115(a) CalAIM	\$ 581.36	71-90 minutes	\$ 581.36	100.0%		\$0.00	\$0.00	Footnote 1,2
6421	New	99245-Nurse PractitionerOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate to High Severity, 71-90 Minutes	None	CA section 1115(a) CalAIM	\$ 644.59	71-90 minutes	\$ 644.59	100.0%		\$0.00	\$0.00	Footnote 1,2
6422	New	99245-Clinical Nurse SpecialistOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate to High Severity, 71-90 Minutes	None	CA section 1115(a) CalAIM	\$ 644.59	71-90 minutes	\$ 644.59	100.0%		\$0.00	\$0.00	Footnote 1,2
6423	New	99252-Licensed PhysicianInpatient Consultation for a New or Established Patient. Usually, the Presenting Problems(s) are of Low Severity, 30-49 Minutes	None	CA section 1115(a) CalAIM	\$ 836.28	30-49 minutes	\$ 836.28	100.0%		\$0.00	\$0.00	Footnote 1,2
6424	New	99252-Physician AssistantInpatient Consultation for a New or Established Patient. Usually, the Presenting Problems(s) are of Low Severity, 30-49 Minutes	None	CA section 1115(a) CalAIM	\$ 375.07	30-49 minutes	\$ 375.07	100.0%		\$0.00	\$0.00	Footnote 1,2
6425	New	99252-Nurse PractitionerInpatient Consultation for a New or Established Patient. Usually, the Presenting Problems(s) are of Low Severity, 30-49 Minutes	None	CA section 1115(a) CalAIM	\$ 415.86	30-49 minutes	\$ 415.86	100.0%		\$0.00	\$0.00	Footnote 1,2
6426	New	99252-Clinical Nurse SpecialistInpatient Consultation for a New or Established Patient. Usually, the Presenting Problems(s) are of Low Severity, 30-49 Minutes	None	CA section 1115(a) CalAIM	\$ 415.86	30-49 minutes	\$ 415.86	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6427	New	99253-Licensed PhysicianInpatient Consultation for a New or Established Patient. Usually, the Presenting Problems(s) are of Moderate Severity, 50-69 Minutes	None	CA section 1115(a) CalAIM	\$ 1,087.17	50-69 minutes	\$ 1,087.17	100.0%		\$0.00	\$0.00	Footnote 1,2
6428	New	99253-Physician AssistantInpatient Consultation for a New or Established Patient. Usually, the Presenting Problems(s) are of Moderate Severity, 50-69 Minutes	None	CA section 1115(a) CalAIM	\$ 487.59	50-69 minutes	\$ 487.59	100.0%		\$0.00	\$0.00	Footnote 1,2
6429	New	99253-Nurse PractitionerInpatient Consultation for a New or Established Patient. Usually, the Presenting Problems(s) are of Moderate Severity, 50-69 Minutes	None	CA section 1115(a) CalAIM	\$ 540.62	50-69 minutes	\$ 540.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6430	New	99253-Clinical Nurse SpecialistInpatient Consultation for a New or Established Patient. Usually, the Presenting Problems(s) are of Moderate Severity, 50-69 Minutes	None	CA section 1115(a) CalAIM	\$ 540.62	50-69 minutes	\$ 540.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6431	New	99254-Licensed PhysicianInpatient Consultation for a New or Established Patient. Usually, the Presenting Problems(s) are of Moderate to High Severity, 70-90 Minutes	None	CA section 1115(a) CalAIM	\$ 1,463.50	70-90 minutes	\$ 1,463.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6432	New	99254-Physician AssistantInpatient Consultation for a New or Established Patient. Usually, the Presenting Problems(s) are of Moderate to High Severity, 70-90 Minutes	None	CA section 1115(a) CalAIM	\$ 656.37	70-90 minutes	\$ 656.37	100.0%		\$0.00	\$0.00	Footnote 1,2
6433	New	99254-Nurse PractitionerInpatient Consultation for a New or Established Patient. Usually, the Presenting Problems(s) are of Moderate to High Severity, 70-90 Minutes	None	CA section 1115(a) CalAIM	\$ 727.76	70-90 minutes	\$ 727.76	100.0%		\$0.00	\$0.00	Footnote 1,2
6434	New	99254-Clinical Nurse SpecialistInpatient Consultation for a New or Established Patient. Usually, the Presenting Problems(s) are of Moderate to High Severity, 70-90 Minutes	None	CA section 1115(a) CalAIM	\$ 727.76	70-90 minutes	\$ 727.76	100.0%		\$0.00	\$0.00	Footnote 1,2
6435	New	99255-Licensed PhysicianOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate to High Severity, 91-130 Minutes	None	CA section 1115(a) CalAIM	\$ 1,818.92	91-130 minutes	\$ 1,818.92	100.0%		\$0.00	\$0.00	Footnote 1,2
6436	New	99255-Physician AssistantOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate to High Severity, 91-130 Minutes	None	CA section 1115(a) CalAIM	\$ 815.77	91-130 minutes	\$ 815.77	100.0%		\$0.00	\$0.00	Footnote 1,2
6437	New	99255-Nurse PractitionerOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate to High Severity, 91-130 Minutes	None	CA section 1115(a) CalAIM	\$ 904.50	91-130 minutes	\$ 904.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6438	New	99255-Clinical Nurse SpecialistOffice Consultation for a New or Established Patient. Usually, the Presenting Problem(s) are of Moderate to High Severity, 91-130 Minutes	None	CA section 1115(a) CalAIM	\$ 904.50	91-130 minutes	\$ 904.50	100.0%		\$0.00	\$0.00	Footnote 1,2
6439	New	99304-Licensed PhysicianInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) requiring Admission are of Low Severity, 16-29 Minutes	None	CA section 1115(a) CalAIM	\$ 627.21	16-29 minutes	\$ 627.21	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6440	New	99304-Physician AssistantInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) requiring Admission are of Low Severity, 16-29 Minutes	None	CA section 1115(a) CalAIM	\$ 281.30	16-29 minutes	\$ 281.30	100.0%		\$0.00	\$0.00	Footnote 1,2
6441	New	99304-Nurse PractitionerInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) requiring Admission are of Low Severity, 16-29 Minutes	None	CA section 1115(a) CalAIM	\$ 311.90	16-29 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6442	New	99304-Clinical Nurse SpecialistInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) requiring Admission are of Low Severity, 16-29 Minutes	None	CA section 1115(a) CalAIM	\$ 311.90	16-29 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
6443	New	99305-Licensed PhysicianInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of Moderate Severity, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 836.28	30-39 minutes	\$ 836.28	100.0%		\$0.00	\$0.00	Footnote 1,2
6444	New	99305-Physician AssistantInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of Moderate Severity, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 375.07	30-39 minutes	\$ 375.07	100.0%		\$0.00	\$0.00	Footnote 1,2
6445	New	99305-Nurse PractitionerInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of Moderate Severity, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 415.86	30-39 minutes	\$ 415.86	100.0%		\$0.00	\$0.00	Footnote 1,2
6446	New	99305-Clinical Nurse SpecialistInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of Moderate Severity, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 415.86	30-39 minutes	\$ 415.86	100.0%		\$0.00	\$0.00	Footnote 1,2
6447	New	99306-Licensed PhysicianInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of High Severity, 40-60 Minutes	None	CA section 1115(a) CalAIM	\$ 1,087.17	40-60 minutes	\$ 1,087.17	100.0%		\$0.00	\$0.00	Footnote 1,2
6448	New	99306-Physician AssistantInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of High Severity, 40-60 Minutes	None	CA section 1115(a) CalAIM	\$ 487.59	40-60 minutes	\$ 487.59	100.0%		\$0.00	\$0.00	Footnote 1,2
6449	New	99306-Nurse PractitionerInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of High Severity, 40-60 Minutes	None	CA section 1115(a) CalAIM	\$ 540.62	40-60 minutes	\$ 540.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6450	New	99306-Clinical Nurse SpecialistInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of High Severity, 40-60 Minutes	None	CA section 1115(a) CalAIM	\$ 540.62	40-60 minutes	\$ 540.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6451	New	99307-Licensed PhysicianSubsequent Nursing Facility Care per Day for the Evaluation and Management of a Patient. Usually, the Patient is Stable, Recovering or Improving, 1-12 Minutes	None	CA section 1115(a) CalAIM	\$ 250.88	1-12 minutes	\$ 250.88	100.0%		\$0.00	\$0.00	Footnote 1,2
6452	New	99307-Physician AssistantSubsequent Nursing Facility Care per Day for the Evaluation and Management of a Patient. Usually, the Patient is Stable, Recovering or Improving, 1-12 Minutes	None	CA section 1115(a) CalAIM	\$ 112.52	1-12 minutes	\$ 112.52	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6453	New	99307-Nurse PractitionerSubsequent Nursing Facility Care per Day for the Evaluation and Management of a Patient. Usually, the Patient is Stable, Recovering or Improving, 1-12 Minutes	None	CA section 1115(a) CalAIM	\$ 124.76	1-12 minutes	\$ 124.76	100.0%		\$0.00	\$0.00	Footnote 1,2
6454	New	99307-Clinical Nurse SpecialistSubsequent Nursing Facility Care per Day for the Evaluation and Management of a Patient. Usually, the Patient is Stable, Recovering or Improving, 1-12 Minutes	None	CA section 1115(a) CalAIM	\$ 124.76	1-12 minutes	\$ 124.76	100.0%		\$0.00	\$0.00	Footnote 1,2
6455	New	99308-Licensed PhysicianInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Responding Inadequately to Therapy or Has Developed a Minor Complication, 13-19 Minutes	None	CA section 1115(a) CalAIM	\$ 459.96	13-19 minutes	\$ 459.96	100.0%		\$0.00	\$0.00	Footnote 1,2
6456	New	99308-Physician AssistantInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Responding Inadequately to Therapy or Has Developed a Minor Complication, 13-19 Minutes	None	CA section 1115(a) CalAIM	\$ 206.29	13-19 minutes	\$ 206.29	100.0%		\$0.00	\$0.00	Footnote 1,2
6457	New	99308-Nurse PractitionerInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Responding Inadequately to Therapy or Has Developed a Minor Complication, 13-19 Minutes	None	CA section 1115(a) CalAIM	\$ 228.72	13-19 minutes	\$ 228.72	100.0%		\$0.00	\$0.00	Footnote 1,2
6458	New	99308-Clinical Nurse SpecialistInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Responding Inadequately to Therapy or Has Developed a Minor Complication, 13-19 Minutes	None	CA section 1115(a) CalAIM	\$ 228.72	13-19 minutes	\$ 228.72	100.0%		\$0.00	\$0.00	Footnote 1,2
6459	New	99309-Licensed PhysicianInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient has Developed a Significant Complication or a Significant New Problem, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 773.56	20-29 minutes	\$ 773.56	100.0%		\$0.00	\$0.00	Footnote 1,2
6460	New	99309-Physician AssistantInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient has Developed a Significant Complication or a Significant New Problem, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 346.94	20-29 minutes	\$ 346.94	100.0%		\$0.00	\$0.00	Footnote 1,2
6461	New	99309-Nurse PractitionerInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient has Developed a Significant Complication or a Significant New Problem, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 384.67	20-29 minutes	\$ 384.67	100.0%		\$0.00	\$0.00	Footnote 1,2
6462	New	99309-Clinical Nurse SpecialistInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient has Developed a Significant Complication or a Significant New Problem, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 384.67	20-29 minutes	\$ 384.67	100.0%		\$0.00	\$0.00	Footnote 1,2
6463	New	99310-Licensed PhysicianInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. The Patient May Be Unstable or May Have Developed a Significant New Problem Requiring Immediate Physician Attention, 30- 40 Minutes	None	CA section 1115(a) CalAIM	\$ 1,087.17	30-40 minutes	\$ 1,087.17	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6464	New	99310-Physician AssistantInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. The Patient May Be Unstable or May Have Developed a Significant New Problem Requiring Immediate Physician Attention, 30- 40 Minutes	None	CA section 1115(a) CalAIM	\$ 487.59	30-40 minutes	\$ 487.59	100.0%		\$0.00	\$0.00	Footnote 1,2
6465	New	99310-Nurse PractitionerInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. The Patient May Be Unstable or May Have Developed a Significant New Problem Requiring Immediate Physician Attention, 30- 40 Minutes	None	CA section 1115(a) CalAIM	\$ 540.62	30-40 minutes	\$ 540.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6466	New	99310-Clinical Nurse SpecialistInitial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. The Patient May Be Unstable or May Have Developed a Significant New Problem Requiring Immediate Physician Attention, 30- 40 Minutes	None	CA section 1115(a) CalAIM	\$ 540.62	30-40 minutes	\$ 540.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6467	New	99341-Licensed PhysicianHome Visit of a New Patient, 15-25 Minutes	None	CA section 1115(a) CalAIM	\$ 459.96	15-25 minutes	\$ 459.96	100.0%		\$0.00	\$0.00	Footnote 1,2
6468	New	99341-Physician AssistantHome Visit of a New Patient, 15-25 Minutes	None	CA section 1115(a) CalAIM	\$ 206.29	15-25 minutes	\$ 206.29	100.0%		\$0.00	\$0.00	Footnote 1,2
6469	New	99341-Nurse PractitionerHome Visit of a New Patient, 15-25 Minutes	None	CA section 1115(a) CalAIM	\$ 228.72	15-25 minutes	\$ 228.72	100.0%		\$0.00	\$0.00	Footnote 1,2
6470	New	99341-Clinical Nurse SpecialistHome Visit of a New Patient, 15-25 Minutes	None	CA section 1115(a) CalAIM	\$ 228.72	15-25 minutes	\$ 228.72	100.0%		\$0.00	\$0.00	Footnote 1,2
6471	New	99342-Licensed PhysicianHome Visit of a New Patient, 26-35 Minutes	None	CA section 1115(a) CalAIM	\$ 940.82	26-35 minutes	\$ 940.82	100.0%		\$0.00	\$0.00	Footnote 1,2
6472	New	99342-Physician AssistantHome Visit of a New Patient, 26-35 Minutes	None	CA section 1115(a) CalAIM	\$ 421.95	26-35 minutes	\$ 421.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6473	New	99342-Nurse PractitionerHome Visit of a New Patient, 26-35 Minutes	None	CA section 1115(a) CalAIM	\$ 467.85	26-35 minutes	\$ 467.85	100.0%		\$0.00	\$0.00	Footnote 1,2
6474	New	99342-Clinical Nurse SpecialistHome Visit of a New Patient, 26-35 Minutes	None	CA section 1115(a) CalAIM	\$ 467.85	26-35 minutes	\$ 467.85	100.0%		\$0.00	\$0.00	Footnote 1,2
6475	New	99344-Licensed PhysicianHome Visit of a New Patient, 51-65 Minutes	None	CA section 1115(a) CalAIM	\$ 1,400.77	51-65 minutes	\$ 1,400.77	100.0%		\$0.00	\$0.00	Footnote 1,2
6476	New	99344-Physician AssistantHome Visit of a New Patient, 51-65 Minutes	None	CA section 1115(a) CalAIM	\$ 628.24	51-65 minutes	\$ 628.24	100.0%		\$0.00	\$0.00	Footnote 1,2
6477	New	99344-Nurse PractitionerHome Visit of a New Patient, 51-65 Minutes	None	CA section 1115(a) CalAIM	\$ 696.57	51-65 minutes	\$ 696.57	100.0%		\$0.00	\$0.00	Footnote 1,2
6478	New	99344-Clinical Nurse SpecialistHome Visit of a New Patient, 51-65 Minutes	None	CA section 1115(a) CalAIM	\$ 696.57	51-65 minutes	\$ 696.57	100.0%		\$0.00	\$0.00	Footnote 1,2
6479	New	99345-Licensed PhysicianHome Visit of a New Patient, 66-80 Minutes	None	CA section 1115(a) CalAIM	\$ 1,714.38	68-80 minutes	\$ 1,714.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6480	New	99345-Physician AssistantHome Visit of a New Patient, 66-80 Minutes	None	CA section 1115(a) CalAIM	\$ 768.89	68-80 minutes	\$ 768.89	100.0%		\$0.00	\$0.00	Footnote 1,2
6481	New	99345-Nurse PractitionerHome Visit of a New Patient, 66-80 Minutes	None	CA section 1115(a) CalAIM	\$ 852.52	68-80 minutes	\$ 852.52	100.0%		\$0.00	\$0.00	Footnote 1,2
6482	New	99345-Clinical Nurse SpecialistHome Visit of a New Patient, 66-80 Minutes	None	CA section 1115(a) CalAIM	\$ 852.52	68-80 minutes	\$ 852.52	100.0%		\$0.00	\$0.00	Footnote 1,2
6483	New	99347-Licensed PhysicianHome Visit of an Established Patient, 10-20 Minutes	None	CA section 1115(a) CalAIM	\$ 522.68	10-20 minutes	\$ 522.68	100.0%		\$0.00	\$0.00	Footnote 1,2
6484	New	99347-Physician AssistantHome Visit of an Established Patient, 10-20 Minutes	None	CA section 1115(a) CalAIM	\$ 234.42	10-20 minutes	\$ 234.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6485	New	99347-Nurse PractitionerHome Visit of an Established Patient, 10-20 Minutes	None	CA section 1115(a) CalAIM	\$ 259.91	10-20 minutes	\$ 259.91	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6486	New	99347-Clinical Nurse SpecialistHome Visit of an Established Patient, 10-20 Minutes	None	CA section 1115(a) CalAIM	\$ 259.91	10-20 minutes	\$ 259.91	100.0%		\$0.00	\$0.00	Footnote 1,2
6487	New	99348-Licensed PhysicianHome Visit of an Established Patient, 21-35 Minutes	None	CA section 1115(a) CalAIM	\$ 731.75	21-35 minutes	\$ 731.75	100.0%		\$0.00	\$0.00	Footnote 1,2
6488	New	99348-Physician AssistantHome Visit of an Established Patient, 21-35 Minutes	None	CA section 1115(a) CalAIM	\$ 328.18	21-35 minutes	\$ 328.18	100.0%		\$0.00	\$0.00	Footnote 1,2
6489	New	99348-Nurse PractitionerHome Visit of an Established Patient, 21-35 Minutes	None	CA section 1115(a) CalAIM	\$ 363.88	21-35 minutes	\$ 363.88	100.0%		\$0.00	\$0.00	Footnote 1,2
6490	New	99348-Clinical Nurse SpecialistHome Visit of an Established Patient, 21-35 Minutes	None	CA section 1115(a) CalAIM	\$ 363.88	21-35 minutes	\$ 363.88	100.0%		\$0.00	\$0.00	Footnote 1,2
6491	New	99349-Licensed PhysicianHome Visit of an Established Patient, 36-50 Minutes	None	CA section 1115(a) CalAIM	\$ 1,045.35	36-50 minutes	\$ 1,045.35	100.0%		\$0.00	\$0.00	Footnote 1,2
6492	New	99349-Physician AssistantHome Visit of an Established Patient, 36-50 Minutes	None	CA section 1115(a) CalAIM	\$ 468.84	36-50 minutes	\$ 468.84	100.0%		\$0.00	\$0.00	Footnote 1,2
6493	New	99349-Nurse PractitionerHome Visit of an Established Patient, 36-50 Minutes	None	CA section 1115(a) CalAIM	\$ 519.83	36-50 minutes	\$ 519.83	100.0%		\$0.00	\$0.00	Footnote 1,2
6494	New	99349-Clinical Nurse SpecialistHome Visit of an Established Patient, 36-50 Minutes	None	CA section 1115(a) CalAIM	\$ 519.83	36-50 minutes	\$ 519.83	100.0%		\$0.00	\$0.00	Footnote 1,2
6495	New	99350-Licensed PhysicianHome Visit of an Established Patient, 51-70 Minutes	None	CA section 1115(a) CalAIM	\$ 1,400.77	51-70 minutes	\$ 1,400.77	100.0%		\$0.00	\$0.00	Footnote 1,2
6496	New	99350-Physician AssistantHome Visit of an Established Patient, 51-70 Minutes	None	CA section 1115(a) CalAIM	\$ 628.24	51-70 minutes	\$ 628.24	100.0%		\$0.00	\$0.00	Footnote 1,2
6497	New	99350-Nurse PractitionerHome Visit of an Established Patient, 51-70 Minutes	None	CA section 1115(a) CalAIM	\$ 696.57	51-70 minutes	\$ 696.57	100.0%		\$0.00	\$0.00	Footnote 1,2
6498	New	99350-Clinical Nurse SpecialistHome Visit of an Established Patient, 51-70 Minutes	None	CA section 1115(a) CalAIM	\$ 696.57	51-70 minutes	\$ 696.57	100.0%		\$0.00	\$0.00	Footnote 1,2
6499	New	99366-Physician AssistantMedical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Face-to-face with Patient and/or Family. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 562.60	Per 30 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6500	New	99366-Nurse PractitionerMedical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Face-to-face with Patient and/or Family. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 623.79	Per 30 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6501	New	99366-Registered NurseMedical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Face-to-face with Patient and/or Family. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 509.53	Per 30 minutes	\$ 509.53	100.0%		\$0.00	\$0.00	Footnote 1,2
6502	New	99366-Clinical Nurse SpecialistMedical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Face-to-face with Patient and/or Family. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 623.79	Per 30 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6503	New	99366-Registered PharmacistMedical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Face-to-face with Patient and/or Family. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 600.46	Per 30 minutes	\$ 600.46	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6504	New	99366-Psychologist (Licensed or Waivered)Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Face-to-face with Patient and/or Family. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 504.49	Per 30 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6505	New	99366-MFT/LPCC (Licensed, Waivered or Registered)Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Face-to-face with Patient and/or Family. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 326.47	Per 30 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6506	New	99366-LCSW (Licensed, Waivered or Registered)Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Face-to-face with Patient and/or Family. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 326.47	Per 30 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6507	New	99367-Licensed PhysicianMedical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 30 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6508	New	99368-Physician AssistantMedical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 562.60	Per 30 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6509	New	99368-Nurse PractitionerMedical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 623.79	Per 30 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6510	New	99368-Registered NurseMedical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 509.53	Per 30 minutes	\$ 509.53	100.0%		\$0.00	\$0.00	Footnote 1,2
6511	New	99368-Clinical Nurse SpecialistMedical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 623.79	Per 30 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6512	New	99368-Registered PharmacistMedical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 600.46	Per 30 minutes	\$ 600.46	100.0%		\$0.00	\$0.00	Footnote 1,2
6513	New	99368-Psychologist (Licensed or Waivered)Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 504.49	Per 30 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6514	New	99368-MFT/LPCC (Licensed, Waivered or Registered)Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 326.47	Per 30 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6515	New	99368-LCSW (Licensed, Waivered or Registered)Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 326.47	Per 30 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6516	New	99441-Licensed PhysicianTelephone Evaluation and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 167.26	5-10 minutes	\$ 167.26	100.0%		\$0.00	\$0.00	Footnote 1,2
6517	New	99441-Physician AssistantTelephone Evaluation and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 75.01	5-10 minutes	\$ 75.01	100.0%		\$0.00	\$0.00	Footnote 1,2
6518	New	99441-Nurse PractitionerTelephone Evaluation and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 83.17	5-10 minutes	\$ 83.17	100.0%		\$0.00	\$0.00	Footnote 1,2
6519	New	99441-Clinical Nurse SpecialistTelephone Evaluation and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 83.17	5-10 minutes	\$ 83.17	100.0%		\$0.00	\$0.00	Footnote 1,2
6520	New	99442-Licensed PhysicianTelephone Evaluation and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 334.51	11-20 minutes	\$ 334.51	100.0%		\$0.00	\$0.00	Footnote 1,2
6521	New	99442-Physician AssistantTelephone Evaluation and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 150.03	11-20 minutes	\$ 150.03	100.0%		\$0.00	\$0.00	Footnote 1,2
6522	New	99442-Nurse PractitionerTelephone Evaluation and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 166.35	11-20 minutes	\$ 166.35	100.0%		\$0.00	\$0.00	Footnote 1,2
6523	New	99442-Clinical Nurse SpecialistTelephone Evaluation and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 166.35	11-20 minutes	\$ 166.35	100.0%		\$0.00	\$0.00	Footnote 1,2
6524	New	99443-Licensed PhysicianTelephone Evaluation and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 543.58	21-30 minutes	\$ 543.58	100.0%		\$0.00	\$0.00	Footnote 1,2
6525	New	99443-Physician AssistantTelephone Evaluation and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 243.79	21-30 minutes	\$ 243.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6526	New	99443-Nurse PractitionerTelephone Evaluation and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 270.31	21-30 minutes	\$ 270.31	100.0%		\$0.00	\$0.00	Footnote 1,2
6527	New	99443-Clinical Nurse SpecialistTelephone Evaluation and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 270.31	21-30 minutes	\$ 270.31	100.0%		\$0.00	\$0.00	Footnote 1,2
6528	New	99451-Licensed PhysicianInter-Professional Telephone/Internet/ Electronic Health Record Assessment Provided by a Consultative Physician, 5-15 Minutes	None	CA section 1115(a) CalAIM	\$ 355.42	5-15 minutes	\$ 355.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6529	New	99484-Licensed PhysicianCare Management Services for Behavioral Health Conditions, Directed by Physician. At Least 20 Minutes***	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 20 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
6530	New	99484-Physician AssistantCare Management Services for Behavioral Health Conditions, Directed by Physician. At Least 20 Minutes***	None	CA section 1115(a) CalAIM	\$ 562.60	Per 20 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6531	New	99484-Nurse PractitionerCare Management Services for Behavioral Health Conditions, Directed by Physician. At Least 20 Minutes***	None	CA section 1115(a) CalAIM	\$ 623.79	Per 20 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6532	New	99484-Registered NurseCare Management Services for Behavioral Health Conditions, Directed by Physician. At Least 20 Minutes***	None	CA section 1115(a) CalAIM	\$ 509.53	Per 20 minutes	\$ 509.53	100.0%		\$0.00	\$0.00	Footnote 1,2
6533	New	99484-Clinical Nurse SpecialistCare Management Services for Behavioral Health Conditions, Directed by Physician. At Least 20 Minutes***	None	CA section 1115(a) CalAIM	\$ 623.79	Per 20 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6534	New	99484-Licensed Vocational NurseCare Management Services for Behavioral Health Conditions, Directed by Physician. At Least 20 Minutes***	None	CA section 1115(a) CalAIM	\$ 267.67	Per 20 minutes	\$ 267.67	100.0%		\$0.00	\$0.00	Footnote 1,2
6535	New	99484-Registered PharmacistCare Management Services for Behavioral Health Conditions, Directed by Physician. At Least 20 Minutes***	None	CA section 1115(a) CalAIM	\$ 600.46	Per 20 minutes	\$ 600.46	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6536	New	99484-Psychiatric Technician Care Management Services for Behavioral Health Conditions, Directed by Physician. At Least 20 Minutes***	None	CA section 1115(a) CalAIM	\$ 229.47	Per 20 minutes	\$ 229.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6537	New	99484-Psychologist (Licensed or Waivered) Care Management Services for Behavioral Health Conditions, Directed by Physician. At Least 20 Minutes***	None	CA section 1115(a) CalAIM	\$ 504.49	Per 20 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
6538	New	99484-MFT/LPCC (Licensed, Waivered or Registered) Care Management Services for Behavioral Health Conditions, Directed by Physician. At Least 20 Minutes***	None	CA section 1115(a) CalAIM	\$ 326.47	Per 20 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6539	New	99484-LCSW (Licensed, Waivered or Registered) Care Management Services for Behavioral Health Conditions, Directed by Physician. At Least 20 Minutes***	None	CA section 1115(a) CalAIM	\$ 326.47	Per 20 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
6540	New	99605-Registered Pharmacist Medication Therapy Management Service(s) Provided by a Pharmacist, Individual, Face-to-face with New Patient with Assessment and Intervention, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6541	New	99606-Registered Pharmacist Medication Therapy Management Service(s) Provided by a Pharmacist, Individual, Face-to-Face with Established Patient with Assessment and Intervention, 15 Minute	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6542	New	99607-Registered Pharmacist Medication Therapy Management Service(s) Provided by a Pharmacist, Individual, Face-to-face with Patient with Assessment and Intervention, each Additional 15 Minutes beyond 99605 or 99606.	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6543	New	G2212-Licensed Physician Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6544	New	G2212-Physician Assistant Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6545	New	G2212-Nurse Practitioner Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6546	New	G2212-Registered Nurse Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6547	New	G2212-Clinical Nurse Specialist Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6548	New	G2212-Licensed Vocational Nurse Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6549	New	G2212-Registered PharmacistProlonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6550	New	G2212-Psychologist (Licensed or Waivered)Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6551	New	G2212-MFT/LPCC (Licensed, Waivered or Registered)Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6552	New	G2212-LCSW (Licensed, Waivered or Registered)Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6553	New	G2212-Occupational TherapistProlonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6554	New	G2212HQ-Licensed PhysicianProlonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 69.69	Per 15 minutes	\$ 69.69	100.0%		\$0.00	\$0.00	Footnote 1,2
6555	New	G2212HQ-Physician AssistantProlonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 31.26	Per 15 minutes	\$ 31.26	100.0%		\$0.00	\$0.00	Footnote 1,2
6556	New	G2212HQ-Nurse PractitionerProlonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
6557	New	G2212HQ-Registered NurseProlonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 28.31	Per 15 minutes	\$ 28.31	100.0%		\$0.00	\$0.00	Footnote 1,2
6558	New	G2212HQ-Clinical Nurse SpecialistProlonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
6559	New	G2212HQ-Licensed Vocational NurseProlonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 14.87	Per 15 minutes	\$ 14.87	100.0%		\$0.00	\$0.00	Footnote 1,2
6560	New	G2212HQ-Registered PharmacistProlonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 33.36	Per 15 minutes	\$ 33.36	100.0%		\$0.00	\$0.00	Footnote 1,2
6561	New	G2212HQ-Psychologist (Licensed or Waivered)Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 28.03	Per 15 minutes	\$ 28.03	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6562	New	G2212HQ-MFT/LPCC (Licensed, Waivered or Registered)Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
6563	New	G2212HQ-LCSW (Licensed, Waivered or Registered)Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
6564	New	G2212HQ-Occupational TherapistProlonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6565	New	H0025-Peer Support SpecialistsBehavioral health prevention education service (delivery of services with target population to affect knowledge, attitude and/or behavior)	None	CA section 1115(a) CalAIM	\$ 14.33	One time per service	\$ 14.33	100.0%		\$0.00	\$0.00	Footnote 1,2
6566	New	H0031-Physician AssistantMental Health Assessment by Non Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6567	New	H0031-Nurse PractitionerMental Health Assessment by Non Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6568	New	H0031-Registered NurseMental Health Assessment by Non Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6569	New	H0031-Clinical Nurse SpecialistMental Health Assessment by Non Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6570	New	H0031-Licensed Vocational NurseMental Health Assessment by Non Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2
6571	New	H0031-Registered PharmacistMental Health Assessment by Non Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6572	New	H0031-Psychiatric TechnicianMental Health Assessment by Non Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 57.37	Per 15 minutes	\$ 57.37	100.0%		\$0.00	\$0.00	Footnote 1,2
6573	New	H0031-Psychologist (Licensed or Waivered)Mental Health Assessment by Non Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6574	New	H0031-MFT/LPCC (Licensed, Waivered or Registered)Mental Health Assessment by Non Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6575	New	H0031-LCSW (Licensed, Waivered or Registered)Mental Health Assessment by Non Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6576	New	H0031-Occupational TherapistMental Health Assessment by Non Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6577	New	H0031-Mental Health Rehabilitation SpecialistMental Health Assessment by Non Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6578	New	H0031-Other Qualified PractitionerMental Health Assessment by Non Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6579	New	H0032-Physician AssistantMental Health Service Plan Developed by Non-Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6580	New	H0032-Nurse PractitionerMental Health Service Plan Developed by Non-Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6581	New	H0032-Registered NurseMental Health Service Plan Developed by Non-Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6582	New	H0032-Clinical Nurse SpecialistMental Health Service Plan Developed by Non-Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6583	New	H0032-Licensed Vocational NurseMental Health Service Plan Developed by Non-Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2
6584	New	H0032-Registered PharmacistMental Health Service Plan Developed by Non-Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6585	New	H0032-Psychiatric TechnicianMental Health Service Plan Developed by Non-Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 57.37	Per 15 minutes	\$ 57.37	100.0%		\$0.00	\$0.00	Footnote 1,2
6586	New	H0032-Psychologist (Licensed or Waivered)Mental Health Service Plan Developed by Non-Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6587	New	H0032-MFT/LPCC (Licensed, Waivered or Registered)Mental Health Service Plan Developed by Non-Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6588	New	H0032-LCSW (Licensed, Waivered or Registered)Mental Health Service Plan Developed by Non-Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6589	New	H0032-Occupational TherapistMental Health Service Plan Developed by Non-Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6590	New	H0032-Mental Health Rehabilitation SpecialistMental Health Service Plan Developed by Non-Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6591	New	H0032-Other Qualified PractitionerMental Health Service Plan Developed by Non-Physician, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6592	New	H0033-Licensed PhysicianOral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6593	New	H0033-Physician AssistantOral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6594	New	H0033-Nurse PractitionerOral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6595	New	H0033-Registered NurseOral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6596	New	H0033-Clinical Nurse SpecialistOral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6597	New	H0033-Licensed Vocational NurseOral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2
6598	New	H0033-Registered PharmacistOral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6599	New	H0033-Psychiatric TechnicianOral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 57.37	Per 15 minutes	\$ 57.37	100.0%		\$0.00	\$0.00	Footnote 1,2
6600	New	H0033-Psychologist (Licensed or Waivered)Oral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6601	New	H0033-MFT/LPCC (Licensed, Waivered or Registered)Oral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6602	New	H0033-LCSW (Licensed, Waivered or Registered)Oral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6603	New	H0033-Occupational TherapistOral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6604	New	H0033-Mental Health Rehabilitation SpecialistOral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6605	New	H0033-Other Qualified PractitionerOral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6606	New	H0034-Licensed PhysicianMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6607	New	H0034-Physician AssistantMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6608	New	H0034-Nurse PractitionerMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6609	New	H0034-Registered NurseMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6610	New	H0034-Clinical Nurse SpecialistMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6611	New	H0034-Licensed Vocational NurseMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2
6612	New	H0034-Registered PharmacistMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6613	New	H0034-Psychiatric TechnicianMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 57.37	Per 15 minutes	\$ 57.37	100.0%		\$0.00	\$0.00	Footnote 1,2
6614	New	H0034-Mental Health Rehabilitation SpecialistMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6615	New	H0034-Other Qualified PractitionerMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6616	New	H0034HQ-Licensed PhysicianMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 69.69	Per 15 minutes	\$ 69.69	100.0%		\$0.00	\$0.00	Footnote 1,2
6617	New	H0034HQ-Physician AssistantMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 31.26	Per 15 minutes	\$ 31.26	100.0%		\$0.00	\$0.00	Footnote 1,2
6618	New	H0034HQ-Nurse PractitionerMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
6619	New	H0034HQ-Registered NurseMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 28.31	Per 15 minutes	\$ 28.31	100.0%		\$0.00	\$0.00	Footnote 1,2
6620	New	H0034HQ-Clinical Nurse SpecialistMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
6621	New	H0034HQ-Licensed Vocational NurseMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 14.87	Per 15 minutes	\$ 14.87	100.0%		\$0.00	\$0.00	Footnote 1,2
6622	New	H0034HQ-Registered PharmacistMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 33.36	Per 15 minutes	\$ 33.36	100.0%		\$0.00	\$0.00	Footnote 1,2
6623	New	H0034HQ-Psychiatric TechnicianMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 12.75	Per 15 minutes	\$ 12.75	100.0%		\$0.00	\$0.00	Footnote 1,2
6624	New	H0034HQ-Mental Health Rehabilitation SpecialistMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 13.65	Per 15 minutes	\$ 13.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6625	New	H0034HQ-Other Qualified PractitionerMedication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 13.65	Per 15 minutes	\$ 13.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6626	New	H0038-Peer Support SpecialistsSelf-help/peer services per 15 minutes	None	CA section 1115(a) CalAIM	\$ 64.48	Per 15 minutes	\$ 64.48	100.0%		\$0.00	\$0.00	Footnote 1,2
6627	New	H2000-Licensed PhysicianComprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6628	New	H2000-Physician AssistantComprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6629	New	H2000-Nurse PractitionerComprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6630	New	H2000-Registered NurseComprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6631	New	H2000-Clinical Nurse Specialist Comprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6632	New	H2000-Licensed Vocational Nurse Comprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2
6633	New	H2000-Registered Pharmacist Comprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6634	New	H2000-Psychiatric Technician Comprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 57.37	Per 15 minutes	\$ 57.37	100.0%		\$0.00	\$0.00	Footnote 1,2
6635	New	H2000-Psychologist (Licensed or Waivered) Comprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6636	New	H2000-MFT/LPCC (Licensed, Waivered or Registered) Comprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6637	New	H2000-LCSW (Licensed, Waivered or Registered) Comprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6638	New	H2000-Occupational Therapist Comprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6639	New	H2000-Mental Health Rehabilitation Specialist Comprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6640	New	H2000-Other Qualified Practitioner Comprehensive Multidisciplinary Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6641	New	H2011-Licensed Physician Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6642	New	H2011-Physician Assistant Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6643	New	H2011-Nurse Practitioner Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6644	New	H2011-Registered Nurse Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6645	New	H2011-Clinical Nurse Specialist Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6646	New	H2011-Licensed Vocational Nurse Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2
6647	New	H2011-Registered Pharmacist Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6648	New	H2011-Psychiatric Technician Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 57.37	Per 15 minutes	\$ 57.37	100.0%		\$0.00	\$0.00	Footnote 1,2
6649	New	H2011-Psychologist (Licensed or Waivered) Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6650	New	H2011-MFT/LPCC (Licensed, Waivered or Registered) Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6651	New	H2011-LCSW (Licensed, Waivered or Registered) Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6652	New	H2011-Occupational Therapist Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6653	New	H2011-Mental Health Rehabilitation Specialist Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6654	New	H2011-Other Qualified Practitioner Crisis Intervention Service, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6655	New	H2017-Licensed PhysicianPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6656	New	H2017-Physician AssistantPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6657	New	H2017-Nurse PractitionerPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6658	New	H2017-Registered NursePsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6659	New	H2017-Clinical Nurse SpecialistPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6660	New	H2017-Licensed Vocational NursePsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2
6661	New	H2017-Registered PharmacistPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6662	New	H2017-Psychiatric TechnicianPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 57.37	Per 15 minutes	\$ 57.37	100.0%		\$0.00	\$0.00	Footnote 1,2
6663	New	H2017-Psychologist (Licensed or Waivered)Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6664	New	H2017-MFT/LPCC (Licensed, Waivered or Registered)Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6665	New	H2017-LCSW (Licensed, Waivered or Registered)Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6666	New	H2017-Occupational TherapistPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6667	New	H2017-Mental Health Rehabilitation SpecialistPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6668	New	H2017-Other Qualified PractitionerPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6669	New	H2017HQ-Licensed PhysicianPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 69.69	Per 15 minutes	\$ 69.69	100.0%		\$0.00	\$0.00	Footnote 1,2
6670	New	H2017HQ-Physician AssistantPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 31.26	Per 15 minutes	\$ 31.26	100.0%		\$0.00	\$0.00	Footnote 1,2
6671	New	H2017HQ-Nurse PractitionerPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
6672	New	H2017HQ-Registered NursePsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 28.31	Per 15 minutes	\$ 28.31	100.0%		\$0.00	\$0.00	Footnote 1,2
6673	New	H2017HQ-Clinical Nurse SpecialistPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
6674	New	H2017HQ-Licensed Vocational NursePsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 14.87	Per 15 minutes	\$ 14.87	100.0%		\$0.00	\$0.00	Footnote 1,2
6675	New	H2017HQ-Registered PharmacistPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 33.36	Per 15 minutes	\$ 33.36	100.0%		\$0.00	\$0.00	Footnote 1,2
6676	New	H2017HQ-Psychiatric TechnicianPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 12.75	Per 15 minutes	\$ 12.75	100.0%		\$0.00	\$0.00	Footnote 1,2
6677	New	H2017HQ-Psychologist (Licensed or Waivered)Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 28.03	Per 15 minutes	\$ 28.03	100.0%		\$0.00	\$0.00	Footnote 1,2
6678	New	H2017HQ-MFT/LPCC (Licensed, Waivered or Registered)Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6679	New	H2017HQ-LCSW (Licensed, Waivered or Registered)Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
6680	New	H2017HQ-Occupational TherapistPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 24.14	Per 15 minutes	\$ 24.14	100.0%		\$0.00	\$0.00	Footnote 1,2
6681	New	H2017HQ-Mental Health Rehabilitation SpecialistPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 13.65	Per 15 minutes	\$ 13.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6682	New	H2017HQ-Other Qualified PractitionerPsychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 13.65	Per 15 minutes	\$ 13.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6683	New	H2019-Licensed PhysicianTherapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6684	New	H2019-Physician AssistantTherapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6685	New	H2019-Nurse PractitionerTherapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6686	New	H2019-Registered NurseTherapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6687	New	H2019-Clinical Nurse SpecialistTherapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6688	New	H2019-Licensed Vocational NurseTherapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2
6689	New	H2019-Registered PharmacistTherapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6690	New	H2019-Psychiatric TechnicianTherapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 57.37	Per 15 minutes	\$ 57.37	100.0%		\$0.00	\$0.00	Footnote 1,2
6691	New	H2019-Psychologist (Licensed or Waivered)Therapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6692	New	H2019-MFT/LPCC (Licensed, Waivered or Registered)Therapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6693	New	H2019-LCSW (Licensed, Waivered or Registered)Therapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6694	New	H2019-Occupational TherapistTherapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6695	New	H2019-Mental Health Rehabilitation SpecialistTherapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6696	New	H2019-Other Qualified PractitionerTherapeutic Behavioral Services per 15 Minute	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6697	New	H2021-Licensed PhysicianCommunity-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6698	New	H2021-Physician AssistantCommunity-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6699	New	H2021-Nurse PractitionerCommunity-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6700	New	H2021-Registered NurseCommunity-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6701	New	H2021-Clinical Nurse SpecialistCommunity-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6702	New	H2021-Licensed Vocational NurseCommunity-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6703	New	H2021-Registered PharmacistCommunity-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6704	New	H2021-Psychiatric TechnicianCommunity-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 57.37	Per 15 minutes	\$ 57.37	100.0%		\$0.00	\$0.00	Footnote 1,2
6705	New	H2021-Psychologist (Licensed or Waivered)Community-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6706	New	H2021-MFT/LPCC (Licensed, Waivered or Registered)Community-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6707	New	H2021-LCSW (Licensed, Waivered or Registered)Community-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6708	New	H2021-Occupational TherapistCommunity-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6709	New	H2021-Mental Health Rehabilitation SpecialistCommunity-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6710	New	H2021-Other Qualified PractitionerCommunity-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6711	New	T1001-Nurse PractitionerNursing Assessment/Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6712	New	T1001-Registered NurseNursing Assessment/Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6713	New	T1001-Clinical Nurse SpecialistNursing Assessment/Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6714	New	T1001-Licensed Vocational NurseNursing Assessment/Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2
6715	New	T1001-Psychiatric TechnicianNursing Assessment/Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 57.37	Per 15 minutes	\$ 57.37	100.0%		\$0.00	\$0.00	Footnote 1,2
6716	New	T1013-Licensed PhysicianSign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
6717	New	T1013-Physician AssistantSign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
6718	New	T1013-Nurse PractitionerSign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
6719	New	T1013-Registered NurseSign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
6720	New	T1013-Clinical Nurse SpecialistSign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
6721	New	T1013-Licensed Vocational NurseSign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
6722	New	T1013-Registered PharmacistSign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
6723	New	T1013-Psychiatric TechnicianSign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
6724	New	T1013-Psychologist (Licensed or Waivered)Sign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
6725	New	T1013-MFT/LPCC (Licensed, Waivered or Registered)Sign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
6726	New	T1013-LCSW (Licensed, Waivered or Registered)Sign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
6727	New	T1013-Occupational TherapistSign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
6728	New	T1013-Mental Health Rehabilitation SpecialistSign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
6729	New	T1013-Other Qualified PractitionerSign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
6730	New	T1017-Licensed PhysicianTargeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6731	New	T1017-Physician AssistantTargeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6732	New	T1017-Nurse PractitionerTargeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6733	New	T1017-Registered NurseTargeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6734	New	T1017-Clinical Nurse SpecialistTargeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6735	New	T1017-Licensed Vocational NurseTargeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2
6736	New	T1017-Registered PharmacistTargeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6737	New	T1017-Psychiatric TechnicianTargeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 57.37	Per 15 minutes	\$ 57.37	100.0%		\$0.00	\$0.00	Footnote 1,2
6738	New	T1017-Psychologist (Licensed or Waivered)Targeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
6739	New	T1017-MFT/LPCC (Licensed, Waivered or Registered)Targeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6740	New	T1017-LCSW (Licensed, Waivered or Registered)Targeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
6741	New	T1017-Occupational TherapistTargeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6742	New	T1017-Mental Health Rehabilitation SpecialistTargeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
6742	New	T1017-Other Qualified PractitionerTargeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 61.41	Per 15 minutes	\$ 61.41	100.0%		\$0.00	\$0.00	Footnote 1,2
<b>7000</b>		<b>SMHS Therapeutic Foster Care Rates</b>										
7001	New	S5145-Therapeutic Foster Care	None	CA section 1115(a) CalAIM	\$ 531.90	Day	\$ 531.90	100.0%		\$0.00	\$0.00	Footnote 1,2
<b>8000</b>		<b>DMC ODS 24 Hour Day Services</b>										
8001	New	H0019-Behavioral Health Long Term Residential 3.1	None	CA section 1115(a) CalAIM	\$ 204.04	24 hours	\$ 204.04	100.0%		\$0.00	\$0.00	Footnote 1,2
8002	New	H0019-Behavioral Health Long Term Residential 3.3	None	CA section 1115(a) CalAIM	\$ 265.25	24 hours	\$ 265.25	100.0%		\$0.00	\$0.00	Footnote 1,2
8003	New	H0019-Behavioral Health Long Term Residential 3.5	None	CA section 1115(a) CalAIM	\$ 255.05	24 hours	\$ 255.05	100.0%		\$0.00	\$0.00	Footnote 1,2
8004	New	H0012-Alcohol and Drug Services; (Residential Addiction Outpatient). Sub-Acute Detoxification 3.2	None	CA section 1115(a) CalAIM	\$ 274.30	24 hours	\$ 274.30	100.0%		\$0.00	\$0.00	Footnote 1,2
<b>9000</b>		<b>DMC ODS Inpatient Withdrawal Management</b>										
9001	New	0953-Withdrawal Management and Residential Hospital with ASAM 3.7 and 4.0 Services	None	CA section 1115(a) CalAIM	\$ 724.29	Day	\$ 724.29	100.0%		\$0.00	\$0.00	Footnote 1,2
<b>10000</b>		<b>DMC ODS Mobile Crisis</b>										

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
10001	New	H2011-Mobile Crisis	None	CA section 1115(a) CalAIM	\$ 2,951.49	Encounter	\$ 2,951.49	100.0%		\$0.00	\$0.00	Footnote 1,2
10002	New	A0140-Transportation, mileage	None	CA section 1115(a) CalAIM	\$ 0.65	Per mile	\$ 0.65	100.0%		\$0.00	\$0.00	Footnote 1,2
10003	New	T2007-Transportation, staff time, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 71.51	Per 15 minutes	\$ 71.51	100.0%		\$0.00	\$0.00	Footnote 1,2
<b>11000</b>		<b>DMC ODS Outpatient</b>										
11001	New	90785-Certified AOD Counselor-Interactive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
11002	New	90882-Certified AOD Counselor-Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employers, or institutions.	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11003	New	G0396-Certified AOD Counselor-Alcohol and/or substance (other than tobacco) abuse structured assessment.15-30 Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 103.81	15-30 minutes	\$ 103.81	100.0%		\$0.00	\$0.00	Footnote 1,2
11004	New	G0397-Certified AOD Counselor-Alcohol and/or substance (other than tobacco) abuse structured assessment.30+ Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria)	None	CA section 1115(a) CalAIM	\$ 270.80	Per 30 minutes	\$ 270.80	100.0%		\$0.00	\$0.00	Footnote 1,2
11005	New	G2011-Certified AOD Counselor-Alcohol and/or substance (other than tobacco) abuse structured assessment 5 -14 Min. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 45.13	5-14 minutes	\$ 45.13	100.0%		\$0.00	\$0.00	Footnote 1,2
11006	New	G2212-Certified AOD Counselor-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11007	New	G2212HQ-Certified AOD Counselor-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 15.04	Per 15 minutes	\$ 15.04	100.0%		\$0.00	\$0.00	Footnote 1,2
11008	New	H0001-Certified AOD Counselor-Alcohol and/or drug assessment. (Note: Use this code for screening to determine the appropriate delivery system for beneficiaries seeking services)	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11009	New	H0004-Certified AOD Counselor-Behavioral health counseling and therapy, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11010	New	H0005-Certified AOD Counselor-Alcohol and/or drug services; group counseling by a clinician, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 15.04	Per 15 minutes	\$ 15.04	100.0%		\$0.00	\$0.00	Footnote 1,2
11011	New	H0007-Certified AOD Counselor-Alcohol and/or drug services; crisis intervention (outpatient),	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11012	New	H0049-Certified AOD Counselor-Alcohol and/or drug screening	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11013	New	H0050-Certified AOD Counselor-Alcohol and/or Drug Services, brief intervention, 15 minutes (Code must be used to submit claims for Contingency Management Services)	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11014	New	H1000-Certified AOD Counselor-Prenatal Care, at risk assessment.	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11015	New	H2014-Certified AOD Counselor-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11016	New	H2014HQ-Certified AOD Counselor-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 15.04	Per 15 minutes	\$ 15.04	100.0%		\$0.00	\$0.00	Footnote 1,2
11017	New	H2015-Certified AOD Counselor-Comprehensive community support services, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11018	New	H2017-Certified AOD Counselor-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11019	New	H2017HQ-Certified AOD Counselor-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 15.04	Per 15 minutes	\$ 15.04	100.0%		\$0.00	\$0.00	Footnote 1,2
11020	New	H2021-Certified AOD Counselor-Community-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11021	New	H2027-Certified AOD Counselor-Psychoeducational Service, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11022	New	H2035-Certified AOD Counselor-Alcohol and/or other drug treatment program, Per Hour	None	CA section 1115(a) CalAIM	\$ 270.80	Per 60 minutes	\$ 270.80	100.0%		\$0.00	\$0.00	Footnote 1,2
11023	New	T1006-Certified AOD Counselor-Alcohol and/or substance abuse services, family/couple counseling	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11024	New	T1007-Certified AOD Counselor-Alcohol and/or substance abuse services, treatment plan development and/or modification.	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11025	New	T1013-Certified AOD Counselor-Sign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
11026	New	T1017-Certified AOD Counselor-Targeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 67.70	Per 15 minutes	\$ 67.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11027	New	90785-LCSW (Licensed, Waivered or Registered)-Interactive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	Per 15 minutes	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
11028	New	90791-LCSW (Licensed, Waivered or Registered)-Psychiatric Diagnostic Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11029	New	90846-LCSW (Licensed, Waivered or Registered)-Family Psychotherapy (Without the Patient Present), 26-50 minutes	None	CA section 1115(a) CalAIM	\$ 272.06	26-50 minutes	\$ 272.06	100.0%		\$0.00	\$0.00	Footnote 1,2
11030	New	90847-LCSW (Licensed, Waivered or Registered)-Family Psychotherapy (Conjoint psychotherapy with Patient Present), 26-50 minutes	None	CA section 1115(a) CalAIM	\$ 272.06	26-50 minutes	\$ 272.06	100.0%		\$0.00	\$0.00	Footnote 1,2
11031	New	90849-LCSW (Licensed, Waivered or Registered)-Multiple-Family Group Psychotherapy, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
11032	New	90882-LCSW (Licensed, Waivered or Registered)-Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employers, or institutions.	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11033	New	90885-LCSW (Licensed, Waivered or Registered)-Psychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11034	New	90887-LCSW (Licensed, Waivered or Registered)-Interpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11035	New	90889-LCSW (Licensed, Waivered or Registered)-Preparation of report of patient's psychiatric status, history, treatment, or progress (other than for legal or consultative purpose) for other individuals, agencies, or insurance carries.	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11036	New	96160-LCSW (Licensed, Waivered or Registered)-Administration of patient-focused health risk assessment instrument.	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11037	New	96170-LCSW (Licensed, Waivered or Registered)-Health behavior intervention, family (without the patient present), face-to-face. 16-30 minutes	None	CA section 1115(a) CalAIM	\$ 163.23	16-30 minutes	\$ 163.23	100.0%		\$0.00	\$0.00	Footnote 1,2
11038	New	96171-LCSW (Licensed, Waivered or Registered)-Health behavior intervention, family (without the patient present), face-to-face. Each additional 15 minutes present), face-to-face. Each additional 15 minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11039	New	98966-LCSW (Licensed, Waivered or Registered)-Telephone Assessment and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 43.53	5-10 minutes	\$ 43.53	100.0%		\$0.00	\$0.00	Footnote 1,2
11040	New	98967-LCSW (Licensed, Waivered or Registered)-Telephone Assessment and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 87.06	11-20 minutes	\$ 87.06	100.0%		\$0.00	\$0.00	Footnote 1,2
11041	New	98968-LCSW (Licensed, Waivered or Registered)-Telephone Assessment and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 141.47	21-30 minutes	\$ 141.47	100.0%		\$0.00	\$0.00	Footnote 1,2
11042	New	99368-LCSW (Licensed, Waivered or Registered)-Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 326.47	Per 30 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
11043	New	G0396-LCSW (Licensed, Waivered or Registered)-Alcohol and/or substance (other than tobacco) abuse structured assessment.15-30 Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 125.15	15-30 minutes	\$ 125.15	100.0%		\$0.00	\$0.00	Footnote 1,2
11044	New	G0397-LCSW (Licensed, Waivered or Registered)-Alcohol and/or substance (other than tobacco) abuse structured assessment.30+ Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria)	None	CA section 1115(a) CalAIM	\$ 326.47	Per 30 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
11045	New	G2011-LCSW (Licensed, Waivered or Registered)-Alcohol and/or substance (other than tobacco) abuse structured assessment 5 -14 Min. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 54.41	5-14 minutes	\$ 54.41	100.0%		\$0.00	\$0.00	Footnote 1,2
11046	New	G2212-LCSW (Licensed, Waivered or Registered)-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11047	New	G2212HQ-LCSW (Licensed, Waivered or Registered)-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
11048	New	H0001-LCSW (Licensed, Waivered or Registered)-Alcohol and/or drug assessment. (Note: Use this code for screening to determine the appropriate delivery system for beneficiaries seeking services)	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11049	New	H0004-LCSW (Licensed, Waivered or Registered)- Behavioral health counseling and therapy, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11050	New	H0005-LCSW (Licensed, Waivered or Registered)- Alcohol and/or drug services; group counseling by a clinician, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
11051	New	H0007-LCSW (Licensed, Waivered or Registered)- Alcohol and/or drug services; crisis intervention (outpatient).	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11052	New	H0049-LCSW (Licensed, Waivered or Registered)- Alcohol and/or drug screening	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11053	New	H0050-LCSW (Licensed, Waivered or Registered)- Alcohol and/or Drug Services, brief intervention, 15 minutes (Code must be used to submit claims for Contingency Management Services)	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11054	New	H1000-LCSW (Licensed, Waivered or Registered)- Prenatal Care, at risk assessment.	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11055	New	H2014-LCSW (Licensed, Waivered or Registered)- Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11056	New	H2014-LCSW (Licensed, Waivered or Registered)- Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
11057	New	H2015-LCSW (Licensed, Waivered or Registered)- Comprehensive community support services, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11058	New	H2017-LCSW (Licensed, Waivered or Registered)- Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11059	New	H2017-LCSW (Licensed, Waivered or Registered)- Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
11060	New	H2021-LCSW (Licensed, Waivered or Registered)- Community-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11061	New	H2027-LCSW (Licensed, Waivered or Registered)- Psychoeducational Service, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11062	New	H2035-LCSW (Licensed, Waivered or Registered)- Alcohol and/or other drug treatment program, Per Hour	None	CA section 1115(a) CalAIM	\$ 326.47	Per 60 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
11063	New	T1006-LCSW (Licensed, Waivered or Registered)- Alcohol and/or substance abuse services, family/couple counseling	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11064	New	T1007-LCSW (Licensed, Waivered or Registered)- Alcohol and/or substance abuse services, treatment plan development and/or modification.	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11065	New	T1013-LCSW (Licensed, Waivered or Registered)-Sign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
11066	New	T1017-LCSW (Licensed, Waivered or Registered)- Targeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11067	New	90785-Licensed Physician-Interactive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	One time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11068	New	90791-Licensed Physician-Psychiatric Diagnostic Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11069	New	90792-Licensed Physician-Psychiatric Diagnostic Evaluation with Medical Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11070	New	90846-Licensed Physician-Family Psychotherapy (Without the Patient Present), 26-50 minutes	None	CA section 1115(a) CalAIM	\$ 1,045.35	26-50 minutes	\$ 1,045.35	100.0%		\$0.00	\$0.00	Footnote 1,2
11071	New	90847-Licensed Physician-Family Psychotherapy (Conjoint psychotherapy with Patient Present), 26-50 minutes	None	CA section 1115(a) CalAIM	\$ 1,045.35	26-50 minutes	\$ 1,045.35	100.0%		\$0.00	\$0.00	Footnote 1,2
11072	New	90849-Licensed Physician-Multiple-Family Group Psychotherapy, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 69.69	Per 15 minutes	\$ 69.69	100.0%		\$0.00	\$0.00	Footnote 1,2
11073	New	90865-Licensed Physician-Nacrosynthesis for Psychiatric Diagnostic and Therapeutic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11074	New	90882-Licensed Physician-Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employers, or institutions.	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11075	New	90885-Licensed Physician-Psychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11076	New	90887-Licensed Physician-Interpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11077	New	90889-Licensed Physician-Preparation of report of patient's psychiatric status, history, treatment, or progress (other than for legal or consultative purpose) for other individuals, agencies, or insurance carries.	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11078	New	96130-Licensed Physician-Psychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
11079	New	96131-Licensed Physician-Psychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
11080	New	96160-Licensed Physician-Administration of patient-focused health risk assessment instrument.	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11081	New	96170-Licensed Physician-Health behavior intervention, family (without the patient present), face-to-face. 16-30 minutes	None	CA section 1115(a) CalAIM	\$ 627.21	16-30 minutes	\$ 627.21	100.0%		\$0.00	\$0.00	Footnote 1,2
11082	New	96171-Licensed Physician-Health behavior intervention, family (without the patient present), face-to-face. Each additional 15 minutes present), face-to-face. Each additional 15 minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11083	New	99202-Licensed Physician-Office or Other Outpatient Visit of New Patient, 15-29 Minutes	None	CA section 1115(a) CalAIM	\$ 459.96	15-29 minutes	\$ 459.96	100.0%		\$0.00	\$0.00	Footnote 1,2
11084	New	99203-Licensed Physician-Office or Other Outpatient Visit of a New patient, 30- 44 Minutes	None	CA section 1115(a) CalAIM	\$ 773.56	30-44 minutes	\$ 773.56	100.0%		\$0.00	\$0.00	Footnote 1,2
11085	New	99204-Licensed Physician-Office or Other Outpatient Visit of a New Patient, 45- 59 Minutes	None	CA section 1115(a) CalAIM	\$ 1,087.17	45-59 minutes	\$ 1,087.17	100.0%		\$0.00	\$0.00	Footnote 1,2
11086	New	99205-Licensed Physician-Office or Other Outpatient Visit of a New Patient, 60- 74 Minutes	None	CA section 1115(a) CalAIM	\$ 1,400.77	60-74 minutes	\$ 1,400.77	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11087	New	99212-Licensed Physician-Office or Other Outpatient Visit of an Established Patient, 10-19 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	10-19 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11088	New	99213-Licensed Physician-Office or Other Outpatient Visit of an Established Patient, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 522.68	20-29 minutes	\$ 522.68	100.0%		\$0.00	\$0.00	Footnote 1,2
11089	New	99214-Licensed Physician-Office or Other Outpatient Visit of an Established Patient, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 731.75	30-39 minutes	\$ 731.75	100.0%		\$0.00	\$0.00	Footnote 1,2
11090	New	99215-Licensed Physician-Office or Other Outpatient Visit of an Established Patient, 40-54 Minutes	None	CA section 1115(a) CalAIM	\$ 982.63	40-54 minutes	\$ 982.63	100.0%		\$0.00	\$0.00	Footnote 1,2
11091	New	99234-Licensed Physician-Observation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 35-44 Minutes	None	CA section 1115(a) CalAIM	\$ 1,191.70	35-44 minutes	\$ 1,191.70	100.0%		\$0.00	\$0.00	Footnote 1,2
11092	New	99235-Licensed Physician-Observation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 45-53 minutes	None	CA section 1115(a) CalAIM	\$ 1,609.85	45-53 minutes	\$ 1,609.85	100.0%		\$0.00	\$0.00	Footnote 1,2
11093	New	99236-Licensed Physician-Observation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 54-60 Minutes	None	CA section 1115(a) CalAIM	\$ 1,923.45	54-60 minutes	\$ 1,923.45	100.0%		\$0.00	\$0.00	Footnote 1,2
11094	New	99238-Licensed Physician-Hospital inpatient or observation discharge day management; 30 minutes or less on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 334.51	Per 30 minutes	\$ 334.51	100.0%		\$0.00	\$0.00	Footnote 1,2
11095	New	99239-Licensed Physician-Hospital inpatient or observation discharge day management; more than 30 minutes on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 30 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
11096	New	99304-Licensed Physician-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) requiring Admission are of Low Severity, 16- 29 Minutes	None	CA section 1115(a) CalAIM	\$ 627.21	16-29 minutes	\$ 627.21	100.0%		\$0.00	\$0.00	Footnote 1,2
11097	New	99305-Licensed Physician-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of Moderate Severity, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 836.28	30-39 minutes	\$ 836.28	100.0%		\$0.00	\$0.00	Footnote 1,2
11098	New	99306-Licensed Physician-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of High Severity, 40- 60 Minutes	None	CA section 1115(a) CalAIM	\$ 1,087.17	40-60 minutes	\$ 1,087.17	100.0%		\$0.00	\$0.00	Footnote 1,2
11099	New	99307-Licensed Physician-Subsequent Nursing Facility Care per Day for the Evaluation and Management of a Patient. Usually, the Patient is Stable, Recovering or Improving, 1-12 Minutes	None	CA section 1115(a) CalAIM	\$ 250.88	1-12 minutes	\$ 250.88	100.0%		\$0.00	\$0.00	Footnote 1,2
11100	New	99308-Licensed Physician-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Responding Inadequately to Therapy or Has Developed a Minor Complication, 13- 19 Minutes	None	CA section 1115(a) CalAIM	\$ 459.96	13-19 minutes	\$ 459.96	100.0%		\$0.00	\$0.00	Footnote 1,2
11101	New	99309-Licensed Physician-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient has Developed a Significant Complication or a Significant New Problem, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 773.56	20-29 minutes	\$ 773.56	100.0%		\$0.00	\$0.00	Footnote 1,2
11102	New	99310-Licensed Physician-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. The Patient May Be Unstable or May Have Developed a Significant New Problem Requiring Immediate Physician Attention, 30-40 Minutes	None	CA section 1115(a) CalAIM	\$ 1,087.17	30-40 minutes	\$ 1,087.17	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11103	New	99341-Licensed Physician-Home Visit of a New Patient, 15-25 Minutes	None	CA section 1115(a) CalAIM	\$ 459.96	15-25 minutes	\$ 459.96	100.0%		\$0.00	\$0.00	Footnote 1,2
11104	New	99342-Licensed Physician-Home Visit of a New Patient, 26-35 Minutes	None	CA section 1115(a) CalAIM	\$ 940.82	15-25 minutes	\$ 940.82	100.0%		\$0.00	\$0.00	Footnote 1,2
11105	New	99344-Licensed Physician-Home Visit of a New Patient, 51-65 Minutes	None	CA section 1115(a) CalAIM	\$ 1,400.77	15-25 minutes	\$ 1,400.77	100.0%		\$0.00	\$0.00	Footnote 1,2
11106	New	99345-Licensed Physician-Home Visit of a New Patient, 66-80 Minutes	None	CA section 1115(a) CalAIM	\$ 1,714.38	15-25 minutes	\$ 1,714.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11107	New	99347-Licensed Physician-Home Visit of an Established Patient, 10-20 Minutes	None	CA section 1115(a) CalAIM	\$ 522.68	10-20 minutes	\$ 522.68	100.0%		\$0.00	\$0.00	Footnote 1,2
11108	New	99348-Licensed Physician-Home Visit of an Established Patient, 21-35 Minutes	None	CA section 1115(a) CalAIM	\$ 731.75	21-35 minutes	\$ 731.75	100.0%		\$0.00	\$0.00	Footnote 1,2
11109	New	99349-Licensed Physician-Home Visit of an Established Patient, 36-50 Minutes	None	CA section 1115(a) CalAIM	\$ 1,045.35	36-50 minutes	\$ 1,045.35	100.0%		\$0.00	\$0.00	Footnote 1,2
11110	New	99350-Licensed Physician-Home Visit of an Established Patient, 51-70 Minutes	None	CA section 1115(a) CalAIM	\$ 1,400.77	51-70 minutes	\$ 1,400.77	100.0%		\$0.00	\$0.00	Footnote 1,2
11111	New	99367-Licensed Physician-Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Physician. Patient and/or Family not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 30 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
11112	New	99408-Licensed Physician-Alcohol and/or substance (other than tobacco) abuse structural screening (e.g., AUDIT, DAST), and brief intervention (SBI) services. 15-30 minutes.	None	CA section 1115(a) CalAIM	\$ 480.86	15-30 minutes	\$ 480.86	100.0%		\$0.00	\$0.00	Footnote 1,2
11113	New	99409-Licensed Physician-Alcohol and/or substance (other than tobacco) abuse structural screening (e.g., AUDIT, DAST), and brief intervention (SBI) services. Greater than 30 minutes.	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 30 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
11114	New	99424-Licensed Physician-Principal care management services, for a single high-risk disease, with the following required elements: one complex chronic condition expected to last at least 3 months, and that places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, the condition requires development, monitoring, or revision of disease-specific care plan, the condition requires frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities, ongoing communication and care coordination relevant practitioners furnishing care; first 30 minutes provided personally by a physician or other qualified health care professional, per calendar month	None	CA section 1115(a) CalAIM	\$ 480.86	Per month	\$ 480.86	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11115	New	99425-Licensed Physician-Principal care management services, for a single high-risk disease, with the following required elements: one complex chronic condition expected to last at least 3 months, and that places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, the condition requires development, monitoring, or revision of disease-specific care plan, the condition requires frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities, ongoing communication and care coordination relevant practitioners furnishing care; each additional 30 minutes provided personally by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)	None	CA section 1115(a) CalAIM	\$ 627.21	Per 30 minutes	\$ 627.21	100.0%		\$0.00	\$0.00	Footnote 1,2
11116	New	99437-Licensed Physician-Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; each additional 30 minutes by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)	None	CA section 1115(a) CalAIM	\$ 627.21	Per month	\$ 627.21	100.0%		\$0.00	\$0.00	Footnote 1,2
11117	New	99441-Licensed Physician-Telephone Evaluation and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 167.26	5-10 minutes	\$ 167.26	100.0%		\$0.00	\$0.00	Footnote 1,2
11118	New	99442-Licensed Physician-Telephone Evaluation and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 334.51	11-20 minutes	\$ 334.51	100.0%		\$0.00	\$0.00	Footnote 1,2
11119	New	99443-Licensed Physician-Telephone Evaluation and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 543.58	21-30 minutes	\$ 543.58	100.0%		\$0.00	\$0.00	Footnote 1,2
11120	New	99451-Licensed Physician-Inter-Professional Telephone/Internet/ Electronic Health Record Assessment Provided by a Consultative Physician, 5-15 Minutes	None	CA section 1115(a) CalAIM	\$ 355.42	5-15 minutes	\$ 355.42	100.0%		\$0.00	\$0.00	Footnote 1,2
11121	New	99491-Licensed Physician-Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; first 30 minutes provided personally by a physician or other qualified health care professional, per calendar month.	None	CA section 1115(a) CalAIM	\$ 480.86	Per month	\$ 480.86	100.0%		\$0.00	\$0.00	Footnote 1,2
11122	New	99495-Licensed Physician-Transitional Care Management Services: Communication (direct contact, telephone, electronic) within 14 calendar days.	None	CA section 1115(a) CalAIM	\$ 313.61	Within 14 calendar days	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11123	New	99496-Licensed Physician-Transitional Care Management Services: Communication (direct contact, telephone, electronic) within 7 calendar days.	None	CA section 1115(a) CalAIM	\$ 313.61	Within 7 calendar days	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11124	New	G0396-Licensed Physician-Alcohol and/or substance (other than tobacco) abuse structured assessment.15-30 Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 480.86	15-30 minutes	\$ 480.86	100.0%		\$0.00	\$0.00	Footnote 1,2
11125	New	G0397-Licensed Physician-Alcohol and/or substance (other than tobacco) abuse structured assessment.30+ Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria)	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 30 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
11126	New	G2011-Licensed Physician-Alcohol and/or substance (other than tobacco) abuse structured assessment 5 - 14 Min. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 209.07	5-14 minutes	\$ 209.07	100.0%		\$0.00	\$0.00	Footnote 1,2
11127	New	G2212-Licensed Physician-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11128	New	G2212-Licensed Physician-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 69.69	Per 15 minutes	\$ 69.69	100.0%		\$0.00	\$0.00	Footnote 1,2
11129	New	H0001-Licensed Physician-Alcohol and/or drug assessment. (Note: Use this code for screening to determine the appropriate delivery system for beneficiaries seeking services)	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11130	New	H0003-Licensed Physician-Alcohol and/or drug screening. Laboratory analysis	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11131	New	H0004-Licensed Physician-Behavioral health counseling and therapy, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11132	New	H0005-Licensed Physician-Alcohol and/or drug services; group counseling by a clinician, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 69.69	Per 15 minutes	\$ 69.69	100.0%		\$0.00	\$0.00	Footnote 1,2
11133	New	H0007-Licensed Physician-Alcohol and/or drug services; crisis intervention (outpatient),	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11134	New	H0008-Licensed Physician-Alcohol and/or drug services: (hospital inpatient) Subacute detoxification	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11135	New	H0009-Licensed Physician-Alcohol and/or drug services: (hospital inpatient) Acute detoxification	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11136	New	H0033-Licensed Physician-Oral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11137	New	H0034-Licensed Physician-Medication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11138	New	H0034-Licensed Physician-Medication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 69.69	Per 15 minutes	\$ 69.69	100.0%		\$0.00	\$0.00	Footnote 1,2
11139	New	H0048-Licensed Physician-Alcohol and/or other drug testing. (Note: Use this code to submit claims for point of care tests)	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11140	New	H0049-Licensed Physician-Alcohol and/or drug screening	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11141	New	H0050-Licensed Physician-Alcohol and/or Drug Services, brief intervention, 15 minutes (Code must be used to submit claims for Contingency Management Services)	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11142	New	H1000-Licensed Physician-Prenatal Care, at risk assessment.	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11143	New	H2014-Licensed Physician-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11144	New	H2014-Licensed Physician-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 69.69	Per 15 minutes	\$ 69.69	100.0%		\$0.00	\$0.00	Footnote 1,2
11145	New	H2015-Licensed Physician-Comprehensive community support services, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11146	New	H2017-Licensed Physician-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11147	New	H2017-Licensed Physician-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 69.69	Per 15 minutes	\$ 69.69	100.0%		\$0.00	\$0.00	Footnote 1,2
11148	New	H2021-Licensed Physician-Community-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11149	New	H2027-Licensed Physician-Psychoeducational Service, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11150	New	H2035-Licensed Physician-Alcohol and/or other drug treatment program, Per Hour	None	CA section 1115(a) CalAIM	\$ 1,254.42	Per 60 minutes	\$ 1,254.42	100.0%		\$0.00	\$0.00	Footnote 1,2
11151	New	T1006-Licensed Physician-Alcohol and/or substance abuse services, family/couple counseling	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11152	New	T1007-Licensed Physician-Alcohol and/or substance abuse services, treatment plan development and/or modification.	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11153	New	T1013-Licensed Physician-Sign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
11154	New	T1017-Licensed Physician-Targeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11155	New	90785-MFT/LPCC (Licensed, Waivered or Registered)-Interactive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	one time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
11156	New	90791-MFT/LPCC (Licensed, Waivered or Registered)-Psychiatric Diagnostic Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11157	New	90846-MFT/LPCC (Licensed, Waivered or Registered)-Family Psychotherapy (Without the Patient Present), 26-50 minutes	None	CA section 1115(a) CalAIM	\$ 272.06	26-50 minutes	\$ 272.06	100.0%		\$0.00	\$0.00	Footnote 1,2
11158	New	90847-MFT/LPCC (Licensed, Waivered or Registered)-Family Psychotherapy (Conjoint psychotherapy with Patient Present), 26-50 minutes	None	CA section 1115(a) CalAIM	\$ 272.06	26-50 minutes	\$ 272.06	100.0%		\$0.00	\$0.00	Footnote 1,2
11159	New	90849-MFT/LPCC (Licensed, Waivered or Registered)-Multiple-Family Group Psychotherapy, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
11160	New	90882-MFT/LPCC (Licensed, Waivered or Registered)-Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employers, or institutions.	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11161	New	90885-MFT/LPCC (Licensed, Waivered or Registered)-Psychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11162	New	90887-MFT/LPCC (Licensed, Waivered or Registered)-Interpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11163	New	90889-MFT/LPCC (Licensed, Waivered or Registered)-Preparation of report of patient's psychiatric status, history, treatment, or progress (other than for legal or consultative purpose) for other individuals, agencies, or insurance carries.	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11164	New	96160-MFT/LPCC (Licensed, Waivered or Registered)-Administration of patient-focused health risk assessment instrument.	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11165	New	96170-MFT/LPCC (Licensed, Waivered or Registered)-Health behavior intervention, family (without the patient present), face-to-face. 16-30 minutes	None	CA section 1115(a) CalAIM	\$ 163.23	16-30 minutes	\$ 163.23	100.0%		\$0.00	\$0.00	Footnote 1,2
11166	New	96171-MFT/LPCC (Licensed, Waivered or Registered)-Health behavior intervention, family (without the patient present), face-to-face. Each additional 15 minutes present), face-to-face. Each additional 15 minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11167	New	98966-MFT/LPCC (Licensed, Waivered or Registered)-Telephone Assessment and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 43.53	5-10 minutes	\$ 43.53	100.0%		\$0.00	\$0.00	Footnote 1,2
11168	New	98967-MFT/LPCC (Licensed, Waivered or Registered)-Telephone Assessment and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 87.06	11-20 minutes	\$ 87.06	100.0%		\$0.00	\$0.00	Footnote 1,2
11169	New	98968-MFT/LPCC (Licensed, Waivered or Registered)-Telephone Assessment and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 141.47	21-30 minutes	\$ 141.47	100.0%		\$0.00	\$0.00	Footnote 1,2
11170	New	99368-MFT/LPCC (Licensed, Waivered or Registered)-Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 326.47	Per 15 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
11171	New	G0396-MFT/LPCC (Licensed, Waivered or Registered)-Alcohol and/or substance (other than tobacco) abuse structured assessment.15-30 Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 125.15	15-30 minutes	\$ 125.15	100.0%		\$0.00	\$0.00	Footnote 1,2
11172	New	G0397-MFT/LPCC (Licensed, Waivered or Registered)-Alcohol and/or substance (other than tobacco) abuse structured assessment.30+ Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria)	None	CA section 1115(a) CalAIM	\$ 326.47	Per 30 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11173	New	G2011-MFT/LPCC (Licensed, Waivered or Registered)-Alcohol and/or substance (other than tobacco) abuse structured assessment 5 -14 Min. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 54.41	5-14 minutes	\$ 54.41	100.0%		\$0.00	\$0.00	Footnote 1,2
11174	New	G2212-MFT/LPCC (Licensed, Waivered or Registered)-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11175	New	G2212-MFT/LPCC (Licensed, Waivered or Registered)-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
11176	New	H0001-MFT/LPCC (Licensed, Waivered or Registered)-Alcohol and/or drug assessment. (Note: Use this code for screening to determine the appropriate delivery system for beneficiaries seeking services)	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11177	New	H0004-MFT/LPCC (Licensed, Waivered or Registered)-Behavioral health counseling and therapy, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11178	New	H0005-MFT/LPCC (Licensed, Waivered or Registered)-Alcohol and/or drug services; group counseling by a clinician, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
11179	New	H0007-MFT/LPCC (Licensed, Waivered or Registered)-Alcohol and/or drug services; crisis intervention (outpatient).	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11180	New	H0049-MFT/LPCC (Licensed, Waivered or Registered)-Alcohol and/or drug screening	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11181	New	H0050-MFT/LPCC (Licensed, Waivered or Registered)-Alcohol and/or Drug Services, brief intervention, 15 minutes (Code must be used to submit claims for Contingency Management Services)	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11182	New	H1000-MFT/LPCC (Licensed, Waivered or Registered)-Prenatal Care, at risk assessment.	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11183	New	H2014-MFT/LPCC (Licensed, Waivered or Registered)-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11184	New	H2014-MFT/LPCC (Licensed, Waivered or Registered)-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2
11185	New	H2015-MFT/LPCC (Licensed, Waivered or Registered)-Comprehensive community support services, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11186	New	H2017-MFT/LPCC (Licensed, Waivered or Registered)-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11187	New	H2017-MFT/LPCC (Licensed, Waivered or Registered)-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 18.14	Per 15 minutes	\$ 18.14	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11188	New	H2021-MFT/LPCC (Licensed, Waivered or Registered)-Community-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11189	New	H2027-MFT/LPCC (Licensed, Waivered or Registered)-Psychoeducational Service, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11190	New	H2035-MFT/LPCC (Licensed, Waivered or Registered)-Alcohol and/or other drug treatment program, Per Hour	None	CA section 1115(a) CalAIM	\$ 326.47	Per 60 minutes	\$ 326.47	100.0%		\$0.00	\$0.00	Footnote 1,2
11191	New	T1006-MFT/LPCC (Licensed, Waivered or Registered)-Alcohol and/or substance abuse services, family/couple counseling	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11192	New	T1007-MFT/LPCC (Licensed, Waivered or Registered)-Alcohol and/or substance abuse services, treatment plan development and/or modification.	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11193	New	T1013-MFT/LPCC (Licensed, Waivered or Registered)-Sign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
11194	New	T1017-MFT/LPCC (Licensed, Waivered or Registered)-Targeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11195	New	90785-Nurse Practitioner-Interactive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	one time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
11196	New	90791-Nurse Practitioner-Psychiatric Diagnostic Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11197	New	90792-Nurse Practitioner-Psychiatric Diagnostic Evaluation with Medical Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11198	New	90846-Nurse Practitioner-Family Psychotherapy (Without the Patient Present), 26-50 minutes	None	CA section 1115(a) CalAIM	\$ 519.83	26-50 minutes	\$ 519.83	100.0%		\$0.00	\$0.00	Footnote 1,2
11199	New	90847-Nurse Practitioner-Family Psychotherapy (Conjoint psychotherapy with Patient Present), 26-50 minutes	None	CA section 1115(a) CalAIM	\$ 519.83	26-50 minutes	\$ 519.83	100.0%		\$0.00	\$0.00	Footnote 1,2
11200	New	90849-Nurse Practitioner-Multiple-Family Group Psychotherapy, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
11201	New	90865-Nurse Practitioner-Nacrosynthesis for Psychiatric Diagnostic and Therapeutic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11202	New	90882-Nurse Practitioner-Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employers, or institutions.	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11203	New	90885-Nurse Practitioner-Psychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11204	New	90887-Nurse Practitioner-Interpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11205	New	90889-Nurse Practitioner-Preparation of report of patient's psychiatric status, history, treatment, or progress (other than for legal or consultative purpose) for other individuals, agencies, or insurance carries.	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11206	New	96130-Nurse Practitioner-Psychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
11207	New	96131-Nurse Practitioner-Psychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
11208	New	96160-Nurse Practitioner-Administration of patient-focused health risk assessment instrument.	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11209	New	96170-Nurse Practitioner-Health behavior intervention, family (without the patient present), face-to-face. 16-30 minutes	None	CA section 1115(a) CalAIM	\$ 311.90	16-30 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
11210	New	96171-Nurse Practitioner-Health behavior intervention, family (without the patient present), face-to-face. Each additional 15 minutes present), face-to-face. Each additional 15 minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11211	New	98966-Nurse Practitioner-Telephone Assessment and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 83.17	5-10 minutes	\$ 83.17	100.0%		\$0.00	\$0.00	Footnote 1,2
11212	New	98967-Nurse Practitioner-Telephone Assessment and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 166.35	11-20 minutes	\$ 166.35	100.0%		\$0.00	\$0.00	Footnote 1,2
11213	New	98968-Nurse Practitioner-Telephone Assessment and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 270.31	21-30 minutes	\$ 270.31	100.0%		\$0.00	\$0.00	Footnote 1,2
11214	New	99202-Nurse Practitioner-Office or Other Outpatient Visit of New Patient, 15-29 Minutes	None	CA section 1115(a) CalAIM	\$ 228.72	15-29 minutes	\$ 228.72	100.0%		\$0.00	\$0.00	Footnote 1,2
11215	New	99203-Nurse Practitioner-Office or Other Outpatient Visit of a New patient, 30- 44 Minutes	None	CA section 1115(a) CalAIM	\$ 384.67	30-44 minutes	\$ 384.67	100.0%		\$0.00	\$0.00	Footnote 1,2
11216	New	99204-Nurse Practitioner-Office or Other Outpatient Visit of a New Patient, 45- 59 Minutes	None	CA section 1115(a) CalAIM	\$ 540.62	45-59 minutes	\$ 540.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11217	New	99205-Nurse Practitioner-Office or Other Outpatient Visit of a New Patient, 60- 74 Minutes	None	CA section 1115(a) CalAIM	\$ 696.57	60-74 minutes	\$ 696.57	100.0%		\$0.00	\$0.00	Footnote 1,2
11218	New	99212-Nurse Practitioner-Office or Other Outpatient Visit of an Established Patient, 10-19 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	10-19 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11219	New	99213-Nurse Practitioner-Office or Other Outpatient Visit of an Established Patient, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 259.91	20-29 minutes	\$ 259.91	100.0%		\$0.00	\$0.00	Footnote 1,2
11220	New	99214-Nurse Practitioner-Office or Other Outpatient Visit of an Established Patient, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 363.88	30-39 minutes	\$ 363.88	100.0%		\$0.00	\$0.00	Footnote 1,2
11221	New	99215-Nurse Practitioner-Office or Other Outpatient Visit of an Established Patient, 40-54 Minutes	None	CA section 1115(a) CalAIM	\$ 488.64	40-54 minutes	\$ 488.64	100.0%		\$0.00	\$0.00	Footnote 1,2
11222	New	99234-Nurse Practitioner-Observation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 35-44 Minutes	None	CA section 1115(a) CalAIM	\$ 592.60	35-44 minutes	\$ 592.60	100.0%		\$0.00	\$0.00	Footnote 1,2
11223	New	99235-Nurse Practitioner-Observation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 45-53 minutes	None	CA section 1115(a) CalAIM	\$ 800.54	45-53 minutes	\$ 800.54	100.0%		\$0.00	\$0.00	Footnote 1,2
11224	New	99236-Nurse Practitioner-Observation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 54-60 Minutes	None	CA section 1115(a) CalAIM	\$ 956.48	54-60 minutes	\$ 956.48	100.0%		\$0.00	\$0.00	Footnote 1,2
11225	New	99238-Nurse Practitioner-Hospital inpatient or observation discharge day management; 30 minutes or less on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 166.35	Per 30 minutes	\$ 166.35	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11226	New	99239-Nurse Practitioner-Hospital inpatient or observation discharge day management; more than 30 minutes on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 623.79	Per 30 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
11227	New	99304-Nurse Practitioner-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) requiring Admission are of Low Severity, 16- 29 Minutes	None	CA section 1115(a) CalAIM	\$ 311.90	16-29 minutes	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
11228	New	99305-Nurse Practitioner-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of Moderate Severity, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 415.86	30-39 minutes	\$ 415.86	100.0%		\$0.00	\$0.00	Footnote 1,2
11229	New	99306-Nurse Practitioner-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of High Severity, 40- 60 Minutes	None	CA section 1115(a) CalAIM	\$ 540.62	40-60 minutes	\$ 540.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11230	New	99307-Nurse Practitioner-Subsequent Nursing Facility Care per Day for the Evaluation and Management of a Patient. Usually, the Patient is Stable, Recovering or Improving, 1-12 Minutes	None	CA section 1115(a) CalAIM	\$ 124.76	1-12 minutes	\$ 124.76	100.0%		\$0.00	\$0.00	Footnote 1,2
11231	New	99308-Nurse Practitioner-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Responding Inadequately to Therapy or Has Developed a Minor Complication, 13- 19 Minutes	None	CA section 1115(a) CalAIM	\$ 228.72	13-19 minutes	\$ 228.72	100.0%		\$0.00	\$0.00	Footnote 1,2
11232	New	99309-Nurse Practitioner-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient has Developed a Significant Complication or a Significant New Problem, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 384.67	20-29 minutes	\$ 384.67	100.0%		\$0.00	\$0.00	Footnote 1,2
11233	New	99310-Nurse Practitioner-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. The Patient May Be Unstable or May Have Developed a Significant New Problem Requiring Immediate Physician Attention, 30-40 Minutes	None	CA section 1115(a) CalAIM	\$ 540.62	30-40 minutes	\$ 540.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11234	New	99341-Nurse Practitioner-Home Visit of a New Patient, 15-25 Minutes	None	CA section 1115(a) CalAIM	\$ 228.72	15-25 minutes	\$ 228.72	100.0%		\$0.00	\$0.00	Footnote 1,2
11235	New	99342-Nurse Practitioner-Home Visit of a New Patient, 26-35 Minutes	None	CA section 1115(a) CalAIM	\$ 467.85	26-35 minutes	\$ 467.85	100.0%		\$0.00	\$0.00	Footnote 1,2
11236	New	99344-Nurse Practitioner-Home Visit of a New Patient, 51-65 Minutes	None	CA section 1115(a) CalAIM	\$ 696.57	51-65 minutes	\$ 696.57	100.0%		\$0.00	\$0.00	Footnote 1,2
11237	New	99345-Nurse Practitioner-Home Visit of a New Patient, 66-80 Minutes	None	CA section 1115(a) CalAIM	\$ 852.52	66-80 minutes	\$ 852.52	100.0%		\$0.00	\$0.00	Footnote 1,2
11238	New	99347-Nurse Practitioner-Home Visit of an Established Patient, 10-20 Minutes	None	CA section 1115(a) CalAIM	\$ 259.91	10-20 minutes	\$ 259.91	100.0%		\$0.00	\$0.00	Footnote 1,2
11239	New	99348-Nurse Practitioner-Home Visit of an Established Patient, 21-35 Minutes	None	CA section 1115(a) CalAIM	\$ 363.88	21-35 minutes	\$ 363.88	100.0%		\$0.00	\$0.00	Footnote 1,2
11240	New	99349-Nurse Practitioner-Home Visit of an Established Patient, 36-50 Minutes	None	CA section 1115(a) CalAIM	\$ 519.83	36-50 minutes	\$ 519.83	100.0%		\$0.00	\$0.00	Footnote 1,2
11241	New	99350-Nurse Practitioner-Home Visit of an Established Patient, 51-70 Minutes	None	CA section 1115(a) CalAIM	\$ 696.57	51-70 minutes	\$ 696.57	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11242	New	99368-Nurse Practitioner-Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 623.79	Per 30 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
11243	New	99408-Nurse Practitioner-Alcohol and/or substance (other than tobacco) abuse structural screening (e.g., AUDIT, DAST), and brief intervention (SBI) services. 15-30 minutes.	None	CA section 1115(a) CalAIM	\$ 239.12	15-30 minutes	\$ 239.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11244	New	99409-Nurse Practitioner-Alcohol and/or substance (other than tobacco) abuse structural screening (e.g., AUDIT, DAST), and brief intervention (SBI) services. Greater than 30 minutes.	None	CA section 1115(a) CalAIM	\$ 623.79	Per 30 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
11245	New	99424-Nurse Practitioner-Principal care management services, for a single high-risk disease, with the following required elements: one complex chronic condition expected to last at least 3 months, and that places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, the condition requires development, monitoring, or revision of disease-specific care plan, the condition requires frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities, ongoing communication and care coordination relevant practitioners furnishing care; first 30 minutes provided personally by a physician or other qualified health care professional, per calendar month	None	CA section 1115(a) CalAIM	\$ 239.12	Per month	\$ 239.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11246	New	99425-Nurse Practitioner-Principal care management services, for a single high-risk disease, with the following required elements: one complex chronic condition expected to last at least 3 months, and that places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, the condition requires development, monitoring, or revision of disease-specific care plan, the condition requires frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities, ongoing communication and care coordination relevant practitioners furnishing care; each additional 30 minutes provided personally by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)	None	CA section 1115(a) CalAIM	\$ 311.90	Per month	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11247	New	99437-Nurse Practitioner-Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; each additional 30 minutes by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)	None	CA section 1115(a) CalAIM	\$ 311.90	Per month	\$ 311.90	100.0%		\$0.00	\$0.00	Footnote 1,2
11248	New	99441-Nurse Practitioner-Telephone Evaluation and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 83.17	5-10 minutes	\$ 83.17	100.0%		\$0.00	\$0.00	Footnote 1,2
11249	New	99442-Nurse Practitioner-Telephone Evaluation and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 166.35	11-20 minutes	\$ 166.35	100.0%		\$0.00	\$0.00	Footnote 1,2
11250	New	99443-Nurse Practitioner-Telephone Evaluation and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 270.31	21-30 minutes	\$ 270.31	100.0%		\$0.00	\$0.00	Footnote 1,2
11251	New	99491-Nurse Practitioner-Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; first 30 minutes provided personally by a physician or other qualified health care professional, per calendar month.	None	CA section 1115(a) CalAIM	\$ 239.12	Per month	\$ 239.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11252	New	99495-Nurse Practitioner-Transitional Care Management Services: Communication (direct contact, telephone, electronic) within 14 calendar days.	None	CA section 1115(a) CalAIM	\$ 155.95	Within 14 calendar days	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11253	New	99496-Nurse Practitioner-Transitional Care Management Services: Communication (direct contact, telephone, electronic) within 7 calendar days.	None	CA section 1115(a) CalAIM	\$ 155.95	Within 7 calendar days	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11254	New	G0396-Nurse Practitioner-Alcohol and/or substance (other than tobacco) abuse structured assessment.15-30 Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 239.12	15-30 minutes	\$ 239.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11255	New	G0397-Nurse Practitioner-Alcohol and/or substance (other than tobacco) abuse structured assessment.30+ Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria)	None	CA section 1115(a) CalAIM	\$ 623.79	Per 30 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
11256	New	G2011-Nurse Practitioner-Alcohol and/or substance (other than tobacco) abuse structured assessment 5 - 14 Min. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 103.97	5-14 minutes	\$ 103.97	100.0%		\$0.00	\$0.00	Footnote 1,2
11257	New	G2212-Nurse Practitioner-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11258	New	G2212-Nurse Practitioner-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
11259	New	H0001-Nurse Practitioner-Alcohol and/or drug assessment. (Note: Use this code for screening to determine the appropriate delivery system for beneficiaries seeking services)	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11260	New	H0003-Nurse Practitioner-Alcohol and/or drug screening. Laboratory analysis	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11261	New	H0004-Nurse Practitioner-Behavioral health counseling and therapy, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11262	New	H0005-Nurse Practitioner-Alcohol and/or drug services; group counseling by a clinician, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
11263	New	H0007-Nurse Practitioner-Alcohol and/or drug services; crisis intervention (outpatient).	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11264	New	H0008-Nurse Practitioner-Alcohol and/or drug services: (hospital inpatient) Subacute detoxification	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11265	New	H0009-Nurse Practitioner-Alcohol and/or drug services: (hospital inpatient) Acute detoxification	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11266	New	H0033-Nurse Practitioner-Oral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11267	New	H0034-Nurse Practitioner-Medication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11268	New	H0034-Nurse Practitioner-Medication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
11269	New	H0048-Nurse Practitioner-Alcohol and/or other drug testing. (Note: Use this code to submit claims for point of care tests)	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11270	New	H0049-Nurse Practitioner-Alcohol and/or drug screening	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11271	New	H0050-Nurse Practitioner-Alcohol and/or Drug Services, brief intervention, 15 minutes (Code must be used to submit claims for Contingency Management Services)	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11272	New	H1000-Nurse Practitioner-Prenatal Care, at risk assessment.	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11273	New	H2014-Nurse Practitioner-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11274	New	H2014-Nurse Practitioner-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
11275	New	H2015-Nurse Practitioner-Comprehensive community support services, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11276	New	H2017-Nurse Practitioner-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11277	New	H2017-Nurse Practitioner-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 34.66	Per 15 minutes	\$ 34.66	100.0%		\$0.00	\$0.00	Footnote 1,2
11278	New	H2021-Nurse Practitioner-Community-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11279	New	H2027-Nurse Practitioner-Psychoeducational Service, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11280	New	H2035-Nurse Practitioner-Alcohol and/or other drug treatment program, Per Hour	None	CA section 1115(a) CalAIM	\$ 623.79	Per 60 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
11281	New	T1006-Nurse Practitioner-Alcohol and/or substance abuse services, family/couple counseling	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11282	New	T1007-Nurse Practitioner-Alcohol and/or substance abuse services, treatment plan development and/or modification.	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11283	New	T1013-Nurse Practitioner-Sign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
11284	New	T1017-Nurse Practitioner-Targeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11285	New	H0025-Peer Support Specialists-Behavioral Health Prevention Education service, delivery of service with target population to affect knowledge, attitude, and/or behavior.	None	CA section 1115(a) CalAIM	\$ 14.33	one time per service	\$ 14.33	100.0%		\$0.00	\$0.00	Footnote 1,2
11286	New	H0038-Peer Support Specialists-Self-help/peer services, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 64.48	Per 15 minutes	\$ 64.48	100.0%		\$0.00	\$0.00	Footnote 1,2
11287	New	H0050-Peer Support Specialists-Alcohol and/or Drug Services, brief intervention, 15 minutes (Code must be used to submit claims for Contingency Management Services)	None	CA section 1115(a) CalAIM	\$ 64.48	Per 15 minutes	\$ 64.48	100.0%		\$0.00	\$0.00	Footnote 1,2
11288	New	90785-Physician Assistant-Interactive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	one time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
11289	New	90791-Physician Assistant-Psychiatric Diagnostic Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11290	New	90792-Physician Assistant-Psychiatric Diagnostic Evaluation with Medical Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11291	New	90846-Physician Assistant-Family Psychotherapy (Without the Patient Present), 26-50 minutes	None	CA section 1115(a) CalAIM	\$ 468.84	26-50 minutes	\$ 468.84	100.0%		\$0.00	\$0.00	Footnote 1,2
11292	New	90847-Physician Assistant-Family Psychotherapy (Conjoint psychotherapy with Patient Present), 26-50 minutes	None	CA section 1115(a) CalAIM	\$ 468.84	26-50 minutes	\$ 468.84	100.0%		\$0.00	\$0.00	Footnote 1,2
11293	New	90849-Physician Assistant-Multiple-Family Group Psychotherapy, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 31.26	Per 15 minutes	\$ 31.26	100.0%		\$0.00	\$0.00	Footnote 1,2
11294	New	90865-Physician Assistant-Nacrosynthesis for Psychiatric Diagnostic and Therapeutic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11295	New	90882-Physician Assistant-Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employers, or institutions.	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11296	New	90885-Physician Assistant-Psychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11297	New	90887-Physician Assistant-Interpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11298	New	90889-Physician Assistant-Preparation of report of patient's psychiatric status, history, treatment, or progress (other than for legal or consultative purpose) for other individuals, agencies, or insurance carries.	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11299	New	96130-Physician Assistant-Psychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
11300	New	96131-Physician Assistant-Psychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
11301	New	96160-Physician Assistant-Administration of patient-focused health risk assessment instrument.	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11302	New	96170-Physician Assistant-Health behavior intervention, family (without the patient present), face-to-face. 16-30 minutes	None	CA section 1115(a) CalAIM	\$ 281.30	16-30 minutes	\$ 281.30	100.0%		\$0.00	\$0.00	Footnote 1,2
11303	New	96171-Physician Assistant-Health behavior intervention, family (without the patient present), face-to-face. Each additional 15 minutes present), face-to-face. Each additional 15 minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11304	New	98966-Physician Assistant-Telephone Assessment and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 75.01	5-10 minutes	\$ 75.01	100.0%		\$0.00	\$0.00	Footnote 1,2
11305	New	98967-Physician Assistant-Telephone Assessment and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 150.03	11-20 minutes	\$ 150.03	100.0%		\$0.00	\$0.00	Footnote 1,2
11306	New	98968-Physician Assistant-Telephone Assessment and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 243.79	21-30 minutes	\$ 243.79	100.0%		\$0.00	\$0.00	Footnote 1,2
11307	New	99202-Physician Assistant-Office or Other Outpatient Visit of New Patient, 15-29 Minutes	None	CA section 1115(a) CalAIM	\$ 206.29	15-29 minutes	\$ 206.29	100.0%		\$0.00	\$0.00	Footnote 1,2
11308	New	99203-Physician Assistant-Office or Other Outpatient Visit of a New patient, 30- 44 Minutes	None	CA section 1115(a) CalAIM	\$ 346.94	30-44 minutes	\$ 346.94	100.0%		\$0.00	\$0.00	Footnote 1,2
11309	New	99204-Physician Assistant-Office or Other Outpatient Visit of a New Patient, 45- 59 Minutes	None	CA section 1115(a) CalAIM	\$ 487.59	45-59 minutes	\$ 487.59	100.0%		\$0.00	\$0.00	Footnote 1,2
11310	New	99205-Physician Assistant-Office or Other Outpatient Visit of a New Patient, 60- 74 Minutes	None	CA section 1115(a) CalAIM	\$ 628.24	60-74 minutes	\$ 628.24	100.0%		\$0.00	\$0.00	Footnote 1,2
11311	New	99212-Physician Assistant-Office or Other Outpatient Visit of an Established Patient, 10-19 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	10-19 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11312	New	99213-Physician Assistant-Office or Other Outpatient Visit of an Established Patient, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 234.42	20-29 minutes	\$ 234.42	100.0%		\$0.00	\$0.00	Footnote 1,2
11313	New	99214-Physician Assistant-Office or Other Outpatient Visit of an Established Patient, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 328.18	30-39 minutes	\$ 328.18	100.0%		\$0.00	\$0.00	Footnote 1,2
11314	New	99215-Physician Assistant-Office or Other Outpatient Visit of an Established Patient, 40-54 Minutes	None	CA section 1115(a) CalAIM	\$ 440.71	40-54 minutes	\$ 440.71	100.0%		\$0.00	\$0.00	Footnote 1,2
11315	New	99234-Physician Assistant-Observation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 35-44 Minutes	None	CA section 1115(a) CalAIM	\$ 534.47	35-44 minutes	\$ 534.47	100.0%		\$0.00	\$0.00	Footnote 1,2
11316	New	99235-Physician Assistant-Observation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 45-53 minutes	None	CA section 1115(a) CalAIM	\$ 722.01	45-53 minutes	\$ 722.01	100.0%		\$0.00	\$0.00	Footnote 1,2
11317	New	99236-Physician Assistant-Observation or Inpatient Hospital Care, Including Admission and Discharge on the Same Date, 54-60 Minutes	None	CA section 1115(a) CalAIM	\$ 862.66	54-60 minutes	\$ 862.66	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11318	New	99238-Physician Assistant-Hospital inpatient or observation discharge day management; 30 minutes or less on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 150.03	Per 30 minutes	\$ 150.03	100.0%		\$0.00	\$0.00	Footnote 1,2
11319	New	99239-Physician Assistant-Hospital inpatient or observation discharge day management; more than 30 minutes on the date of the encounter	None	CA section 1115(a) CalAIM	\$ 562.60	Per 30 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
11320	New	99304-Physician Assistant-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) requiring Admission are of Low Severity, 16- 29 Minutes	None	CA section 1115(a) CalAIM	\$ 281.30	16-29 minutes	\$ 281.30	100.0%		\$0.00	\$0.00	Footnote 1,2
11321	New	99305-Physician Assistant-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of Moderate Severity, 30-39 Minutes	None	CA section 1115(a) CalAIM	\$ 375.07	30-39 minutes	\$ 375.07	100.0%		\$0.00	\$0.00	Footnote 1,2
11322	New	99306-Physician Assistant-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Problem(s) Requiring Admission are of High Severity, 40- 60 Minutes	None	CA section 1115(a) CalAIM	\$ 487.59	40-60 minutes	\$ 487.59	100.0%		\$0.00	\$0.00	Footnote 1,2
11323	New	99307-Physician Assistant-Subsequent Nursing Facility Care per Day for the Evaluation and Management of a Patient. Usually, the Patient is Stable, Recovering or Improving, 1-12 Minutes	None	CA section 1115(a) CalAIM	\$ 112.52	1-12 minutes	\$ 112.52	100.0%		\$0.00	\$0.00	Footnote 1,2
11324	New	99308-Physician Assistant-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient is Responding Inadequately to Therapy or Has Developed a Minor Complication, 13- 19 Minutes	None	CA section 1115(a) CalAIM	\$ 206.29	13-19 minutes	\$ 206.29	100.0%		\$0.00	\$0.00	Footnote 1,2
11325	New	99309-Physician Assistant-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. Usually, the Patient has Developed a Significant Complication or a Significant New Problem, 20-29 Minutes	None	CA section 1115(a) CalAIM	\$ 346.94	20-29 minutes	\$ 346.94	100.0%		\$0.00	\$0.00	Footnote 1,2
11326	New	99310-Physician Assistant-Initial Nursing Facility Care per Day, for the Evaluation and Management of a Patient. The Patient May Be Unstable or May Have Developed a Significant New Problem Requiring Immediate Physician Attention, 30-40 Minutes	None	CA section 1115(a) CalAIM	\$ 487.59	30-40 minutes	\$ 487.59	100.0%		\$0.00	\$0.00	Footnote 1,2
11327	New	99341-Physician Assistant-Home Visit of a New Patient, 15-25 Minutes	None	CA section 1115(a) CalAIM	\$ 206.29	15-25 minutes	\$ 206.29	100.0%		\$0.00	\$0.00	Footnote 1,2
11328	New	99342-Physician Assistant-Home Visit of a New Patient, 26-35 Minutes	None	CA section 1115(a) CalAIM	\$ 421.95	26-35 minutes	\$ 421.95	100.0%		\$0.00	\$0.00	Footnote 1,2
11329	New	99344-Physician Assistant-Home Visit of a New Patient, 51-65 Minutes	None	CA section 1115(a) CalAIM	\$ 628.24	51-65 minutes	\$ 628.24	100.0%		\$0.00	\$0.00	Footnote 1,2
11330	New	99345-Physician Assistant-Home Visit of a New Patient, 66-80 Minutes	None	CA section 1115(a) CalAIM	\$ 768.89	66-80 minutes	\$ 768.89	100.0%		\$0.00	\$0.00	Footnote 1,2
11331	New	99347-Physician Assistant-Home Visit of an Established Patient, 10-20 Minutes	None	CA section 1115(a) CalAIM	\$ 234.42	10-20 minutes	\$ 234.42	100.0%		\$0.00	\$0.00	Footnote 1,2
11332	New	99348-Physician Assistant-Home Visit of an Established Patient, 21-35 Minutes	None	CA section 1115(a) CalAIM	\$ 328.18	21-35 minutes	\$ 328.18	100.0%		\$0.00	\$0.00	Footnote 1,2
11333	New	99349-Physician Assistant-Home Visit of an Established Patient, 36-50 Minutes	None	CA section 1115(a) CalAIM	\$ 468.84	36-50 minutes	\$ 468.84	100.0%		\$0.00	\$0.00	Footnote 1,2
11334	New	99350-Physician Assistant-Home Visit of an Established Patient, 51-70 Minutes	None	CA section 1115(a) CalAIM	\$ 628.24	51-70 minutes	\$ 628.24	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11335	New	99368-Physician Assistant-Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 562.60	Per 30 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
11336	New	99408-Physician Assistant-Alcohol and/or substance (other than tobacco) abuse structural screening (e.g., AUDIT, DAST), and brief intervention (SBI) services. 15-30 minutes.	None	CA section 1115(a) CalAIM	\$ 215.66	15-30 minutes	\$ 215.66	100.0%		\$0.00	\$0.00	Footnote 1,2
11337	New	99409-Physician Assistant-Alcohol and/or substance (other than tobacco) abuse structural screening (e.g., AUDIT, DAST), and brief intervention (SBI) services. Greater than 30 minutes.	None	CA section 1115(a) CalAIM	\$ 562.60	Per 30 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
11338	New	99424-Physician Assistant-Principal care management services, for a single high-risk disease, with the following required elements: one complex chronic condition expected to last at least 3 months, and that places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, the condition requires development, monitoring, or revision of disease-specific care plan, the condition requires frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities, ongoing communication and care coordination relevant practitioners furnishing care; first 30 minutes provided personally by a physician or other qualified health care professional, per calendar month	None	CA section 1115(a) CalAIM	\$ 215.66	Per 30 minutes	\$ 215.66	100.0%		\$0.00	\$0.00	Footnote 1,2
11339	New	99425-Physician Assistant-Principal care management services, for a single high-risk disease, with the following required elements: one complex chronic condition expected to last at least 3 months, and that places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, the condition requires development, monitoring, or revision of disease-specific care plan, the condition requires frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities, ongoing communication and care coordination relevant practitioners furnishing care; each additional 30 minutes provided personally by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)	None	CA section 1115(a) CalAIM	\$ 281.30	Per 30 minutes	\$ 281.30	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11340	New	99437-Physician Assistant-Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; each additional 30 minutes by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)	None	CA section 1115(a) CalAIM	\$ 281.30	Per month	\$ 281.30	100.0%		\$0.00	\$0.00	Footnote 1,2
11341	New	99441-Physician Assistant-Telephone Evaluation and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 75.01	5-10 minutes	\$ 75.01	100.0%		\$0.00	\$0.00	Footnote 1,2
11342	New	99442-Physician Assistant-Telephone Evaluation and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 150.03	11-20 minutes	\$ 150.03	100.0%		\$0.00	\$0.00	Footnote 1,2
11343	New	99443-Physician Assistant-Telephone Evaluation and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 243.79	21-30 minutes	\$ 243.79	100.0%		\$0.00	\$0.00	Footnote 1,2
11344	New	99491-Physician Assistant-Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; first 30 minutes provided personally by a physician or other qualified health care professional, per calendar month.	None	CA section 1115(a) CalAIM	\$ 215.66	Per month	\$ 215.66	100.0%		\$0.00	\$0.00	Footnote 1,2
11345	New	99495-Physician Assistant-Transitional Care Management Services: Communication (direct contact, telephone, electronic) within 14 calendar days.	None	CA section 1115(a) CalAIM	\$ 140.65	Within 14 calendar days	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11346	New	99496-Physician Assistant-Transitional Care Management Services: Communication (direct contact, telephone, electronic) within 7 calendar days.	None	CA section 1115(a) CalAIM	\$ 140.65	Within 7 calendar days	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11347	New	G0396-Physician Assistant-Alcohol and/or substance (other than tobacco) abuse structured assessment.15-30 Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 215.66	15-30 minutes	\$ 215.66	100.0%		\$0.00	\$0.00	Footnote 1,2
11348	New	G0397-Physician Assistant-Alcohol and/or substance (other than tobacco) abuse structured assessment.30+ Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria)	None	CA section 1115(a) CalAIM	\$ 562.60	Per 30 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
11349	New	G2011-Physician Assistant-Alcohol and/or substance (other than tobacco) abuse structured assessment 5 - 14 Min. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 93.77	5-14 minutes	\$ 93.77	100.0%		\$0.00	\$0.00	Footnote 1,2
11350	New	G2212-Physician Assistant-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11351	New	G2212-Physician Assistant-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 31.26	Per 15 minutes	\$ 31.26	100.0%		\$0.00	\$0.00	Footnote 1,2
11352	New	H0001-Physician Assistant-Alcohol and/or drug assessment. (Note: Use this code for screening to determine the appropriate delivery system for beneficiaries seeking services)	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11353	New	H0003-Physician Assistant-Alcohol and/or drug screening. Laboratory analysis	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11354	New	H0004-Physician Assistant-Behavioral health counseling and therapy, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11355	New	H0005-Physician Assistant-Alcohol and/or drug services; group counseling by a clinician, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 31.26	Per 15 minutes	\$ 31.26	100.0%		\$0.00	\$0.00	Footnote 1,2
11356	New	H0007-Physician Assistant-Alcohol and/or drug services; crisis intervention (outpatient).	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11357	New	H0008-Physician Assistant-Alcohol and/or drug services: (hospital inpatient) Subacute detoxification	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11358	New	H0009-Physician Assistant-Alcohol and/or drug services: (hospital inpatient) Acute detoxification	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11359	New	H0033-Physician Assistant-Oral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11360	New	H0034-Physician Assistant-Medication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11361	New	H0034-Physician Assistant-Medication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 31.26	Per 15 minutes	\$ 31.26	100.0%		\$0.00	\$0.00	Footnote 1,2
11362	New	H0048-Physician Assistant-Alcohol and/or other drug testing. (Note: Use this code to submit claims for point of care tests)	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11363	New	H0049-Physician Assistant-Alcohol and/or drug screening	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11364	New	H0050-Physician Assistant-Alcohol and/or Drug Services, brief intervention, 15 minutes (Code must be used to submit claims for Contingency Management Services)	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11365	New	H1000-Physician Assistant-Prenatal Care, at risk assessment.	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11366	New	H2014-Physician Assistant-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11367	New	H2014-Physician Assistant-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 31.26	Per 15 minutes	\$ 31.26	100.0%		\$0.00	\$0.00	Footnote 1,2
11368	New	H2015-Physician Assistant-Comprehensive community support services, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11369	New	H2017-Physician Assistant-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11370	New	H2017-Physician Assistant-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 31.26	Per 15 minutes	\$ 31.26	100.0%		\$0.00	\$0.00	Footnote 1,2
11371	New	H2021-Physician Assistant-Community-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11372	New	H2027-Physician Assistant-Psychoeducational Service, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11373	New	H2035-Physician Assistant-Alcohol and/or other drug treatment program, Per Hour	None	CA section 1115(a) CalAIM	\$ 562.60	Per 60 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
11374	New	T1006-Physician Assistant-Alcohol and/or substance abuse services, family/couple counseling	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11375	New	T1007-Physician Assistant-Alcohol and/or substance abuse services, treatment plan development and/or modification.	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11376	New	T1013-Physician Assistant-Sign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
11377	New	T1017-Physician Assistant-Targeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
11378	New	90785-Psychologist (Licensed or Waivered)-Interactive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	one time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
11379	New	90791-Psychologist (Licensed or Waivered)-Psychiatric Diagnostic Evaluation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11380	New	90846-Psychologist (Licensed or Waivered)-Family Psychotherapy (Without the Patient Present), 26-50 minutes	None	CA section 1115(a) CalAIM	\$ 420.41	26-50 minutes	\$ 420.41	100.0%		\$0.00	\$0.00	Footnote 1,2
11381	New	90847-Psychologist (Licensed or Waivered)-Family Psychotherapy (Conjoint psychotherapy with Patient Present), 26-50 minutes	None	CA section 1115(a) CalAIM	\$ 420.41	26-50 minutes	\$ 420.41	100.0%		\$0.00	\$0.00	Footnote 1,2
11382	New	90849-Psychologist (Licensed or Waivered)-Multiple-Family Group Psychotherapy, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 28.03	Per 15 minutes	\$ 28.03	100.0%		\$0.00	\$0.00	Footnote 1,2
11383	New	90882-Psychologist (Licensed or Waivered)-Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employers, or institutions.	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11384	New	90885-Psychologist (Licensed or Waivered)-Psychiatric Evaluation of Hospital Records, Other Psychiatric Reports, Psychometric and/or Projective Tests, and Other Accumulated Data for Medical Diagnostic Purposes, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11385	New	90887-Psychologist (Licensed or Waivered)-Interpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11386	New	90889-Psychologist (Licensed or Waivered)-Preparation of report of patient's psychiatric status, history, treatment, or progress (other than for legal or consultative purpose) for other individuals, agencies, or insurance carries.	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11387	New	96130-Psychologist (Licensed or Waivered)-Psychological Testing Evaluation, First Hour	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
11388	New	96131-Psychologist (Licensed or Waivered)-Psychological Testing Evaluation, Each Additional Hour	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
11389	New	96160-Psychologist (Licensed or Waivered)-Administration of patient-focused health risk assessment instrument.	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11390	New	96170-Psychologist (Licensed or Waivered)-Health behavior intervention, family (without the patient present), face-to-face. 16-30 minutes	None	CA section 1115(a) CalAIM	\$ 252.24	16-30 minutes	\$ 252.24	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11391	New	96171-Psychologist (Licensed or Waivered)-Health behavior intervention, family (without the patient present), face-to-face. Each additional 15 minutes present), face-to-face. Each additional 15 minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11392	New	98966-Psychologist (Licensed or Waivered)-Telephone Assessment and Management Service, 5-10 Minutes	None	CA section 1115(a) CalAIM	\$ 67.27	5-10 minutes	\$ 67.27	100.0%		\$0.00	\$0.00	Footnote 1,2
11393	New	98967-Psychologist (Licensed or Waivered)-Telephone Assessment and Management Service, 11-20 Minutes	None	CA section 1115(a) CalAIM	\$ 134.53	11-20 minutes	\$ 134.53	100.0%		\$0.00	\$0.00	Footnote 1,2
11394	New	98968-Psychologist (Licensed or Waivered)-Telephone Assessment and Management Service, 21-30 Minutes	None	CA section 1115(a) CalAIM	\$ 218.61	21-30 minutes	\$ 218.61	100.0%		\$0.00	\$0.00	Footnote 1,2
11395	New	99368-Psychologist (Licensed or Waivered)-Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 504.49	Per 30 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
11396	New	99496-Psychologist (Licensed or Waivered)-Transitional Care Management Services: Communication (direct contact, telephone, electronic) within 7 calendar days.	None	CA section 1115(a) CalAIM	\$ 126.12	Within 7 calendar days	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11397	New	G0396-Psychologist (Licensed or Waivered)-Alcohol and/or substance (other than tobacco) abuse structured assessment.15-30 Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 193.39	15-30 minutes	\$ 193.39	100.0%		\$0.00	\$0.00	Footnote 1,2
11398	New	G0397-Psychologist (Licensed or Waivered)-Alcohol and/or substance (other than tobacco) abuse structured assessment.30+ Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria)	None	CA section 1115(a) CalAIM	\$ 504.49	Per 30 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
11399	New	G2011-Psychologist (Licensed or Waivered)-Alcohol and/or substance (other than tobacco) abuse structured assessment 5 -14 Min. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 84.08	5 -14 minutes	\$ 84.08	100.0%		\$0.00	\$0.00	Footnote 1,2
11400	New	G2212-Psychologist (Licensed or Waivered)-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11401	New	G2212-Psychologist (Licensed or Waivered)-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 28.03	Per 15 minutes	\$ 28.03	100.0%		\$0.00	\$0.00	Footnote 1,2
11402	New	H0001-Psychologist (Licensed or Waivered)-Alcohol and/or drug assessment. (Note: Use this code for screening to determine the appropriate delivery system for beneficiaries seeking services)	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11403	New	H0003-Psychologist (Licensed or Waivered)-Alcohol and/or drug screening. Laboratory analysis	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11404	New	H0004-Psychologist (Licensed or Waivered)-Behavioral health counseling and therapy, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11405	New	H0005-Psychologist (Licensed or Waivered)-Alcohol and/or drug services; group counseling by a clinician, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 28.03	Per 15 minutes	\$ 28.03	100.0%		\$0.00	\$0.00	Footnote 1,2
11406	New	H0007-Psychologist (Licensed or Waivered)-Alcohol and/or drug services; crisis intervention (outpatient),	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11407	New	H0049-Psychologist (Licensed or Waivered)-Alcohol and/or drug screening	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11408	New	H0050-Psychologist (Licensed or Waivered)-Alcohol and/or Drug Services, brief intervention, 15 minutes (Code must be used to submit claims for Contingency Management Services)	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11409	New	H1000-Psychologist (Licensed or Waivered)-Prenatal Care, at risk assessment.	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11410	New	H2014-Psychologist (Licensed or Waivered)-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11411	New	H2014-Psychologist (Licensed or Waivered)-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 28.03	Per 15 minutes	\$ 28.03	100.0%		\$0.00	\$0.00	Footnote 1,2
11412	New	H2015-Psychologist (Licensed or Waivered)-Comprehensive community support services, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11413	New	H2017-Psychologist (Licensed or Waivered)-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11414	New	H2017-Psychologist (Licensed or Waivered)-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 28.03	Per 15 minutes	\$ 28.03	100.0%		\$0.00	\$0.00	Footnote 1,2
11415	New	H2021-Psychologist (Licensed or Waivered)-Community-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11416	New	H2027-Psychologist (Licensed or Waivered)-Psychoeducational Service, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11417	New	H2035-Psychologist (Licensed or Waivered)-Alcohol and/or other drug treatment program, Per Hour	None	CA section 1115(a) CalAIM	\$ 504.49	Per 60 minutes	\$ 504.49	100.0%		\$0.00	\$0.00	Footnote 1,2
11418	New	T1006-Psychologist (Licensed or Waivered)-Alcohol and/or substance abuse services, family/couple counseling	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11419	New	T1007-Psychologist (Licensed or Waivered)-Alcohol and/or substance abuse services, treatment plan development and/or modification.	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11420	New	T1013-Psychologist (Licensed or Waivered)-Sign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
11421	New	T1017-Psychologist (Licensed or Waivered)-Targeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 126.12	Per 15 minutes	\$ 126.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11422	New	90785-Registered Nurse-Interactive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	one time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
11423	New	90882-Registered Nurse-Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employers, or institutions.	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11424	New	90887-Registered Nurse-Interpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11425	New	90889-Registered Nurse-Preparation of report of patient's psychiatric status, history, treatment, or progress (other than for legal or consultative purpose) for other individuals, agencies, or insurance carries.	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11426	New	96160-Registered Nurse-Administration of patient-focused health risk assessment instrument.	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11427	New	96170-Registered Nurse-Health behavior intervention, family (without the patient present), face-to-face. 16-30 minutes	None	CA section 1115(a) CalAIM	\$ 254.77	16-30 minutes	\$ 254.77	100.0%		\$0.00	\$0.00	Footnote 1,2
11428	New	96171-Registered Nurse-Health behavior intervention, family (without the patient present), face-to-face. Each additional 15 minutes present), face-to-face. Each additional 15 minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11429	New	99368-Registered Nurse-Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 509.53	Per 30 minutes	\$ 509.53	100.0%		\$0.00	\$0.00	Footnote 1,2
11430	New	G0396-Registered Nurse-Alcohol and/or substance (other than tobacco) abuse structured assessment.15-30 Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 195.32	15-30 minutes	\$ 195.32	100.0%		\$0.00	\$0.00	Footnote 1,2
11431	New	G0397-Registered Nurse-Alcohol and/or substance (other than tobacco) abuse structured assessment.30+ Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria)	None	CA section 1115(a) CalAIM	\$ 509.53	Per 30 minutes	\$ 509.53	100.0%		\$0.00	\$0.00	Footnote 1,2
11432	New	G2011-Registered Nurse-Alcohol and/or substance (other than tobacco) abuse structured assessment 5 - 14 Min. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 84.92	5 -14 minutes	\$ 84.92	100.0%		\$0.00	\$0.00	Footnote 1,2
11433	New	G2212-Registered Nurse-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11434	New	G2212-Registered Nurse-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 28.31	Per 15 minutes	\$ 28.31	100.0%		\$0.00	\$0.00	Footnote 1,2
11435	New	H0001-Registered Nurse-Alcohol and/or drug assessment. (Note: Use this code for screening to determine the appropriate delivery system for beneficiaries seeking services)	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11436	New	H0003-Registered Nurse-Alcohol and/or drug screening. Laboratory analysis	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11437	New	H0004-Registered Nurse-Behavioral health counseling and therapy, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11438	New	H0005-Registered Nurse-Alcohol and/or drug services; group counseling by a clinician, 15 minutes.	None	CA section 1115(a) CalAIM	\$ 28.31	Per 15 minutes	\$ 28.31	100.0%		\$0.00	\$0.00	Footnote 1,2
11439	New	H0007-Registered Nurse-Alcohol and/or drug services; crisis intervention (outpatient),	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11440	New	H0008-Registered Nurse-Alcohol and/or drug services: (hospital inpatient) Subacute detoxification	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11441	New	H0009-Registered Nurse-Alcohol and/or drug services: (hospital inpatient) Acute detoxification	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11442	New	H0033-Registered Nurse-Oral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11443	New	H0034-Registered Nurse-Medication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11444	New	H0034-Registered Nurse-Medication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 28.31	Per 15 minutes	\$ 28.31	100.0%		\$0.00	\$0.00	Footnote 1,2
11445	New	H0048-Registered Nurse-Alcohol and/or other drug testing. (Note: Use this code to submit claims for point of care tests)	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11446	New	H0049-Registered Nurse-Alcohol and/or drug screening	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11447	New	H0050-Registered Nurse-Alcohol and/or Drug Services, brief intervention, 15 minutes (Code must be used to submit claims for Contingency Management Services)	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11448	New	H1000-Registered Nurse-Prenatal Care, at risk assessment.	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11449	New	H2014-Registered Nurse-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11450	New	H2014-Registered Nurse-Skills training and development, per 15 minutes. (Use this code to submit claims for Patient Education Services).	None	CA section 1115(a) CalAIM	\$ 28.31	Per 15 minutes	\$ 28.31	100.0%		\$0.00	\$0.00	Footnote 1,2
11451	New	H2015-Registered Nurse-Comprehensive community support services, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11452	New	H2017-Registered Nurse-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11453	New	H2017-Registered Nurse-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 28.31	Per 15 minutes	\$ 28.31	100.0%		\$0.00	\$0.00	Footnote 1,2
11454	New	H2021-Registered Nurse-Community-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11455	New	H2027-Registered Nurse-Psychoeducational Service, per 15 minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11456	New	H2035-Registered Nurse-Alcohol and/or other drug treatment program, Per Hour	None	CA section 1115(a) CalAIM	\$ 509.53	Per 60 minutes	\$ 509.53	100.0%		\$0.00	\$0.00	Footnote 1,2
11457	New	T1006-Registered Nurse-Alcohol and/or substance abuse services, family/couple counseling	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11458	New	T1007-Registered Nurse-Alcohol and/or substance abuse services, treatment plan development and/or modification.	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
11459	New	T1013-Registered Nurse-Sign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
11460	New	T1017-Registered Nurse-Targeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11461	New	90785-Registered Pharmacist-Interactive Complexity	None	CA section 1115(a) CalAIM	\$ 16.50	one time per service	\$ 16.50	100.0%		\$0.00	\$0.00	Footnote 1,2
11462	New	90887-Registered Pharmacist-Interpretation or Explanation of Results of Psychiatric or Other Medical Procedures to Family or Other Responsible Persons, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11463	New	99368-Registered Pharmacist-Medical Team Conference with Interdisciplinary Team of Health Care Professionals, Participation by Non Physician. Patient and/or Family Not Present. 30 Minutes or More	None	CA section 1115(a) CalAIM	\$ 600.46	Per 30 minutes	\$ 600.46	100.0%		\$0.00	\$0.00	Footnote 1,2
11464	New	G0396-Registered Pharmacist-Alcohol and/or substance (other than tobacco) abuse structured assessment.15-30 Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 230.18	15-30 minutes	\$ 230.18	100.0%		\$0.00	\$0.00	Footnote 1,2
11465	New	G0397-Registered Pharmacist-Alcohol and/or substance (other than tobacco) abuse structured assessment.30+ Minutes. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria)	None	CA section 1115(a) CalAIM	\$ 600.46	Per 30 minutes	\$ 600.46	100.0%		\$0.00	\$0.00	Footnote 1,2
11466	New	G2011-Registered Pharmacist-Alcohol and/or substance (other than tobacco) abuse structured assessment 5 -14 Min. (Note: Use codes G2011, G0396, and G0397 to determine the ASAM Criteria).	None	CA section 1115(a) CalAIM	\$ 100.08	5 -14 minutes	\$ 100.08	100.0%		\$0.00	\$0.00	Footnote 1,2
11467	New	G2212-Registered Pharmacist-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11468	New	G2212-Registered Pharmacist-Prolonged Office or Other Outpatient Evaluation and Management Service(s) beyond the Maximum Time; Each Additional 15 Minutes	None	CA section 1115(a) CalAIM	\$ 33.36	Per 15 minutes	\$ 33.36	100.0%		\$0.00	\$0.00	Footnote 1,2
11469	New	H0001-Registered Pharmacist-Alcohol and/or drug assessment. (Note: Use this code for screening to determine the appropriate delivery system for beneficiaries seeking services)	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11470	New	H0003-Registered Pharmacist-Alcohol and/or drug screening. Laboratory analysis	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11471	New	H0008-Registered Pharmacist-Alcohol and/or drug services: (hospital inpatient) Subacute detoxification	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11472	New	H0009-Registered Pharmacist-Alcohol and/or drug services: (hospital inpatient) Acute detoxification	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11473	New	H0033-Registered Pharmacist-Oral Medication Administration, Direct Observation, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11474	New	H0034-Registered Pharmacist-Medication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11475	New	H0034-Registered Pharmacist-Medication Training and Support, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 33.36	Per 15 minutes	\$ 33.36	100.0%		\$0.00	\$0.00	Footnote 1,2
11476	New	H0048-Registered Pharmacist-Alcohol and/or other drug testing. (Note: Use this code to submit claims for point of care tests)	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11477	New	H0049-Registered Pharmacist-Alcohol and/or drug screening	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
11478	New	H0050-Registered Pharmacist-Alcohol and/or Drug Services, brief intervention, 15 minutes (Code must be used to submit claims for Contingency Management Services)	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11479	New	H1000-Registered Pharmacist-Prenatal Care, at risk assessment.	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11480	New	H2017-Registered Pharmacist-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11481	New	H2017-Registered Pharmacist-Psychosocial Rehabilitation, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 33.36	Per 15 minutes	\$ 33.36	100.0%		\$0.00	\$0.00	Footnote 1,2
11482	New	H2021-Registered Pharmacist-Community-Based Wrap-Around Services, per 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
11483	New	H2035-Registered Pharmacist-Alcohol and/or other drug treatment program, Per Hour	None	CA section 1115(a) CalAIM	\$ 600.46	Per 60 minutes	\$ 600.46	100.0%		\$0.00	\$0.00	Footnote 1,2
11484	New	T1013-Registered Pharmacist-Sign Language or Oral Interpretive Services, 15 Minutes	None	CA section 1115(a) CalAIM	\$ 30.00	Per 15 minutes	\$ 30.00	100.0%		\$0.00	\$0.00	Footnote 1,2
11485	New	T1017-Registered Pharmacist-Targeted Case Management, Each 15 Minutes	None	CA section 1115(a) CalAIM	\$ 150.12	Per 15 minutes	\$ 150.12	100.0%		\$0.00	\$0.00	Footnote 1,2
<b>12000</b>		<b>DMC ODS Partial Hospitalization</b>										
12001	New	S0201-Partial Hospitalization Services; less than 24 hours, per diem	None	CA section 1115(a) CalAIM	\$ 658.84	24 hours	\$ 658.84	100.0%		\$0.00	\$0.00	Footnote 1,2
<b>13000</b>		<b>Non-Perinatal NTP and MAT Services Rates</b>										
13001	New	Methadone Daily Rate	None	CA section 1115(a) CalAIM	\$21.32	Day	\$21.32	100.0%		\$0.00	\$0.00	Footnote 1,2
13002	New	Buprenorphine - Naloxone Combo Film Daily Rate	None	CA section 1115(a) CalAIM	\$29.27	Day	\$29.27	100.0%		\$0.00	\$0.00	Footnote 1,2
13003	New	Buprenorphine - Naloxone Combo Tablets Daily Rate	None	CA section 1115(a) CalAIM	\$32.88	Day	\$32.88	100.0%		\$0.00	\$0.00	Footnote 1,2
13004	New	Buprenorphine Mono Daily Rate	None	CA section 1115(a) CalAIM	\$32.38	Day	\$32.38	100.0%		\$0.00	\$0.00	Footnote 1,2
13005	New	Disulfiram Daily Rate	None	CA section 1115(a) CalAIM	\$11.68	Day	\$11.68	100.0%		\$0.00	\$0.00	Footnote 1,2
13006	New	Buprenorphine Injectable (Sublocade)	None	CA section 1115(a) CalAIM	\$2,036.95	Per injectable	\$2,036.95	100.0%		\$0.00	\$0.00	Footnote 1,2
13007	New	Naltrexone Injectable (Vivitrol)	None	CA section 1115(a) CalAIM	\$2,224.91	Per injectable	\$2,224.91	100.0%		\$0.00	\$0.00	Footnote 1,2
13008	New	Naloxone HCL - 2 pack (Generic)	None	CA section 1115(a) CalAIM	\$106.07	Per 2 pack	\$106.07	100.0%		\$0.00	\$0.00	Footnote 1,2
13009	New	Naloxone HCL - 2 pack (Narcan)	None	CA section 1115(a) CalAIM	\$144.76	Per 2 pack	\$144.76	100.0%		\$0.00	\$0.00	Footnote 1,2
13010	New	Naltrexone -Per Visit	None	CA section 1115(a) CalAIM	\$19.06	Per 2 pack	\$19.06	100.0%		\$0.00	\$0.00	Footnote 1,2
<b>14000</b>		<b>Perinatal NTP and MAT Services Rates</b>										
14001	New	Methadone Daily Rate	None	CA section 1115(a) CalAIM	\$32.74	Day	\$32.74	100.0%		\$0.00	\$0.00	Footnote 1,2
14002	New	Buprenorphine - Naloxone Combo Film Daily Rate	None	CA section 1115(a) CalAIM	\$40.70	Day	\$40.70	100.0%		\$0.00	\$0.00	Footnote 1,2
14003	New	Buprenorphine - Naloxone Combo Tablets Daily Rate	None	CA section 1115(a) CalAIM	\$44.30	Day	\$44.30	100.0%		\$0.00	\$0.00	Footnote 1,2
14004	New	Buprenorphine Mono Daily Rate	None	CA section 1115(a) CalAIM	\$43.82	Day	\$43.82	100.0%		\$0.00	\$0.00	Footnote 1,2
14005	New	Disulfiram Daily Rate	None	CA section 1115(a) CalAIM	\$11.86	Day	\$11.86	100.0%		\$0.00	\$0.00	Footnote 1,2
14006	New	Buprenorphine Injectable (Sublocade)	None	CA section 1115(a) CalAIM	\$2,036.95	Per injectable	\$2,036.95	100.0%		\$0.00	\$0.00	Footnote 1,2
14007	New	Naltrexone Injectable (Vivitrol)	None	CA section 1115(a) CalAIM	\$2,224.91	Per injectable	\$2,224.91	100.0%		\$0.00	\$0.00	Footnote 1,2
14008	New	Naloxone HCL - 2 pack (Generic)	None	CA section 1115(a) CalAIM	\$106.07	Per 2 pack	\$106.07	100.0%		\$0.00	\$0.00	Footnote 1,2
14009	New	Naloxone HCL - 2 pack (Narcan)	None	CA section 1115(a) CalAIM	\$144.76	Per 2 pack	\$144.76	100.0%		\$0.00	\$0.00	Footnote 1,2
										\$0.00	\$0.00	

Fee Statistics	
Fee Category	
1268	New
0	Decreased
0	Increased

Department Name: Behavioral Health  
 Fund Center: 166

Fee Detail					FY 2023-24 FEE SCHEDULE - REVISED							Comments
Fee Indicator #	Fee Category	Fee Description	Board Discretion Type	Authority	Fee Amount	Unit Desc.	Actual Cost	Projected % Cost Recovery	Projected Units of Service (Sold)	Projected Total Revenue	Hypothetical GF Subsidy at % Cost Recovery and Units Sold	Comments
			0 Unchanged 16 Deleted									
			1284 Total									
		<b>Board Discretion Type</b>										
			16 Full 0 Partial 1268 None									
			1284 Total									

**Department Name:** Behavioral Health  
**Fund Center:** 166

Footnote #	Footnote Narrative
1	While the standard treatment fees are calculated and based on the state's posted rates, clients are assessed a fee based on their ability to pay. The ability to pay is calculated based on a sliding fee scale or the Uniform Method of Determining Ability To Pay (UMDAP), taking into consideration factors such as household income and the number of dependents in the household.
2	<a href="https://www.dhcs.ca.gov/services/MH/Pages/medi-cal-behavioral-health-fee-schedules.aspx">Rates are based on the DHCS posted rates: https://www.dhcs.ca.gov/services/MH/Pages/medi-cal-behavioral-health-fee-schedules.aspx</a>