

Line of Business: MED - NHMEDICAID
Department of Health and Human Services
2021 Children's Mental Health HCBC Medicaid Rate Schedule



Proc Cd	1st Proc Mod Cd	2nd Proc Mod Cd	3rd Proc Mod Cd	4th Proc Mod Cd	Proc Short Desc	SA	Fctr Cd - Desc	Prcng Amt	Max Unit Amt	Prcng Beg Dt	Prcng End Dt
H0038	HW	SC	HB-Adult program, non geriatric		Family Peer support, SELF-HELP/PEER SERV	Y	G1 - Gen Fee	\$21.19	999	01/01/2021	12/31/9999
H0038	HW	SC	U3- Program group, child and/or adolescent		Youth Peer support, SELF-HELP/PEER SERVI	Y	G1 - Gen Fee	\$10.92	999	01/01/2021	12/31/9999
H0041	HW	SC	U1-Respite care in General foster home for children ages 6-11		RESPITE CARE, NOT IN THE HOME, FOSTER C	Y	G1 - Gen Fee	\$19.14	24	01/01/2021	12/31/9999
H0041	HW	SC	U2- Respite care in General foster home for children ages 12+		RESPITE CARE, NOT IN THE HOME, FOSTER C	Y	G1 - Gen Fee	\$22.75	24	01/01/2021	12/31/9999
H0045	HW	SC			RESPITE CARE, NOT IN THE HOME, GROUP HO	Y	G1 - Gen Fee	\$116.93	24	01/01/2021	12/31/9999
H2022	HW	SC			COMMUNITY-BASED WRAP-AROUND SERVICES, PE	Y	G1 - Gen Fee	\$74.70	999	01/01/2021	12/31/9999
S5145	HW	SC			RESPITE CARE, NOT IN THE HOME, FOSTER C	Y	G1 - Gen Fee	\$74.41	24	01/01/2021	12/31/9999
S5150	HW	SC			RESPITE CARE - In the home	Y	G1 - Gen Fee	\$4.52	1,440	01/01/2021	12/31/9999
H0046	HW	SC	-	-	MENTAL HEALTH SERVICES, NOT OTHERWISE SP	Y	G3 - Gen Man F	\$0.00	999	01/01/2021	12/31/9999