

ORDINANCE NO. 3514

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 October 31, 2023, Ordinance No. 3497 was adopted amending Behavioral Health fees associated with fund center 166 on FY 2023-24 Schedule B to reflect the California Advancing and Innovating Medi-Cal (CalAIM) Behavioral Health Payment Reform model 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.

d. With the enactment of CalAIM, the Board does not have authority or discretion over the aforementioned Behavioral Health Fees, which are determined, updated and published annually by DHCS. (California Welfare and Institutions Code (W&I Code) Article 5.51, Sections 14184.100, 14184.102, 14184.402, 14184.403, 14184.404, and 14184.405)

e. DHCS has established a fee schedule for outpatient services, day services, other 24- hour services, psychiatric inpatient hospital services, and community-based mobile crisis intervention services provided through the Specialty Mental Health Services delivery system. DHCS has established a fee schedule for outpatient services, day services, residential treatment Services, inpatient withdrawal management services, partial hospitalization services, and community-based mobile crisis intervention services provided through the Drug Medi-Cal Programs. The fee schedule for each group of services can be found the following website: <https://www.dhcs.ca.gov/services/MH/Pages/medi-cal-behavioral-health-fee-schedules-FY24-25.aspx>.

f. FY 2024-25 Schedule B shall now be modified by deleting the 1,268 previous fees established under the cost reimbursed model and adding footnotes to provide a link to DHCS fees and explain adjustments to rates.

g. By definition, these charges are not a "tax" and are exempt from voter approval pursuant to California Constitution, Article XIII C. Section 1, paragraph e(1)[charge for specific

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).

h. Public Notice has been given in accordance with Government Code Section 66016 and 66018.

SECTION 2: The fee schedules are amended as follows:

a. That the fee changes attached and incorporated by reference herein shown on Schedule "B" as "New" and as "Deleted" are hereby approved, and shall be effective July 16, 2024.

b. That the changes to footnotes attached and incorporated by reference herein shown on Schedule "B" are hereby approved, and shall be effective July 16, 2024.

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 Ortiz-Legg and PASSED and ADOPTED by the Board of Supervisors of the County of San Luis Obispo, State of California, on the Gibson, by the following roll call vote, to wit:

AYES: Supervisors Ortiz-Legg, Gibson, Paulding and Chairperson Arnold

NOES: None

ABSENT: Supervisor Peschong

ABSTAINING: None



Debbie Arnold
Chairperson of the Board of Supervisors
County of San Luis Obispo, State of California

ATTEST:

Matt Pontes
Ex-Officio Clerk of the Board of Supervisors
County of San Luis Obispo, State of California

By: Niki Martin
Deputy Clerk

Approved as to form and legal effect:

RITA L. NEAL
COUNTY COUNSEL

By: /s/ Jared E. Christensen

Date: July 24, 2024
Deputy County Counsel



FISCAL YEAR 2024-25

FEE SCHEDULE "B"

EFFECTIVE DATE: JULY 16,
2024

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Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
3000		SMHS 24 Hour Services										
3001	Delete	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	Delete	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	Delete	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
4000		SMHS Day Services Rates										
4001	Delete	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	Delete	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	Delete	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	Delete	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	Delete	S9484-Crisis Stabilization	None	CA section 1115(a) CalAIM	\$ 285.08	Day	\$ 285.08	100.0%		\$0.00	\$0.00	
5000		SMHS Mobile Crisis Rates										
5001	Delete	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	Delete	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	Delete	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
6000		SMHS Outpatient Rate										
6001	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6006	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6018	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6031	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6041	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6054	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6064	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6076	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6086	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6098	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6106	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6116	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6129	Delete	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
6130	Delete	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
6131	Delete	90885-Clinical Nurse Specialist 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
6132	Delete	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	Delete	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
6134	Delete	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	Delete	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
6136	Delete	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
6137	Delete	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
6138	Delete	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
6139	Delete	90887-Clinical Nurse Specialist 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
6140	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6141	Delete	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	Delete	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	Delete	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	Delete	90887-Occupational Therapist 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	\$ 108.64	Per 15 minutes	\$ 108.64	100.0%		\$0.00	\$0.00	Footnote 1,2
6145	Delete	96105-Licensed Physician Assessment 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	Delete	96105-Physician Assistant Assessment 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	Delete	96105-Nurse Practitioner Assessment 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	Delete	96105-Clinical Nurse Specialist Assessment 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
6149	Delete	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	Delete	96110-Licensed Physician Developmental 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	Delete	96110-Physician Assistant Developmental 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	Delete	96110-Nurse Practitioner Developmental 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	Delete	96110-Registered Nurse Developmental 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	Delete	96110-Clinical Nurse Specialist Developmental 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	Delete	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	Delete	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	Delete	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	Delete	96110-Occupational Therapist Developmental 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	Delete	96112-Licensed Physician Developmental 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	Delete	96112-Physician Assistant Developmental 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	Delete	96112-Nurse Practitioner Developmental 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	Delete	96112-Clinical Nurse Specialist Developmental 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	Delete	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	Delete	96112-Occupational Therapist Developmental 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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6165	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6175	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6190	Delete	96125-Clinical Nurse Specialist Standardized 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	Delete	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	Delete	96127-Licensed Physician Brief 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	Delete	96127-Physician Assistant Brief 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	Delete	96127-Nurse Practitioner Brief 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	Delete	96127-Registered Nurse Brief 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	Delete	96127-Clinical Nurse Specialist Brief 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	Delete	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	Delete	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
6199	Delete	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	Delete	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
6201	Delete	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
6202	Delete	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
6203	Delete	96130-Clinical Nurse Specialist 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
6204	Delete	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	Delete	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
6206	Delete	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
6207	Delete	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
6208	Delete	96131-Clinical Nurse Specialist 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
6209	Delete	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	Delete	96132-Licensed Physician Neuropsychological 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	Delete	96132-Physician Assistant Neuropsychological 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	Delete	96132-Nurse Practitioner Neuropsychological 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	Delete	96132-Clinical Nurse Specialist Neuropsychological 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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6214	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6222	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6234	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6241	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6254	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6260	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6273	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6279	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6288	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6294	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6304	Delete	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	Delete	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	Delete	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
6307	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6321	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6326	Delete	98968-Nurse PractitionerTelephone 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	Delete	98968-Clinical Nurse SpecialistTelephone 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	Delete	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	Delete	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	Delete	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	Delete	99202-Licensed PhysicianOffice 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	Delete	99202-Physician AssistantOffice 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	Delete	99202-Nurse PractitionerOffice 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	Delete	99202-Clinical Nurse SpecialistOffice 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	Delete	99203-Licensed PhysicianOffice 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	Delete	99203-Physician AssistantOffice 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	Delete	99203-Nurse PractitionerOffice 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	Delete	99203-Clinical Nurse SpecialistOffice 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	Delete	99204-Licensed PhysicianOffice 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	Delete	99204-Physician AssistantOffice 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	Delete	99204-Nurse PractitionerOffice 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	Delete	99204-Clinical Nurse SpecialistOffice 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	Delete	99205-Licensed PhysicianOffice 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 2024-25 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
6344	Delete	99205-Physician AssistantOffice 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	Delete	99205-Nurse PractitionerOffice 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	Delete	99205-Clinical Nurse SpecialistOffice 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	Delete	99212-Licensed PhysicianOffice 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	Delete	99212-Physician AssistantOffice 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	Delete	99212-Nurse PractitionerOffice 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
6350	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6366	Delete	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	Delete	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	Delete	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
6369	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6379	Delete	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	Delete	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
6381	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6393	Delete	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	Delete	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	Delete	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
6396	Delete	99236-Physician AssistantObservation 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	Delete	99236-Nurse PractitionerObservation 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	Delete	99236-Clinical Nurse SpecialistObservation 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	Delete	99238-Licensed PhysicianHospital 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	Delete	99238-Physician AssistantHospital 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	Delete	99238-Nurse PractitionerHospital 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	Delete	99238-Clinical Nurse SpecialistHospital 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	Delete	99239-Licensed PhysicianHospital 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	Delete	99239-Physician AssistantHospital 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	Delete	99239-Nurse PractitionerHospital 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	Delete	99239-Clinical Nurse SpecialistHospital 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	Delete	99242-Licensed PhysicianOffice 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	Delete	99242-Physician AssistantOffice 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	Delete	99242-Nurse PractitionerOffice 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	Delete	99242-Clinical Nurse SpecialistOffice 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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6411	Delete	99243-Licensed PhysicianOffice 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	Delete	99243-Physician AssistantOffice 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
6413	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6425	Delete	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	Delete	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
6427	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6439	Delete	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
6440	Delete	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
6441	Delete	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
6442	Delete	99304-Clinical Nurse Specialist 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
6443	Delete	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
6444	Delete	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
6445	Delete	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
6446	Delete	99305-Clinical Nurse Specialist 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
6447	Delete	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
6448	Delete	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
6449	Delete	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
6450	Delete	99306-Clinical Nurse Specialist 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
6451	Delete	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
6452	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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 2024-25 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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6486	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6487	Delete	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
6488	Delete	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
6489	Delete	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
6490	Delete	99348-Clinical Nurse Specialist 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
6491	Delete	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
6492	Delete	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
6493	Delete	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
6494	Delete	99349-Clinical Nurse Specialist 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
6495	Delete	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
6496	Delete	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
6497	Delete	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
6498	Delete	99350-Clinical Nurse Specialist 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
6499	Delete	99366-Physician Assistant 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	\$ 562.60	Per 30 minutes	\$ 562.60	100.0%		\$0.00	\$0.00	Footnote 1,2
6500	Delete	99366-Nurse Practitioner 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	\$ 623.79	Per 30 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6501	Delete	99366-Registered Nurse 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	\$ 509.53	Per 30 minutes	\$ 509.53	100.0%		\$0.00	\$0.00	Footnote 1,2
6502	Delete	99366-Clinical Nurse Specialist 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	\$ 623.79	Per 30 minutes	\$ 623.79	100.0%		\$0.00	\$0.00	Footnote 1,2
6503	Delete	99366-Registered Pharmacist 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	\$ 600.46	Per 30 minutes	\$ 600.46	100.0%		\$0.00	\$0.00	Footnote 1,2
6504	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6505	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6515	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6517	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6536	Delete	99484-Psychiatric TechnicianCare 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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6538	Delete	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	Delete	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	Delete	99605-Registered PharmacistMedication 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	Delete	99606-Registered PharmacistMedication 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	Delete	99607-Registered PharmacistMedication 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	Delete	G2212-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	\$ 313.61	Per 15 minutes	\$ 313.61	100.0%		\$0.00	\$0.00	Footnote 1,2
6544	Delete	G2212-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	\$ 140.65	Per 15 minutes	\$ 140.65	100.0%		\$0.00	\$0.00	Footnote 1,2
6545	Delete	G2212-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	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6546	Delete	G2212-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	\$ 127.38	Per 15 minutes	\$ 127.38	100.0%		\$0.00	\$0.00	Footnote 1,2
6547	Delete	G2212-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	\$ 155.95	Per 15 minutes	\$ 155.95	100.0%		\$0.00	\$0.00	Footnote 1,2
6548	Delete	G2212-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	\$ 66.92	Per 15 minutes	\$ 66.92	100.0%		\$0.00	\$0.00	Footnote 1,2
6549	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6551	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6562	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6565	Delete	H0025-Peer Support Specialists Behavioral 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	Delete	H0031-Physician Assistant Mental 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	Delete	H0031-Nurse Practitioner Mental 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	Delete	H0031-Registered Nurse Mental 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	Delete	H0031-Clinical Nurse Specialist Mental 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	Delete	H0031-Licensed Vocational Nurse Mental 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	Delete	H0031-Registered Pharmacist Mental 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	Delete	H0031-Psychiatric Technician Mental 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	Delete	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	Delete	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	Delete	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	Delete	H0031-Occupational Therapist Mental 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	Delete	H0031-Mental Health Rehabilitation Specialist Mental 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	Delete	H0031-Other Qualified Practitioner Mental 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	Delete	H0032-Physician Assistant Mental 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	Delete	H0032-Nurse Practitioner Mental 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	Delete	H0032-Registered Nurse Mental 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	Delete	H0032-Clinical Nurse Specialist Mental 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
6583	Delete	H0032-Licensed Vocational Nurse Mental 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	Delete	H0032-Registered Pharmacist Mental 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	Delete	H0032-Psychiatric Technician Mental 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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6588	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6605	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6612	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6631	Delete	H2000-Clinical Nurse SpecialistComprehensive 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	Delete	H2000-Licensed Vocational NurseComprehensive 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	Delete	H2000-Registered PharmacistComprehensive 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	Delete	H2000-Psychiatric TechnicianComprehensive 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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6637	Delete	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	Delete	H2000-Occupational TherapistComprehensive 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	Delete	H2000-Mental Health Rehabilitation SpecialistComprehensive 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	Delete	H2000-Other Qualified PractitionerComprehensive 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	Delete	H2011-Licensed PhysicianCrisis 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	Delete	H2011-Physician AssistantCrisis 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	Delete	H2011-Nurse PractitionerCrisis 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	Delete	H2011-Registered NurseCrisis 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	Delete	H2011-Clinical Nurse SpecialistCrisis 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	Delete	H2011-Licensed Vocational NurseCrisis 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	Delete	H2011-Registered PharmacistCrisis 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	Delete	H2011-Psychiatric TechnicianCrisis 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	Delete	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	Delete	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	Delete	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	Delete	H2011-Occupational TherapistCrisis 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	Delete	H2011-Mental Health Rehabilitation SpecialistCrisis 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	Delete	H2011-Other Qualified PractitionerCrisis 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
6655	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6662	Delete	H2017-Psychiatric Technician Psychosocial 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	Delete	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	Delete	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	Delete	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	Delete	H2017-Occupational Therapist Psychosocial 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	Delete	H2017-Mental Health Rehabilitation Specialist Psychosocial 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	Delete	H2017-Other Qualified Practitioner Psychosocial 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	Delete	H2017HQ-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
6670	Delete	H2017HQ-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
6671	Delete	H2017HQ-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
6672	Delete	H2017HQ-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
6673	Delete	H2017HQ-Clinical Nurse Specialist 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
6674	Delete	H2017HQ-Licensed Vocational Nurse Psychosocial 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	Delete	H2017HQ-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
6676	Delete	H2017HQ-Psychiatric Technician Psychosocial 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	Delete	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	Delete	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
6679	Delete	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	Delete	H2017HQ-Occupational Therapist Psychosocial 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	Delete	H2017HQ-Mental Health Rehabilitation Specialist Psychosocial 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	Delete	H2017HQ-Other Qualified Practitioner Psychosocial 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	Delete	H2019-Licensed Physician Therapeutic 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	Delete	H2019-Physician Assistant Therapeutic 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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6685	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6703	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6709	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
6727	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
6735	Delete	T1017-Licensed Vocational Nurse Targeted 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	Delete	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
6737	Delete	T1017-Psychiatric Technician Targeted 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	Delete	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	Delete	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	Delete	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	Delete	T1017-Occupational Therapist Targeted 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	Delete	T1017-Mental Health Rehabilitation Specialist Targeted 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	Delete	T1017-Other Qualified Practitioner Targeted 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
7000		SMHS Therapeutic Foster Care Rates										
7001	Delete	S5145-Therapeutic Foster Care	None	CA section 1115(a) CalAIM	\$ 531.90	Day	\$ 531.90	100.0%		\$0.00	\$0.00	Footnote 1,2
8000		DMC ODS 24 Hour Day Services										
8001	Delete	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	Delete	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	Delete	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	Delete	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
9000		DMC ODS Inpatient Withdrawal Management										
9001	Delete	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
10000		DMC ODS Mobile Crisis										
10001	Delete	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	Delete	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	Delete	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
11000		DMC ODS Outpatient										
11001	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11004	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11016	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11024	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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 carriers.	None	CA section 1115(a) CalAIM	\$ 81.62	Per 15 minutes	\$ 81.62	100.0%		\$0.00	\$0.00	Footnote 1,2
11036	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11041	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11049	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11055	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11068	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11075	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11087	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11095	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11103	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11112	Delete	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	Delete	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	Delete	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
11115	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11118	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11123	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11132	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11141	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11156	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11161	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11170	Delete	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	Delete	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	Delete	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
11173	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11184	Delete	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	Delete	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	Delete	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	Delete	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
11188	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11203	Delete	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	Delete	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
11205	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11224	Delete	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	Delete	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
11226	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11241	Delete	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
11242	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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 2024-25 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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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 2024-25 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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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 2024-25 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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11298	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11299	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11318	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11320	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11335	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11336	Delete	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	Delete	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	Delete	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	Delete	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
11340	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11342	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11351	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11356	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11373	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11380	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11391	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11396	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11405	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11411	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11424	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11429	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11438	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11447	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11461	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
11466	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
11478	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
12000		DMC ODS Partial Hospitalization										

Department Name: Behavioral Health
 Fund Center: 166

Fee Detail					FY 2024-25 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
12001	Delete	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
13000		Non-Perinatal NTP and MAT Services Rates										
13001	Delete	Methadone Daily Rate	None	CA section 1115(a) CalAIM	\$21.32	Day	\$21.32	100.0%		\$0.00	\$0.00	Footnote 1,2
13002	Delete	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	Delete	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	Delete	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	Delete	Disulfiram Daily Rate	None	CA section 1115(a) CalAIM	\$11.68	Day	\$11.68	100.0%		\$0.00	\$0.00	Footnote 1,2
13006	Delete	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	Delete	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	Delete	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	Delete	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	Delete	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
14000		Perinatal NTP and MAT Services Rates										
14001	Delete	Methadone Daily Rate	None	CA section 1115(a) CalAIM	\$32.74	Day	\$32.74	100.0%		\$0.00	\$0.00	Footnote 1,2
14002	Delete	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	Delete	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	Delete	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	Delete	Disulfiram Daily Rate	None	CA section 1115(a) CalAIM	\$11.86	Day	\$11.86	100.0%		\$0.00	\$0.00	Footnote 1,2
14006	Delete	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	Delete	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	Delete	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	Delete	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

#REF! #REF!

Fee Statistics	
Fee Category	
	0 New
	0 Decreased
	0 Increased
	0 Unchanged
	1268 Deleted
	1268 Total
Board Discretion Type	
	0 Full
	0 Partial
	1268 None
	1268 Total

Department Name: Behavioral Health
Fund Center: 166

Footnote #	Footnote Narrative
1	Reimbursement rates for eligible service are based on the DHCS posted rates available at https://www.dhcs.ca.gov/services/MH/Pages/medi-cal-behavioral-health-fee-schedules.aspx
2	The Cal-AIM Act (California Welfare and Institutions Code (W&I Code) Article 5.51, Sections 14184.100, 14184.102, 14184.402, 14184.403, 14184.404, and 14184.405) governs payment reform and determines how these rates are set annually. The County Board of Supervisors has no discretion to set rates associated with Medi-Cal reimbursement for eligible Behavioral Health services.
3	Behavioral Health will continue to assess a client’s ability to pay based on a sliding fee scale (for Drug and Alcohol Service clients) or the Uniform Method of Determining Ability to Pay (UMDAP) (for Mental Health clients), taking into consideration factors such as household income ant the number of dependents in the household.