

Line of Business: MED - NH MEDICAID
 Department of Health and Human Services
 Primary Care and Prevention Focused Model of Care
 Effective 09/01/2024



| Proc Cd | Proc Mod | Proc Short Desc | SA | Fctr Cd - Desc | Prcng Amt | Max Unit Amt | Prcng Beg Dt | Prcng End Dt |
|---------|----------|------------------------------|----|----------------|-----------|--------------|--------------|--------------|
| 96110 | | Developmental screen w/score | N | G1 - Gen Fee | \$5.48 | 2 | 07/01/2023 | 12/31/9999 |
| 96127 | | Brief emotional/behav assmt | N | G1 - Gen Fee | \$3.50 | 1 | 07/01/2023 | 12/31/9999 |
| 96160 | | Pt-focused hlth risk assmt | N | G1 - Gen Fee | \$14.39 | 1 | 09/01/2024 | 12/31/9999 |
| 99202 | 33 | Office/outpatient visit new | N | G1 - Gen Fee | \$54.63 | 1 | 09/01/2024 | 12/31/9999 |
| 99203 | 33 | Office/outpatient visit new | N | G1 - Gen Fee | \$64.45 | 1 | 09/01/2024 | 12/31/9999 |
| 99204 | 33 | Office/outpatient visit new | N | G1 - Gen Fee | \$87.75 | 1 | 09/01/2024 | 12/31/9999 |
| 99205 | 33 | Office/outpatient visit new | N | G1 - Gen Fee | \$106.14 | 1 | 09/01/2024 | 12/31/9999 |
| 99211 | 33 | Office/outpatient visit est | N | G1 - Gen Fee | \$34.74 | 1 | 09/01/2024 | 12/31/9999 |
| 99212 | 33 | Office/outpatient visit est | N | G1 - Gen Fee | \$51.89 | 1 | 09/01/2024 | 12/31/9999 |
| 99213 | 33 | Office/outpatient visit est | N | G1 - Gen Fee | \$64.62 | 1 | 09/01/2024 | 12/31/9999 |
| 99214 | 33 | Office/outpatient visit est | N | G1 - Gen Fee | \$89.88 | 1 | 09/01/2024 | 12/31/9999 |
| 99215 | 33 | Office/outpatient visit est | N | G1 - Gen Fee | \$100.01 | 1 | 09/01/2024 | 12/31/9999 |
| 99381 | | Init pm e/m new pat infant | N | G1 - Gen Fee | \$49.05 | 999 | 07/01/2023 | 12/31/9999 |
| 99381 | 33 | Init pm e/m new pat infant | N | G1 - Gen Fee | \$66.90 | 1 | 09/01/2024 | 12/31/9999 |
| 99382 | | Init pm e/m new pat 1-4 yrs | N | G1 - Gen Fee | \$49.05 | 1 | 07/01/2023 | 12/31/9999 |
| 99382 | 33 | Init pm e/m new pat 1-4 yrs | N | G1 - Gen Fee | \$66.90 | 1 | 09/01/2024 | 12/31/9999 |
| 99383 | | Prev visit new age 5-11 | N | G1 - Gen Fee | \$49.05 | 1 | 07/01/2023 | 12/31/9999 |
| 99383 | 33 | Prev visit new age 5-11 | N | G1 - Gen Fee | \$66.90 | 1 | 09/01/2024 | 12/31/9999 |
| 99384 | | Prev visit new age 12-17 | N | G1 - Gen Fee | \$51.50 | 1 | 07/01/2023 | 12/31/9999 |
| 99384 | 33 | Prev visit new age 12-17 | N | G1 - Gen Fee | \$69.35 | 1 | 09/01/2024 | 12/31/9999 |
| 99385 | | Prev visit new age 18-39 | N | G1 - Gen Fee | \$44.15 | 1 | 07/01/2023 | 12/31/9999 |
| 99385 | 33 | Prev visit new age 18-39 | N | G1 - Gen Fee | \$62.00 | 1 | 09/01/2024 | 12/31/9999 |
| 99386 | | Prev visit new age 40-64 | N | G1 - Gen Fee | \$44.15 | 1 | 07/01/2023 | 12/31/9999 |
| 99386 | 33 | Prev visit new age 40-64 | N | G1 - Gen Fee | \$62.00 | 1 | 09/01/2024 | 12/31/9999 |
| 99387 | | Init pm e/m new pat 65+ yrs | N | G1 - Gen Fee | \$44.15 | 1 | 07/01/2023 | 12/31/9999 |
| 99387 | 33 | Init pm e/m new pat 65+ yrs | N | G1 - Gen Fee | \$62.00 | 1 | 09/01/2024 | 12/31/9999 |
| 99391 | | Per pm reeval est pat infant | N | G1 - Gen Fee | \$67.95 | 1 | 07/01/2023 | 12/31/9999 |
| 99391 | 33 | Per pm reeval est pat infant | N | G1 - Gen Fee | \$85.80 | 1 | 09/01/2024 | 12/31/9999 |
| 99392 | | Prev visit est age 1-4 | N | G1 - Gen Fee | \$67.95 | 1 | 07/01/2023 | 12/31/9999 |
| 99392 | 33 | Prev visit est age 1-4 | N | G1 - Gen Fee | \$85.80 | 1 | 09/01/2024 | 12/31/9999 |
| 99393 | | Prev visit est age 5-11 | N | G1 - Gen Fee | \$67.95 | 1 | 07/01/2023 | 12/31/9999 |
| 99393 | 33 | Prev visit est age 5-11 | N | G1 - Gen Fee | \$85.80 | 1 | 09/01/2024 | 12/31/9999 |
| 99394 | | Prev visit est age 12-17 | N | G1 - Gen Fee | \$67.95 | 1 | 07/01/2023 | 12/31/9999 |
| 99394 | 33 | Prev visit est age 12-17 | N | G1 - Gen Fee | \$85.80 | 1 | 09/01/2024 | 12/31/9999 |
| 99395 | | Prev visit est age 18-39 | N | G1 - Gen Fee | \$44.15 | 1 | 07/01/2023 | 12/31/9999 |
| 99395 | 33 | Prev visit est age 18-39 | N | G1 - Gen Fee | \$62.00 | 1 | 09/01/2024 | 12/31/9999 |

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|---------|----------|------------------------------|----|----------------|-----------|--------------|--------------|--------------|
| 99396 | | Prev visit est age 40-64 | N | G1 - Gen Fee | \$44.15 | 1 | 07/01/2023 | 12/31/9999 |
| 99396 | 33 | Prev visit est age 40-64 | N | G1 - Gen Fee | \$62.00 | 1 | 09/01/2024 | 12/31/9999 |
| 99397 | | Per pm reeval est pat 65+ yr | N | G1 - Gen Fee | \$44.15 | 1 | 07/01/2023 | 12/31/9999 |
| 99397 | 33 | Per pm reeval est pat 65+ yr | N | G1 - Gen Fee | \$62.00 | 1 | 09/01/2024 | 12/31/9999 |
| 99401 | | Prev med cnsl indiv apprx 15 | N | G1 - Gen Fee | \$18.40 | 1 | 07/01/2023 | 12/31/9999 |
| 99402 | | Prev med cnsl indiv apprx 30 | N | G1 - Gen Fee | \$30.65 | 1 | 07/01/2023 | 12/31/9999 |
| 99403 | | Prev med cnsl indiv apprx 45 | N | G1 - Gen Fee | \$49.05 | 1 | 07/01/2023 | 12/31/9999 |
| 99404 | | Prev med cnsl indiv apprx 60 | N | G1 - Gen Fee | \$61.32 | 1 | 07/01/2023 | 12/31/9999 |
| 99406 | | Behav chng smoking 3-10 min | N | G1 - Gen Fee | \$11.63 | 1 | 09/01/2024 | 12/31/9999 |
| 99407 | | Behav chng smoking > 10 min | N | G1 - Gen Fee | \$17.88 | 1 | 07/01/2023 | 12/31/9999 |
| 99408 | | Audit/dast 15-30 min | N | G1 - Gen Fee | \$40.87 | 1 | 07/01/2023 | 12/31/9999 |
| 99409 | | Audit/dast over 30 min | N | G1 - Gen Fee | \$78.43 | 1 | 07/01/2023 | 12/31/9999 |
| 99411 | | Preventive counseling group | N | G1 - Gen Fee | \$8.59 | 1 | 07/01/2023 | 12/31/9999 |
| 99412 | | Preventive counseling group | N | G1 - Gen Fee | \$12.13 | 1 | 07/01/2023 | 12/31/9999 |
| 99424 | | Prin care mgmt phys 1st 30 | N | G1 - Gen Fee | \$65.49 | 1 | 09/01/2024 | 12/31/9999 |
| 99425 | | Prin care mgmt phys ea addl | N | G1 - Gen Fee | \$47.62 | 2 | 09/01/2024 | 12/31/9999 |
| 99426 | | Prin care mgmt staff 1st 30 | N | G1 - Gen Fee | \$49.21 | 1 | 09/01/2024 | 12/31/9999 |
| 99427 | | Prin care mgmt staff ea addl | N | G1 - Gen Fee | \$37.65 | 2 | 09/01/2024 | 12/31/9999 |
| 99437 | | Chrn care mgmt phys ea addl | N | G1 - Gen Fee | \$47.34 | 2 | 09/01/2024 | 12/31/9999 |
| 99439 | | Chrn care mgmt svc ea addl | N | G1 - Gen Fee | \$38.20 | 2 | 09/01/2024 | 12/31/9999 |
| 99484 | | Care mgmt svc bhvl hlth cond | N | G1 - Gen Fee | \$48.56 | 1 | 09/01/2024 | 12/31/9999 |
| 99487 | | Prev med cnsl indiv apprx 60 | N | G1 - Gen Fee | \$107.12 | 1 | 09/01/2024 | 12/31/9999 |
| 99489 | | Cmplx chron care addl 30 min | N | G1 - Gen Fee | \$57.64 | 10 | 09/01/2024 | 12/31/9999 |
| 99490 | | Chron care mgmt srvc 20 min | N | G1 - Gen Fee | \$49.78 | 1 | 09/01/2024 | 12/31/9999 |
| 99491 | | Chrn care mgmt svc 30 min | N | G1 - Gen Fee | \$67.10 | 1 | 09/01/2024 | 12/31/9999 |
| 99495 | | Trans care mgmt 14 day disch | N | G1 - Gen Fee | \$165.09 | 1 | 09/01/2024 | 12/31/9999 |
| 99496 | | Transj care mgmt high f2f 7d | N | G1 - Gen Fee | \$223.29 | 1 | 09/01/2024 | 12/31/9999 |
| 99605 | | Mtms by pharm np 15 min | N | G1 - Gen Fee | \$17.85 | 1 | 09/01/2024 | 12/31/9999 |
| 99606 | | Mtms by pharm est 15 min | N | G1 - Gen Fee | \$17.85 | 1 | 09/01/2024 | 12/31/9999 |
| 99607 | | Mtms by pharm addl 15 min | N | G1 - Gen Fee | \$17.85 | 1 | 09/01/2024 | 12/31/9999 |
| G0442 | | Annual alcohol screen 15 min | N | G1 - Gen Fee | \$15.24 | 1 | 09/01/2024 | 12/31/9999 |
| G0443 | | Brief alcohol misuse counsel | N | G1 - Gen Fee | \$19.81 | 1 | 09/01/2024 | 12/31/9999 |
| G0444 | | Depression screen annual | N | G1 - Gen Fee | \$15.24 | 1 | 09/01/2024 | 12/31/9999 |
| G0447 | | Behavior counsel obesity 15m | N | G1 - Gen Fee | \$20.08 | 2 | 09/01/2024 | 12/31/9999 |
| G0473 | | Group behave couns 2-10 | N | G1 - Gen Fee | \$9.78 | 2 | 09/01/2024 | 12/31/9999 |

*Use of modifier 33 indicates that the visit included comprehensive medication review (CMR)