



# CBH Standard Fee Schedule

| Psychiatric Services |  |             |       |           |              |              |              |
|----------------------|--|-------------|-------|-----------|--------------|--------------|--------------|
| Service Type         |  | Unit        |       | Full Rate | 60% Discount | 75% Discount | 90% Discount |
| 90792                | Psychiatric Evaluation   | per service | MD    | \$808.25  | \$323.30     | \$202.06     | \$80.83      |
|                      |  |             | PMHNP | \$808.25  | \$323.30     | \$202.06     | \$80.83      |
| 99202                | New Patients Evaluation & Management (MDM Straightforward)         | per service | MD    | \$405.00  | \$162.00     | \$101.25     | \$40.50      |
|                      |  |             | PMHNP | \$388.00  | \$155.20     | \$97.00      | \$38.80      |
| 99203                | New Patients Evaluation & Management (MDM Low)                     | per service | MD    | \$480.00  | \$192.00     | \$120.00     | \$48.00      |
|                      |  |             | PMHNP | \$455.00  | \$182.00     | \$113.75     | \$45.50      |
| 99204                | New Patients Evaluation & Management (MDM Moderate)                | per service | MD    | \$626.00  | \$250.40     | \$156.50     | \$62.60      |
|                      |  |             | PMHNP | \$581.00  | \$232.40     | \$145.25     | \$58.10      |
| 99205                | New Patients Evaluation & Management (MDM High)                    | per service | MD    | \$727.00  | \$290.80     | \$181.75     | \$72.70      |
|                      |  |             | PMHNP | \$672.00  | \$268.80     | \$168.00     | \$67.20      |
| 99212                | Established Patients Evaluation & Management (MDM Straightforward) | per service | MD    | \$224.00  | \$89.60      | \$56.00      | \$22.40      |
|                      |  |             | PMHNP | \$204.80  | \$81.92      | \$51.20      | \$20.48      |
| 99213                | Established Patients Evaluation & Management (MDM Low)             | per service | MD    | \$334.00  | \$133.60     | \$83.50      | \$33.40      |
|                      |  |             | PMHNP | \$309.40  | \$123.76     | \$77.35      | \$30.94      |
| 99214                | Established Patients Evaluation & Management (MDM Moderate)        | per service | MD    | \$485.00  | \$194.00     | \$121.25     | \$48.50      |
|                      |  |             | PMHNP | \$455.00  | \$182.00     | \$113.75     | \$45.50      |
| 99215                | Established Patients Evaluation & Management (MDM High)            | per service | MD    | \$616.00  | \$246.40     | \$154.00     | \$61.60      |
|                      |  |             | PMHNP | \$581.00  | \$232.40     | \$145.25     | \$58.10      |

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# CBH Standard Fee Schedule

| Outpatient Substance Use Services |                                 |                |           |              |              |              |
|-----------------------------------|---------------------------------|----------------|-----------|--------------|--------------|--------------|
| Service Type                      |                                 | Unit           | Full Rate | 60% Discount | 75% Discount | 90% Discount |
| H0001 HF                          | Assessment                      | per service    | \$730.24  | \$292.10     | \$182.56     | \$73.02      |
| H2032 HF                          | Activity Therapy                | per 15 minutes | \$30.89   | \$12.36      | \$7.72       | \$3.09       |
| H0006 HF                          | Case Management                 | per service    | \$111.04  | \$44.42      | \$27.76      | \$11.10      |
| T1006 HF                          | Family Counseling               | per service    | \$539.97  | \$215.99     | \$134.99     | \$54.00      |
| H0005 HF                          | Group Counseling (1 hour)       | per service    | \$215.00  | \$86.00      | \$53.75      | \$21.50      |
| H0005 HF                          | Group Counseling (1.5 hours)    | per service    | \$322.50  | \$129.00     | \$80.63      | \$32.25      |
| H0005 HF                          | Group Counseling (2 hours)      | per service    | \$430.00  | \$172.00     | \$107.50     | \$43.00      |
| H0004 HF                          | Individual Counseling & Therapy | per 15 minutes | \$177.70  | \$71.08      | \$44.43      | \$17.77      |
| H0038 HF                          | Peer Support                    | per 15 minutes | \$87.12   | \$34.85      | \$21.78      | \$8.71       |
| H0002 HF                          | Screening                       | per service    | \$240.00  | \$96.00      | \$60.00      | \$24.00      |
| H0032 HF                          | Service Plan/Treatment Plan     | per service    | \$516.57  | \$206.63     | \$129.14     | \$51.66      |

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# CBH Standard Fee Schedule

| Outpatient Mental Health Services |  |  |           |              |              |              |
|-----------------------------------|--|--|-----------|--------------|--------------|--------------|
| Service Type                      |  | Unit                                   | Full Rate | 60% Discount | 75% Discount | 90% Discount |
| H0039                             | Assertive Community Treatment                          | per 15 minutes                         | \$134.13  | \$53.65      | \$33.53      | \$13.41      |
| 90791/<br>H0031                   | Assessment   | per service                            | \$730.24  | \$292.10     | \$182.56     | \$73.02      |
| H2000<br>TG                       | Assessment with CANS                                   | per service                            | \$730.24  | \$292.10     | \$182.56     | \$73.02      |
| T1016                             | Case Management  | per 15 minutes                         | \$111.04  | \$44.42      | \$27.76      | \$11.10      |
| H2000<br>TG                       | Child and Adolescent Needs and Strengths Survey (CANS) | per service                            | \$486.30  | \$194.52     | \$121.58     | \$48.63      |
| H0036                             | Community Psychiatric Supportive Treatment             | per 15 minutes                         | \$87.12   | \$34.85      | \$21.78      | \$8.71       |
| H2011                             | Crisis Intervention                                    | per 15 minutes                         | \$47.50   | \$19.00      | \$11.88      | \$4.75       |
| 90839                             | Crisis Psychotherapy                                   | first 60 minutes *add'l fees may apply | \$741.88  | \$296.75     | \$185.47     | \$74.19      |
| 90882                             | Environmental Intervention                             | per service                            | \$210.00  | \$84.00      | \$52.50      | \$21.00      |
| 90847                             | Family Therapy with client                             | per service                            | \$539.97  | \$215.99     | \$134.99     | \$54.00      |
| 90846                             | Family Therapy without client                          | per service                            | \$521.50  | \$208.60     | \$130.38     | \$52.15      |
| 90853                             | Group Psychotherapy ( 1 hour)                          | per service                            | \$215.00  | \$86.00      | \$53.75      | \$21.50      |
| 90853                             | Group Psychotherapy (1.5 hours)                        | per service                            | \$322.50  | \$129.00     | \$80.63      | \$32.25      |

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|-----------------------------------|---------------------------------|----------------|-----------|--------------|--------------|--------------|
| Service Type                      |                                 | Unit           | Full Rate | 60% Discount | 75% Discount | 90% Discount |
| 90853                             | Group Psychotherapy (2 hours)   | per service    | \$430.00  | \$172.00     | \$107.50     | \$43.00      |
| H0034                             | Medication Training and Support | per 15 minutes | \$86.43   | \$34.57      | \$21.61      | \$8.64       |
| H0004                             | Individual Counseling           | per 15 minutes | \$177.70  | \$71.08      | \$44.43      | \$17.77      |
| 90849                             | Multi-Family Group              | per service    | \$183.91  | \$73.56      | \$45.98      | \$18.39      |
| H0038                             | Peer Support                    | per 15 minutes | \$87.12   | \$34.85      | \$21.78      | \$8.71       |
| 90832                             | Psychotherapy 16-37             | per 30 minutes | \$355.40  | \$142.16     | \$88.85      | \$35.54      |
| 90834                             | Psychotherapy 38-52             | per 45 minutes | \$512.10  | \$204.84     | \$128.03     | \$51.21      |
| 90837                             | Psychotherapy 53+               | per 60 minutes | \$710.80  | \$284.32     | \$177.70     | \$71.08      |
| H0032                             | Service Plan/ Treatment Plan    | per service    | \$516.67  | \$206.67     | \$129.17     | \$51.67      |
| H2014                             | Skills Training & Development   | per 15 minutes | \$86.43   | \$34.57      | \$21.61      | \$8.64       |

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