

Provider Type 60 School Based Child Health Services

Reimbursement Rates

Updated: November 23, 2010

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Note:

Procedure codes with a rate of \$0.00 are reimbursed at 62% of Usual and Customary charges unless noted otherwise in Nevada Medicaid policy

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Procedure Code	Description	Mod	Rate
90801	PSY DX INTERVIEW		125.23
92506	SPEECH/HEARING EVALUATION	GN	83.08
92507	SPEECH/HEARING THERAPY	GN	66.16
92508	SPEECH/HEARING THERAPY	GN	64.92
92526	ORAL FUNCTION THERAPY	GN	67.39
92610	EVALUATE SWALLOWING FUNCTION	GN	37.23
92620	AUDITORY FUNCTION, 60 MIN		38.48
92621	AUDITORY FUNCTION, + 15 MIN		9.98
95831	LIMB MUSCLE TESTING, MANUAL	GP	25.54
96101	PSYCHO TESTING BY PSYCH/PHYS		79.91
96110	DEVELOPMENTAL TEST, LIM		11.68
96116	NEUROBEHAVIORAL STATUS EXAM		89.95
96150	ASSESS HLTH/BEHAVE, INIT		22.77
96151	ASSESS HLTH/BEHAVE, SUBSEQ		22.15
96152	INTERVENE HLTH/BEHAVE, INDIV		21.23
96153	INTERVENE HLTH/BEHAVE, GROUP		4.62
97001	PT EVALUATION		58.77
97002	PT RE-EVALUATION		31.39
97003	OT EVALUATION		60.92
97004	OT RE-EVALUATION		31.39
97010	HOT OR COLD PACKS THERAPY	GO	3.38
97010	HOT OR COLD PACKS THERAPY	GP	3.38
97110	THERAPEUTIC EXERCISES	GO	23.08
97110	THERAPEUTIC EXERCISES	GP	23.08

Procedure Code	Description	Mod	Rate
97112	NEUROMUSCULAR REEDUCATION	GO	24.00
97112	NEUROMUSCULAR REEDUCATION	GP	24.00
97116	GAIT TRAINING THERAPY	GO	19.69
97116	GAIT TRAINING THERAPY	GP	19.69
97150	GROUP THERAPEUTIC PROCEDURES	GO	15.39
97150	GROUP THERAPEUTIC PROCEDURES	GP	15.39
97530	THERAPEUTIC ACTIVITIES	GO	28.74
97530	THERAPEUTIC ACTIVITIES	GP	28.74
97532	COGNITIVE SKILLS DEVELOPMENT	GO	19.41
97533	SENSORY INTEGRATION	GO	20.69
97533	SENSORY INTEGRATION	GP	20.69
97535	SELF CARE MNGMENT TRAINING	GO	25.85
97535	SELF CARE MNGMENT TRAINING	GP	25.85
97755	ASSISTIVE TECHNOLOGY ASSESS	GO	26.21
97755	ASSISTIVE TECHNOLOGY ASSESS	GP	26.21
97760	ORTHOTIC MGMT AND TRAINING	GO	25.79
97760	ORTHOTIC MGMT AND TRAINING	GP	25.79
97761	PROSTHETIC TRAINING	GO	23.53
97761	PROSTHETIC TRAINING	GP	23.53
99366	TEAM CONF W/PAT BY HC PRO		36.89
99366	TEAM CONF W/PAT BY HC PRO	AH	36.89
99366	TEAM CONF W/PAT BY HC PRO	AM	32.12
99366	TEAM CONF W/PAT BY HC PRO	GN	36.89
99366	TEAM CONF W/PAT BY HC PRO	GO	36.89
99366	TEAM CONF W/PAT BY HC PRO	GP	36.89
99366	TEAM CONF W/PAT BY HC PRO	SA	32.12
99366	TEAM CONF W/PAT BY HC PRO	TD	32.12
99367	TEAM CONF W/O PAT BY PHYS		47.77
99368	TEAM CONF W/O PAT BY HC PRO		27.07
99368	TEAM CONF W/O PAT BY HC PRO	AH	31.10
99368	TEAM CONF W/O PAT BY HC PRO	AM	27.07
99368	TEAM CONF W/O PAT BY HC PRO	GN	27.07
99368	TEAM CONF W/O PAT BY HC PRO	GO	27.07
99368	TEAM CONF W/O PAT BY HC PRO	GP	27.07
99368	TEAM CONF W/O PAT BY HC PRO	SA	27.07
99368	TEAM CONF W/O PAT BY HC PRO	TD	27.07
A4221	MAINT DRUG INFUS CATH PER WK		22.26
A4222	INFUSION SUPPLIES WITH PUMP		44.17
A4230	INFUS INSULIN PUMP NON NEEDL		10.07
A4231	INFUSION INSULIN PUMP NEEDLE		5.10
A4232	SYRINGE W/NEEDLE INSULIN 3CC		2.61
A4310	INSERT TRAY W/O BAG/CATH		7.72
A4311	CATHETER W/O BAG 2-WAY LATEX		14.84
A4312	CATH W/O BAG 2-WAY SILICONE		18.04

Procedure Code	Description	Mod	Rate
A4313	CATHETER W/BAG 3-WAY		18.52
A4316	CATH W/DRAINAGE 3-WAY		28.40
A4320	IRRIGATION TRAY		5.33
A4322	IRRIGATION SYRINGE		3.04
A4333	URINARY CATH ANCHOR DEVICE		2.20
A4334	URINARY CATH LEG STRAP		4.93
A4351	STRAIGHT TIP URINE CATHETER		1.81
A4353	INTERMITTENT URINARY CATH		7.00
A4354	CATH INSERTION TRAY W/BAG		11.80
A4450	NON-WATERPROOF TAPE		0.09
A4452	WATERPROOF TAPE		0.36
A4605	TRACH SUCTION CATH CLOSE SYS	NU	16.40
A4624	TRACHEAL SUCTION TUBE	NU	2.63
A4625	TRACH CARE KIT FOR NEW TRACH		6.58
A4626	TRACHEOSTOMY CLEANING BRUSH		2.78
A4628	OROPHARYNGEAL SUCTION CATH	NU	3.65
A4629	TRACHEOSTOMY CARE KIT		4.61
A5200	PERCUTANEOUS CATHETER ANCHOR		11.29
A7000	DISPOSABLE CANISTER FOR PUMP	NU	9.54
A7002	TUBING USED W SUCTION PUMP	NU	3.83
B4034	ENTER FEED SUPKIT SYR BY DAY		5.66
B4035	ENTERAL FEED SUPP PUMP PER D		10.79
B4036	ENTERAL FEED SUP KIT GRAV BY		7.39
E1902	AAC NON-ELECTRONIC BOARD		0.00
K0552	SUPPLY/EXT INF PUMP SYR TYPE	NU	2.61
K0601	REPL BATT SILVER OXIDE 1.5 V	NU	1.10
K0602	REPL BATT SILVER OXIDE 3 V	NU	6.36
K0603	REPL BATT ALKALINE 1.5 V	NU	0.57
K0604	REPL BATT LITHIUM 3.6 V	NU	6.09
K0605	REPL BATT LITHIUM 4.5 V	NU	14.60
T1001	NURSING ASSESSMENT/EVALUATN		15.16
T1002	RN SERVICES UP TO 15 MINUTES		19.70
T1003	LPN/LVN SERVICES UP TO 15MIN		12.50
V5008	HEARING SCREENING		45.68
V5010	ASSESSMENT FOR HEARING AID		59.80
V5011	HEARING AID FITTING/CHECKING		11.18
V5011	HEARING AID FITTING/CHECKING	50	16.80
V5014	HEARING AID REPAIR/MODIFYING		0.00
V5014	HEARING AID REPAIR/MODIFYING	RB	0.00
V5030	BODY-WORN HEARING AID AIR		350.00
V5040	BODY-WORN HEARING AID BONE		350.00
V5050	HEARING AID MONAURAL IN EAR		350.00
V5060	BEHIND EAR HEARING AID		350.00
V5070	GLASSES AIR CONDUCTION		350.00

Procedure Code	Description	Mod	Rate
V5080	GLASSES BONE CONDUCTION		350.00
V5090	HEARING AID DISPENSING FEE		234.09
V5100	BODY-WORN BILAT HEARING AID		700.00
V5110	HEARING AID DISPENSING FEE		468.18
V5120	BODY-WORN BINAUR HEARING AID		700.00
V5130	IN EAR BINAURAL HEARING AID		700.00
V5140	BEHIND EAR BINAUR HEARING AI		700.00
V5150	GLASSES BINAURAL HEARING AID		700.00
V5160	DISPENSING FEE BINAURAL		468.18
V5170	WITHIN EAR CROS HEARING AID		700.00
V5180	BEHIND EAR CROS HEARING AID		700.00
V5190	GLASSES CROS HEARING AID		700.00
V5200	CROS HEARING AID DISPENS FEE		468.18
V5210	IN EAR BICROS HEARING AID		700.00
V5220	BEHIND EAR BICROS HEARING AI		700.00
V5230	GLASSES BICROS HEARING AID		700.00
V5240	DISPENSING FEE BICROS		468.18
V5241	DISPENSING FEE, MONAURAL		234.09
V5242	HEARING AID, MONAURAL, CIC		350.00
V5243	HEARING AID, MONAURAL, ITC		350.00
V5244	HEARING AID, PROG, MON, CIC		350.00
V5245	HEARING AID, PROG, MON, ITC		350.00
V5246	HEARING AID, PROG, MON, ITE		350.00
V5247	HEARING AID, PROG, MON, BTE		350.00
V5248	HEARING AID, BINAURAL, CIC		700.00
V5249	HEARING AID, BINAURAL, ITC		700.00
V5250	HEARING AID, PROG, BIN, CIC		700.00
V5251	HEARING AID, PROG, BIN, ITC		700.00
V5252	HEARING AID, PROG, BIN, ITE		700.00
V5253	HEARING AID, PROG, BIN, BTE		700.00
V5254	HEARING ID, DIGIT, MON, CIC		350.00
V5255	HEARING AID, DIGIT, MON, ITC		350.00
V5256	HEARING AID, DIGIT, MON, ITE		350.00
V5257	HEARING AID, DIGIT, MON, BTE		350.00
V5258	HEARING AID, DIGIT, BIN, CIC		700.00
V5259	HEARING AID, DIGIT, BIN, ITC		700.00
V5260	HEARING AID, DIGIT, BIN, ITE		700.00
V5261	HEARING AID, DIGIT, BIN, BTE		700.00
V5262	HEARING AID, DISP, MONAURAL		350.00
V5263	HEARING AID, DISP, BINAURAL		700.00
V5264	EAR MOLD/INSERT		30.00
V5265	EAR MOLD/INSERT, DISP		22.00
V5266	BATTERY FOR HEARING DEVICE		6.00
V5267	HEARING AID SUPPLY/ACCESSORY		0.00

Procedure Code	Description	Mod	Rate
V5268	ALD TELEPHONE AMPLIFIER		0.00
V5269	ALERTING DEVICE, ANY TYPE		0.00
V5270	ALD, TV AMPLIFIER, ANY TYPE		0.00
V5271	ALD, TV CAPTION DECODER		0.00
V5272	TDD		0.00
V5273	ALD FOR COCHLEAR IMPLANT		0.00
V5274	ALD UNSPECIFIED		0.00
V5275	EAR IMPRESSION		0.00
V5299	HEARING SERVICE		0.00
V5336	REPAIR COMMUNICATION DEVICE		0.00