

Annual 2025 Poverty Guidelines effective 01/01/2025

***\*IF UN-INSURED BUT FALL IN THE FULL FEE RANGE, PLEASE FOLLOW THE FULL FEE SCHEDULE, FEES WILL STILL BE DISCOUNTED.***

	Tier 5	Tier 15	Tier 25			Discounted Full Fee See DiversusHealth.com
	\$5 per day	\$15 per day	\$25 per day			
Household / Family Size	At or Below 100%	125%	150%	175%	200%	Above 200%
1	\$0-\$15,650	\$15,651-\$19,563	\$19,564-\$23,475	\$23,476-\$27,388	\$27,389-\$31,300	\$31,301+
2	\$0-\$21,150	\$21,151-\$26,438	\$26,439-\$31,725	\$31,726-\$37,013	\$37,014-\$42,300	\$42,301+
3	\$0-\$26,650	\$26,651-\$33,313	\$33,314-\$39,975	\$39,976-\$46,638	\$46,639-\$53,300	\$53,301+
4	\$0-\$32,150	\$32,151-\$40,188	\$40,189-\$48,225	\$48,226-\$56,263	\$56,264-\$64,300	\$64,301+
5	\$0-\$37,650	\$37,651-\$47,063	\$47,064-\$56,475	\$56,476-\$65,888	\$65,889-\$75,300	\$75,301+
6	\$0-\$43,150	\$43,151-\$53,938	\$53,939-\$64,725	\$64,726-\$75,513	\$75,514-\$86,300	\$86,301+
7	\$0-\$48,650	\$48,651-\$60,813	\$60,814-\$72,975	\$72,976-\$85,138	\$85,139-\$97,300	\$97,301+
8	\$0-\$54,150	\$54,151-\$67,688	\$67,689-\$81,225	\$81,226-\$94,763	\$94,764-\$108,300	\$108,301+
9	\$0-\$59,700	\$59,701-\$74,625	\$74,626-\$89,550	\$89,551-\$104,475	\$104,476-\$119,400	\$119,401+
10	\$0-\$65,250	\$65,251-\$81,563	\$81,564-\$97,875	\$97,876-\$114,188	\$114,189-\$130,500	\$130,501+

For families/housholds with more than 10 person, add \$5,550 for each Additional person.

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## DISCOUNTED FULL FEE

***\*\*Red services are not typically covered by commercial insurances\*\****

Procedure Code	Encounter value	Estimated Full fee rate	Billing Code
Alcohol/drugAssess	per session	\$131.00	90791
Case Mgmt BH	per 15 minutes, minimum of 8	subject to sliding fee scale or max of \$50 per day.	T1017
	minutes		
Case Mgmt SU	per 15 minutes, minimum of 8	subject to sliding fee scale or max of \$50 per day.	H0006
	minutes		
Clubhouse Group BH	per 15 minutes, minimum of 8	subject to sliding fee scale or max of \$50 per day.	H2030
	minutes up to 4 hrs		
Clubhouse Ind BH	per 15 minutes, minimum of 8	subject to sliding fee scale or max of \$50 per day.	H2030
	minutes up to 4 hrs		
ClubhousePerDiemGrp BH	4 hrs +	subject to sliding fee scale or max of \$50 per day.	H2031
		subject to sliding fee scale or max of \$50 per day.	H2031
Consult-MD lev 2 (BH and SU)	per session	\$65.00	99242
Consult-MD lev 3 (BH and SU)	per session	\$97.00	99243
Consult-MD lev 4 (BH and SU)	per session	\$138.00	99244
Consult-MD lev 5 (BH and SU)	per session	\$180.00	99245
Crisis Interv BH OP	per 15 minutes, minimum of 8	subject to sliding fee scale or max of \$50 per day.	H2011
	minutes		
Crisis Psychother BH	31 to 60 Minutes ea additional 30	\$106.00	90839
CrisisPsychotherAddO	minutes	\$68.00	90840
Diagnostic Eval BH (and Dx Assessment Review)	per session	\$131.00	90791
DrugScreenResult Cou	per session	subject to sliding fee scale or max of \$50 per day.	S9445
		subject to sliding fee scale or max of \$50 per day.	
EM, EstPt level 2 (BH and SU)	per session	\$48.00	99212
EM, EstPt level 3 (BH and SU)	per session	\$77.00	99213
EM, EstPt level 4 (BH and SU)	per session	\$128.00	99214

EM, EstPt level 5 (BH and SU)	per session	\$153.00	99215
EM, Psychotherapy Add on Code BH and SU	16 to 37 Minutes	\$65.00	90833
EM, Psychotherapy Add on Code BH and SU	38 to 52 Minutes	\$75.00	90836
EM, Psychotherapy Add on Code BH and SU	53 to 1440 Minutes	\$99.00	90838
Family Ther w pt BH	per session, minimum of 26 Minutes	\$100.00	90847
Family Ther w pt SU	per session, minimum of 26 Minutes	\$100.00	90847
FamTherWout pt BH	per session, minimum of 26 Minutes	\$100.00	90846
FamTherWout pt SU	per session, minimum of 26 Minutes	\$100.00	90846
Group Ther-BH	20 yrs and younger, minimum of 30 min, 21+ yrs minimum of 45 minutes	\$40.00	90853
Group Ther-OP SU	minimum of 31 minutes, charge per hour	\$40.00	90853
Injection (BH and SU)	per session	\$12.00	96372
Interactive compl BH	per session, minimum of 16 minutes	\$14.00	90785
InterdisTeamConfwoPt	per session, minimum of 30 Minutes	\$83.00	99368
InterdisTeamConfwPt	per session, minimum of 30 Minutes	\$83.00	99366
IOP BH Group Per Diem	60+ minutes	subject to sliding fee scale or max of \$50 per day.	S9480
IOP BH ind/fam Per Diem	60+ minutes	subject to sliding fee scale or max of \$50 per day.	S9480

Med Training/Supp (BH and SU)	per 15 minutes, minimum of 8 minutes	subject to sliding fee scale or max of \$50 per day.	H0034
MHNA-RNs BH SDA	per encounter per session, minimum of 30 Minutes	subject to sliding fee scale or max of \$50 per day.	H0031
Multi-Fam GrpTher BH		\$40.00	90849
NeuroPsych Testing Eval Services	1st hour	\$87.00	96132
NeuroPsych Testing Eval Services Add on Code	each additonal hour	\$84.00	96133
Ongoing Support to Maintain Employment Ind BH and SU	per 15 minutes, minimum of 8 minutes	subject to sliding fee scale or max of \$50 per day.	H2025
Outrch Serv Grp (BH and SU)	per 15 minutes, minimum of 8 minutes	subject to sliding fee scale or max of \$50 per day.	H0023
OutrchServInd/fam (BH and SU)	per 15 minutes, minimum of 8 minutes	subject to sliding fee scale or max of \$50 per day.	H0023
Peer Serv Grp (BH and SU)	per 15 minutes, minimum of 8 minutes	subject to sliding fee scale or max of \$50 per day.	H0038
Peer Serv Ind (BH and SU)	per 15 minutes, minimum of 8 minutes	subject to sliding fee scale or max of \$50 per day.	H0038
PrevEducat IndFam (BH and SU)	per session	subject to sliding fee scale or max of \$50 per day.	H0025
PrevEducation-Grp (BH and SU)	per session	subject to sliding fee scale or max of \$50 per day.	H0025
Prog Elig Determ (BH and SU)	per session	subject to sliding fee scale or max of \$50 per day.	H0002
Psych Testing Eval Services	1st hour	\$120.00	96130
Psych Testing Eval Services Add on Code	each additonal hour	\$86.00	96131
Psych/NeuroPsych Testing Administration and scoring	1st 30 minutes	\$43.00	96136

Psych/NeuroPsych Testing			
Administration and scoring Add on	each additional 30		
Code	minutes	\$39.00	96137
Psyched Serv-Grp (BH and SU)	per 15 minutes,		
	minimum of 8	subject to sliding fee scale or	
	minutes	max of \$50 per day.	H2027
PsychEdServInd/fam (BH and SU)	per 15 minutes,		
	minimum of 8	subject to sliding fee scale or	
	minutes	max of \$50 per day.	H2027
Psychiatric Eval BH and SU (and			
Psychiatric Eval Review BH and SU)	per session	\$167.00	90792
Psychosocial Rehab Services Group	per 15 minutes,		
	minimum of 8	subject to sliding fee scale or	
BH	minutes	max of \$50 per day.	H2017
Psychosocial Rehab Services	per 15 minutes,		
	minimum of 8	subject to sliding fee scale or	
Ind/Fam BH	minutes	max of \$50 per day.	H2017
Psychotherapy BH LT 75 min	16 to 37 Minutes	\$57.00	90832
Psychotherapy BH LT 75 min	38 to 52 Minutes	\$75.00	90834
Psychotherapy BH LT 75 min	53 to 74 Minutes	\$110.00	90837
Psychotherapy BH 75+ min	75 + min	\$110.00	90837
Psychotherapy SU	16 to 37 Minutes	\$57.00	90832
Psychotherapy SU	38 to 52 Minutes	\$75.00	90834
Psychotherapy SU	53 to 74 Minutes	\$110.00	90837
SkillTrainDevGrp (BH and SU)	per 15 minutes,		
	minimum of 8	subject to sliding fee scale or	
	minutes	max of \$50 per day.	H2014
SkillTrainDevInd (BH and SU)	per 15 minutes,		
	minimum of 8	subject to sliding fee scale or	
	minutes	max of \$50 per day.	H2014
Supported Employment Ind BH and	per 15 minutes,		
	minimum of 8	subject to sliding fee scale or	
SU	minutes	max of \$50 per day.	H2023
Tx/Serv Planning BH and SU (also			
	per session	subject to sliding fee scale or	
Treatment Plan Review)	per 15 minutes,	max of \$50 per day.	H0032
Wrap-Around BH	minimum of 8		
	minutes, up to 4 hrs	subject to sliding fee scale or	
	and 7 minutes	max of \$50 per day.	H2021