CSB FEE SCHEDULE

MH (Mental Health) ID (Intellectual Disability) SUD (Substance Use Disorder) SA (Substance Abuse)

Service	Subject to Ability to Pay Scale	Effective Dec 1, 2014	Charges for Fees Subject to ATP Scale Based on Calculated Financial Liability Percentage					
			0%	20%	40%	60%	80%	100%
Addiction Medicine Physician Assessment	Yes	**$161 per event**	$ -	$ 32.20	$ 64.40	$ 96.60	$ 128.80	$ 161.00
Addiction Medicine Physician-Monitoring (follow up)	Yes	**$54 per event**	$ -	$ 10.80	$ 21.60	$ 32.40	$ 43.20	$ 54.00
Adolescent Day Treatment- MH	Yes	**$50 per unit**	$ -	$ 10.00	$ 20.00	$ 30.00	$ 40.00	$ 50.00
Adolescent Day Treatment - SUD	Yes	**$4.80 per 15 minutes**	$ -	$ 0.96	$ 1.92	$ 2.88	$ 3.84	$ 4.80
Adult Day Treatment - MH	Yes	**$40 per unit**	$ -	$ 8.00	$ 16.00	$ 24.00	$ 32.00	$ 40.00
Adult Day Treatment- SUD	Yes	**$4.80 per 15 minutes**	$ -	$ 0.96	$ 1.92	$ 2.88	$ 3.84	$ 4.80
A New Beginning Residential Treatment	Yes	**$238.30 per day**	$ -	$ 47.66	$ 95.32	$ 142.98	$ 190.64	$ 238.30
Case Management -ID	Yes	**$326.50 per month**	$ -	$ 65.30	$ 130.60	$ 195.90	$ 261.20	$ 326.50
Case Management -MH	Yes	**$326.50 per month**	$ -	$ 65.30	$ 130.60	$ 195.90	$ 261.20	$ 326.50
Case Management -SA	Yes	**$16.50 per 15 minutes**	$ -	$ 3.30	$ 6.60	$ 9.90	$ 13.20	$ 16.50
Contracted Residential Treatment - Intermediate Rehabilitation/Reentry Services	Yes	**$159.38 per day**	$ -	$ 31.88	$ 63.75	$ 95.63	$ 127.50	$ 159.38
Crisis Intervention	Yes	**$60 per 15 minutes**	$ -	$ 12.00	$ 24.00	$ 36.00	$ 48.00	$ 60.00
Crisis Stabilization - Adult Residential	Yes	**$89 per hour**	$ -	$ 17.80	$ 35.60	$ 53.40	$ 71.20	$ 89.00
Crossroads Adult Residential Treatment	Yes	**$186.52 per day**	$ -	$ 37.30	$ 74.61	$ 111.91	$ 149.22	$ 186.52
Crossroads Youth Residential Treatment	Yes	**$393.86 per day**	$ -	$ 78.77	$ 157.54	$ 236.32	$ 315.09	$ 393.86
Detoxification, Medical, Residential-setting	Yes	**$750 per day**	$ -	$ 150.00	$ 300.00	$ 450.00	$ 600.00	$ 750.00
Detoxification, Social, Residential-setting	Yes	**$371 per day**	$ -	$ 74.20	$ 148.40	$ 222.60	$ 296.80	$ 371.00
Family Therapy	Yes	**$80.00 per hour**	$ -	$ 16.00	$ 32.00	$ 48.00	$ 64.00	$ 80.00
Group Therapy/Counseling	Yes	**$25 per event**	$ -	$ 5.00	$ 10.00	$ 15.00	$ 20.00	$ 25.00
Individual Therapy/Counseling	Yes	**$80.00 per hour**	$ -	$ 16.00	$ 32.00	$ 48.00	$ 64.00	$ 80.00
Initial Evaluation/Assessment	Yes	**$150 per event**	$ -	$ 30.00	$ 60.00	$ 90.00	$ 120.00	$ 150.00
Injection Procedure	Yes	**$20.00**	$ -	$ 4.00	$ 8.00	$ 12.00	$ 16.00	$ 20.00
Intensive Community Treatment	Yes	**$153 per hour**	$ -	$ 30.60	$ 61.20	$ 91.80	$ 122.40	$ 153.00
Intensive Outpatient - SUD, Individual or Group	Yes	**$4.80 per 15 minutes**	$ -	$ 0.96	$ 1.92	$ 2.88	$ 3.84	$ 4.80
Late Cancellation or No Show	Yes	**$25.00**	$ -	$ 5.00	$ 10.00	$ 15.00	$ 20.00	$ 25.00
Legal Testimony	Yes	**$25 per 15 minutes**	$ -	$ 5.00	$ 10.00	$ 15.00	$ 20.00	$ 25.00
Mental Health Skill-building Service	Yes	**$91 per unit**	$ -	$ 18.20	$ 36.40	$ 54.60	$ 72.80	$ 91.00
Multi-Family Group Therapy	Yes	**$25 per event**	$ -	$ 5.00	$ 10.00	$ 15.00	$ 20.00	$ 25.00
Neurological Testing	Yes	**$1168 per event**	$ -	$ 233.60	$ 467.20	$ 700.80	$ 934.40	$ 1,168.00
New Generations Residential Treatment	Yes	**$120 per day**	$ -	$ 24.00	$ 48.00	$ 72.00	$ 96.00	$ 120.00
Nursing Assessment	Yes	**$58 per event**	$ -	$ 11.60	$ 23.20	$ 34.80	$ 46.40	$ 58.00

CSB FEE SCHEDULE

MH (Mental Health) ID (Intellectual Disability) SUD (Substance Use Disorder) SA (Substance Abuse)

Service	Subject to Ability to Pay Scale	Effective Dec 1, 2014	Charges for Fees Subject to ATP Scale Based on Calculated Financial Liability Percentage					
			0%	20%	40%	60%	80%	100%
Nursing Subsequent Care	Yes	**$29 per event**	$ -	$ 5.80	$ 11.60	$ 17.40	$ 23.20	$ 29.00
Physical Exam (Physician)	Yes	**$95 per event**	$ -	$ 19.00	$ 38.00	$ 57.00	$ 76.00	$ 95.00
Psychiatric Evaluation	Yes	**$107 per event**	$ -	$ 21.40	$ 42.80	$ 64.20	$ 85.60	$ 107.00
Psychiatric Evaluation & Management High Complexity	Yes	**$144 per event**	$ -	$ 28.80	$ 57.60	$ 86.40	$ 115.20	$ 144.00
Psychiatric Evaluation & Management Low Complexity	Yes	**$54 per event**	$ -	$ 10.80	$ 21.60	$ 32.40	$ 43.20	$ 54.00
Psychiatric Evaluation & Management Moderate Complexity	Yes	**$90 per event**	$ -	$ 18.00	$ 36.00	$ 54.00	$ 72.00	$ 90.00
Psychological Testing Battery	Yes	**$851 per event**	$ -	$ 170.20	$ 340.40	$ 510.60	$ 680.80	$ 851.00
Psychosocial Rehabilitation	Yes	**$24.38 per unit**	$ -	$ 4.88	$ 9.75	$ 14.63	$ 19.50	$ 24.38
Sojourn House Residential Treatment	Yes	**Residential=$246.22 Comb. Resid Svcs = $196.81 Total Per Day- $443.03**	$ -	$ 88.61	$ 177.21	$ 265.82	$ 354.42	$ 443.03
Urine Collection & Drug Screening- Retests Only	Yes	**$25.00**	$ -	$ 5.00	$ 10.00	$ 15.00	$ 20.00	$ 25.00