

**For Dates of Service 12/8/23 and Forward**

**UOVC Allowable Amounts and Required Documentation for Mental Health Services:**

SERVICE	PAYMENT/ALLOWABLE AMOUNT	REQUIRED DOCUMENTATION
Psychiatric Testing	Preauthorization required PEHP Allowed Rate	Mental Health Treatment Plan CMS 1500 or UB billing form Insurance EOB (if applicable)
Initial Psychiatric Evaluation	Cpt 90791/90792: PEHP Allowed Rate	Mental Health Treatment Plan CMS 1500 or UB billing form Insurance EOB (if applicable)
Outpatient Therapy Provided by a <a href="#">Qualified Mental Health Professional or Student Intern</a>	PEHP Allowed Rate  Primary victim: 25 sessions Secondary victim: 15 sessions	Mental Health Treatment Plan CMS 1500 or UB billing form Insurance EOB (if applicable)
<p>Inpatient/Residential/Day Treatment:</p> <p>Inpatient (primary victim) Residential (primary victim) Day Treatment (primary victim)</p> <p>Inpatient (<b>secondary victim ONLY when crime type is homicide</b>)</p>	<p>Based on treatment and what % UOVC determines is crime-related</p> <p>\$600 per day \$300 per day (30 days max) \$200 per day (capped at \$10,000)</p> <p>\$600 per day</p>	<p>Clinical Notes Upon Discharge CMS 1500 or UB billing form Insurance EOB (if applicable)</p>
Intensive Outpatient IOP	Based upon intensity of treatment, UOVC may pay this service using the payment guidelines for "Outpatient Therapy" or "Day Treatment"	Mental Health Treatment Plan Clinical Notes Upon Discharge CMS 1500 or UB billing form Insurance EOB (if applicable)
<p>Medication-management (primary and secondary victims) <b>ONLY</b> relating to the crime-related mental health services</p> <p>Medications (<b>ONLY</b> relating to crime-related mental health services)</p>	<p>\$62.50 per 30 minute session</p> <p>PEHP (Public Employee Health Plan) allowable rates for medications dispensed by pharmacies</p>	<p>Mental Health Treatment Plan CMS 1500 or UB billing form Insurance EOB (if applicable) Continual mental health therapy</p> <p>Mental Health Treatment Plan Prescription Receipts Insurance EOB (if applicable) Continual mental health therapy</p>

**For Dates of Service Prior to 12/8/23**

**UOVC Allowable Amounts and Required Documentation for Mental Health Services:**

SERVICE	PAYMENT/ALLOWABLE AMOUNT	REQUIRED DOCUMENTATION
Psychiatric Testing	Preauthorization required	Mental Health Treatment Plan CMS 1500 or UB billing form Insurance EOB (if applicable)
Initial Psychiatric Evaluation	Cpt 90791/90792: \$300 max	Mental Health Treatment Plan CMS 1500 or UB billing form Insurance EOB (if applicable)
Outpatient Therapy: Licensed masters level therapist Licensed psychologist Licensed psychiatrist	\$70 allowable per clinical hour \$90 allowable per clinical hour \$130 allowable per clinical hour  Primary victim: 25 sessions or \$2500, whichever comes first  Secondary victim: 15 sessions or \$1250, whichever comes first	Mental Health Treatment Plan CMS 1500 or UB billing form Insurance EOB (if applicable)
Inpatient/Residential/Day Treatment:  Inpatient (primary victim) Residential (primary victim) Day Treatment (primary victim)  Inpatient ( <b>secondary victim ONLY when crime type is homicide</b> )	Based on treatment and what % UOVC determines is crime-related  \$600 per day \$300 per day (30 days max) \$200 per day (capped at \$10,000)  \$600 per day	Clinical Notes Upon Discharge CMS 1500 or UB billing form Insurance EOB (if applicable)
Intensive Outpatient IOP	Based upon intensity of treatment, UOVC may pay this service using the payment guidelines for "Outpatient Therapy" or "Day Treatment"	Mental Health Treatment Plan Clinical Notes Upon Discharge CMS 1500 or UB billing form Insurance EOB (if applicable)
Medication-management (primary and secondary victims) ONLY relating to the crime-related mental health services  Medications (ONLY relating to crime-related mental health services)	\$62.50 per 30 minute session  PEHP (Public Employee Health Plan) allowable rates for medications dispensed by pharmacies	Mental Health Treatment Plan CMS 1500 or UB billing form Insurance EOB (if applicable) Continual mental health therapy  Mental Health Treatment Plan Prescription Receipts Insurance EOB (if applicable) Continual mental health therapy