



**CMS/EARLY STEPS PROGRAM
REIMBURSEMENT SCHEDULE
WEST CENTRAL AREA
Effective January, 2010**

CODE	CPT CODE	DESCRIPTION	REIMB RATE	BILLING UNIT
		EVALUATIONS		
COIFF	COIFF	IFSP-Professional (Face to Face)	\$50.00/hr	15-min (.25)
COIFP	COIFP	IFSP-Professional (Phone)	\$25.00/hr	15-min (.25)
IPDEI*	T1024GNUK	Eligibility, Assessment, IFSP by ST	\$75.00/hr	30min (.5)2hrmax
IPDEI*	T1024GOUK	Eligibility, Assessment, IFSP by OT	\$75.00/hr	30min (.5)2hrmax
IPDEI*	T1024GPUK	Eligibility, Assessment, IFSP by PT	\$75.00/hr	30min (.5)2hrmax
IPDEI*	T1024HNUK	Eligibility, Assessment, IFSP by ITDS	\$55.50/hr	30min (.5)2hrmax
IPDEI*	T1024TL	Eligibility, Assessment, IFSP by Licensed EI Prof	\$75.00/hr	30min (.5)2hrmax
IPDEF	T1024GNTS	F/U Eligibility, Assessment, IFSP by ST	\$75.00/hr	30min (.5)2hrmax
IPDEF	T1024GOTS	F/U Eligibility, Assessment, IFSP by OT	\$75.00/hr	30min (.5)2hrmax
IPDEF	T1024GPTS	F/U Eligibility, Assessment, IFSP by PT	\$75.00/hr	30min (.5)2hrmax
IPDEF	T1024TLTS	F/U Eligibility, Assessment, IFSP by Licensed EI Prof	\$75.00/hr	30min (.5)2hrmax
IPDEF	T1024TS	F/U Eligibility, Assessment, IFSP by ITDS	\$55.50/hr	30min (.5)2hrmax
OCTH	97003	Occupational Therapy Evaluation (Initial)	\$48.50	Event
OCTF	97004	Occupational Therapy Evaluation (Follow-up)	\$48.50	Event
PSTH	97001	Physical Therapy Evaluation (Initial)	\$48.50	Event
PSTF	97002	Physical Therapy Evaluation (Follow-up)	\$48.50	Event
SPCH	92506	Speech/Language Evaluation (Initial, Re-Eval and Periodic)	\$48.50	Event
EXIT	EXIT	BDI-2 Assessment -Outcome Study only	\$50.00/hr	30 min (.5) 2hrmax
		THERAPY		
OCCT	97530	Occupational Therapy	\$67.88/hr	15-min (.25)
OCCT	97530HM	OT Assistant	\$54.32/hr	15-min (.25)
PHY	97110	Physical Therapy	\$67.88/hr	15-min (.25)
PHY	97110HM	PT Assistant	\$54.32/hr	15-min (.25)
SPL	92507	Speech Therapy - individual	\$67.88/hr	15-min (.25)
		CONSULTATION		
CONIF CONIP	CONIF CONIP	ITDS/EI CONIF (Face to Face) CONIP (phone)	\$50.00/hr \$25.00/hr	15-mins. (.25)
CONOF CONOP	CONOF CONOP	Occupational Therapist CONOF (Face to Face) CONOP (Phone)	\$50.00/hr \$25.00/hr	15-mins. (.25)
CONPF CONPP	CONPF CONPP	Physical Therapist CONPF (Face to Face) CONPP (Phone)	\$50.00/hr \$25.00/hr	15-mins. (.25)
CONSF CONSP	CONSF CONSP	Speech/Language CONSF (Face to Face) CONSP (Phone)	\$50.00/hr \$25.00/hr	15-mins. (.25)
		EARLY INTERVENTION SERVICES		
EIIF	T1027SC	EI Individual Session-Professional in natural environment (Max 1 hour per event/child)	\$50.00/hr	15-min (.25)
		TRANSPORTATION		
TRAV	TRAV	Early Intervention Transportation (Max 60 minutes per event/child)	\$0.50	Per minute
		INTERPRETION		
INTR	INTR	Interpreter	\$50.00/hr	

*Possible CPT codes to bill IPDEI to Private Insurance: 96110 – developmental testing limited, 96111-developmental testing extended, 96116 – neurobehavior exam.