Office of Child Development

State Established Maximum Fee Schedule for State & County Funded Early Intervention Services

Name of Service	Previous Procedure Code	HIPAA Code	Informational Modifier	Place of Service	Maximum Unit Fee	
Social Work	W0415	T1027	TL, HX, AJ	11	$20.72	1 unit of service equals 15 min. Location/ Place of service
	W1796	T1027	TL, HX, AJ	12/99	$27.48	
	W0415	T1027	TL, HX	11	$20.72	
	W1796	T1027	TL, HX	12/99	$27.48	
Audiology	W0416	V5008	TL, HX	11	$32.10	
	W1797	V5008	TL, HX	12/99	$39.35	
	W0416	V5299	TL, HX	11	$32.10	
	W1797	V5299	TL, HX	12/99	$39.35	
Nursing/Health Services	W0418	T1001	TL, HX	11	$20.14	
	W1798	T1001	TL, HX	12/99	$26.90	
	W0419	G0154	TL, HX	11	$20.14	
	W1799	G0154	TL, HX	12/99	$26.90	
Nutrition Services	W0420	S9470	TL, HX, TD	11	$20.14	
	W1800	S9470	TL, HX, TD	12/99	$26.90	
	W0420	S9470	TL, HX	11	$20.14	
	W1800	S9470	TL, HX	12/99	$26.90	
Occupational Therapy	W0421	97003	TL, HX	11	$23.64	
	W1801	97003	TL, HX	12/99	$30.53	
	W0421	97004	TL, HX	11	$23.64	
	W1801	97004	TL, HX	12/99	$30.53	
	W0421	97530	TL, HX	11	$23.64	
	W1801	97530	TL, HX	12/99	$30.53	
Physical Therapy	W0422	97001	TL, HX	11	$23.64	
	W1802	97001	TL, HX	12/99	$30.53	
	W0422	97002	TL, HX	11	$23.64	
	W1802	97002	TL, HX	12/99	$30.53	
	W0422	97110	TL, HX	11	$23.65	
	W1802	97110	TL, HX	12/99	$30.53	
Psychological Services	W0423	96150	TL, HX	11	$20.72	
	W1803	96150	TL, HX	12/99	$27.48	
	WO423	96152	TL, HX	11	$20.72	
	W1803	96152	TL, HX	12/99	$27.48	
Speech Pathology	W0424	92506	TL, HX	11	$23.64	
	W1804	92506	TL, HX	12/99	$30.53	
	W0424	92507	TL, HX	11	$23.64	
	W1804	92507	TL, HX	12/99	$30.53	
Service Coordination	Z9812	T1016	TL, HX	11/12/21/99	$18.57	
Special Instruction	W1805	S5110	TL, HX	11	$20.14	
	W1806	S5110	TL, HX	12/21/99	$26.90	

11 = Office or Center
12 = Child's Home
99 = Community
21 = Inpatient Hospital

TL = Early Intevention Services
HX = Funded by State/County
AJ = Social Work Assessment & Evaluation
TD = Nutrition Assessment

Office of Child Development

State Established Maximum Fee Schedule for State & County Funded Early Intervention Services

Procedure Code Descriptors:

T1027-Family Training and Counseling for Child Development(Social Work)
V5299-Hearing Service(Audiology)
V5008-Hearing Screening(Audiology)
G0154-Services of a Skilled Nurse in a Home Health Setting
T1001-Nursing Assessment/Evaluation
S9470- Nutritional Counseling
97530- Occupational Therapy Therapeutic Activities
97003- Occuapational Therapy Evaluation
97004- Occupational Therapy Re-Evaluation
97110-Physical Therapy Therapeutic Procedure
97001-Physical Therapy Evaluation
97002- Physical Therapy Re-Evaluation
96152-Health and Behavior Intervention
96150-Health/Behavior Assessment
92507-Treatment of Speech, Language, Voice, Communication
92506-Speech Evaluation
T1016-Case Management(Service Coordination)
S5110 = Home care training(Special Instruction)

Office of Child Development

State Established Maximum Fee Schedule for State & County Funded Early Intervention Services

Name of Service	Previous Procedure Code	HIPAA Code	New Informational Modifier	Maximum Unit Fee
Assistive Technology	ASSIS	W7295	TL,HX	Rate is County MH/MR Program Specific
Transportation (Child)	TRANS	W7296	TL,HX	Rate is County MH/MR Program Specific
Vision	VISIO	W7297	TL,HX	Rate is County MH/MR Program Specific
Medical Services-Diagnosis Only	MEDSV	W7298	TL,HX	Rate is County MH/MR Program Specific
Collateral	COLLA	W7338	TL,HX	Rate is County MH/MR Program Specific

1 Unit of Service = 15 minutes