

# Columbia Community Mental Health - Fee Schedule - Effective 12/01/2025

			FULL RATES	Sliding Fee Scale Reduced Rates				
Provider	Service	Codes	100%	\$40 Per Week	\$30 Per Week	\$20 Per Week	\$10 Per Week	\$5 Per Week
Master's-Level Mental Health Clinician/ Qualified Mental Health Professional	OP MH Assessment	90791 service	\$575	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
		H0031 service	\$575	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
	Individual Counseling/Therapy	90832 16-38 min	\$235	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
		90834 38-53 min	\$310	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
		90837 53+ min	\$465	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
		H0004 15 min	\$85	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
	Family Therapy <b>without</b> Client Present	90846 service	\$345	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
	Family therapy <b>with</b> client present	90847 service	\$360	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
	Group Multi Family	90849 group	\$125	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
	Group	90853 group	\$90	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
	Case Management	T1016 15 min	\$65	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
Alcohol and Drug Counselor	OP AD Assessment	90791 service	\$575	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
		H0001 service	\$575	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
	Individual Counseling/Therapy	90832 16-38 min	\$235	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
		90834 38-53 min	\$310	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
		90837 53+ min	\$465	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
	Urinalysis	Through an outside lab						
	Group Multi Family	90849 group	\$125	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
	Group	90853 group	\$90	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
		H0005 group	\$90	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
	Case Management	H0006 15 min	\$60	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
Doctor and Psychiatric Nurse Practitioner	Assessment	90792 service	\$575	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
	Case Consultation	90887 service	\$270	\$40.00	\$30.00	\$20.00	\$10.00	\$5.00
	Medication Management - per week			E/M Services				
				Level 5	Level 4	Level 3	Level 2	Level 1
				99215	99214	99213	99212	99211
		Full Rate	\$575	\$375	\$255	\$155	\$155	
		\$40 Per Week	\$40.00	\$40.00	\$40.00	\$40.00	\$40.00	
		\$30 Per Week	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	
		\$20 Per Week	\$20.00	\$20.00	\$20.00	\$20.00	\$20.00	
		\$10 Per Week	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00	
		\$5 Per Week	\$5.00	\$5.00	\$5.00	\$5.00	\$5.00	

\*Effective 12/01/2025

\*\*Week = any continues 7 days