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| **Description - Treatment** | **Rate** |
| Acute Inpatient Hospitalization | $1017.00 per day |
| Community Treatment Aid (CTA) | $65.00 per hour; 20 hours |
| Co-Occurring Evaluation (CO) | $448.00 per evaluation |
| Functional Family Therapy (FFT) | $145.00 per hour with client  $139.00 per hour without client |
| Juvenile Competency | $1200.00 per evaluation, court order required |
| Juveniles Who Sexually Harm (JSH) Risk Evaluation | $1009.00 per evaluation (IDI and risk assessment) Voucher will issue at $1009.00. If psychological testing is requested, must submit Evaluation Billing Worksheet. If approved, voucher will be adjusted upon payment.  96130 $251.00 96131 $139.00  96136 $139.00 96137 $64.00 |
| Juveniles Who Sexually Harm (JSH) Day Treatment | $57.00 per hour |
| Juveniles Who Sexually Harm (JSH)  Intensive Outpatient Counseling (IOP) | $180.00 per day of service |
| Juveniles Who Sexually Harm (JSH) Outpatient Counseling | $159.00 per session **Individual**  $156.00 per session **Family**  $97.00 per **Group** |
| Juveniles Who Sexually Harm (JSH) Therapeutic Group Home (ThGH) | **Therapy/Room and Board** $513.00 per day; 30 days **Room**  **and Board only** $199.00 per day; 30 days  (insurance/Medicaid paying for therapeutic service). *Probation does not pay for the date of discharge for 24-hour services. All dates are included in the report, however, only NIGHTS spent in the facility are billable.* |
| Medication Management | $92.00 per session |
| Mental Health (MH) Day Treatment | $57.00 per hour |
| Mental Health (MH)  Intensive Outpatient Counseling (IOP) | $156.00 per session **Individual**  $156.00 per session **Family** $39.00 per hour **Group** |
| Mental Health (MH)  Outpatient Counseling | $156.00 per session **Individual**  $156.00 per session **Family**  $55.00 per **Group** |
| Mental Health (MH)  Therapeutic Group Home (ThGH) | **Therapy/Room and Board** $355.00 per day; 30 days **Room and Board only** $117.00 per day; 30 days  (insurance/Medicaid paying for therapeutic service). *Probation does not pay for the date of discharge for 24-hour services. All dates are included in the report, however, only NIGHTS spent in the facility are billable.* |
| Mul-systemic Therapy (MST) | $51.00 per 15-minute unit |

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| Paral Hospitalization | $62.00 per hour |
| Professional Resource Family Care (PRFC) | **Therapy/Room and Board** $142.00 per day; 30 days  **Room and Board only** $70.00 per day; 30 days  (insurance/Medicaid paying for therapeutic service). *Probation does not pay for the date of discharge for 24-hour services. All dates are included in the report, however, only NIGHTS spent in the facility are billable.* |
| Psychiatric Evaluation | $424.00 per evaluation; $522.00 per evaluation if detained and conducted at the facility. |
| Psychiatric Interview | $169.00 per psychiatric interview only (conducted  subsequent to an evaluation which included a social history); $264.00 per psychiatric interview only if detained and conducted at the facility. |
| Psychiatric Residential Treatment Facility (PRTF) Hospital-Based | $579.00 per day; 30 days  *Probation does not pay for the date of discharge for 24-hour services. All dates are included in the report, however, only NIGHTS spent in the facility are billable.* |
| Psychiatric Residential Treatment Facility (PRTF) Specialty-Based | $458.00 per day; 30 days  *Probation does not pay for the date of discharge for 24-hour services. All dates are included in the report, however, only NIGHTS spent in the facility are billable.* |
| Substance Use (SU)  Outpatient Counseling | $156.00 per session **Individual**  $156.00 per session **Family**  $55.00 per **Group** |
| Substance Use (SU)  Therapeutic Group Home (ThGH) | **Therapy/Room and Board** $355.00 per day; 30 days **Room and**  **Board only** $117.00 per day; 30 days  (insurance/Medicaid paying for therapeutic service). *Probation does not pay for the date of discharge for 24-hour services. All dates are included in the report, however, only NIGHTS spent in the facility are billable.* |
| Psychological Evaluation | $204.00 per evaluation (Initial Diagnostic Interview) Voucher will issue at $204.00. If psychological testing is requested, must submit Evaluation Billing Worksheet. If approved, voucher will be adjusted upon payment.  96130 $251.00 96131 $139.00  96136 $139.00 96137 $64.00 |
| Substance Use Evaluation (SU) | $278.00 per evaluation |
| Substance Use Addendum (SU) | $113.00 per addendum |
| Substance Use (SU) Paral Care | $94.00 per hour |
| Substance Use (SU)  Intensive Outpatient Counseling (IOP) | $156.00 per session **Individual**  $156.00 per session **Family**  $39.00 per hour **Group** |

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| **Description – Non-Treatment** | **Rate** |
| Case Managed Tutoring | $58.00 per hour; 32 hours |
| Community Youth Coach | $22.00 per 15-minute (urban) base rate  $3.00 per 15-minute rural differential  $9.00 per 15-minute frontier differential |
| Day / Evening Reporting | **Day Reporting** $184.00 per day; 30 days  **Evening Reporting** $184.00 per day; 30 days |
| In Home Family Services (Boys Town Model) (IHFS) | $106.00 per hour (urban) base rate  $11.00 per hour rural differential  $39.00 per hour frontier differential |
| Expedited Family Group Conferencing | $2,175.00 per conference; 1 conference |
| Family Partner | $66.00 per hour; 20 hours |
| Family Support | $68.00 per hour; 25 hours |
| General Education Class | $13.00 per hour; 15 hours |
| Intensive Family Preservation (IFP) | $554.00 per week per case; 28 days |
| Justice Wraparound Program | $540.00 for 0-15 days  $995.00 for 28 days  $1029.00 for 29 days  $1065.00 for 30 days $1100.00 for 31 days |
| Mediation | $192.00 per hour; 5 hours |
| Transportation | $3.00 per mile ($23.00 minimum reimbursed per loaded oneway trip). $11.00 per hour for escort (defined as the me a transportation staff must wait with a secure/non-secure transported juvenile for an appointment or when an additional driver is needed to ensure safety, as authorized by the court). $3.00 per mile and a $41.00 base rate for wheelchair-required transportation. Meals for transported juveniles can be billed with prior approval for payment from probation at the GSA approved rate. |

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| **Description – Out-Of-Home Placement** | **Rate** |
| Agency Based Foster Care | $102.74 per day ($52.18 must go directly to the family); 30 days |
| Professional Foster Care | $211.36 per day ($108.77 must go directly to the family): 30 days |
| Crisis Stabilization | $306.00 per day; 30 days  *Probation does not pay for the date of discharge for 24hour services. All dates are included in the report, however, only NIGHTS spent in the facility are billable.* |

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| Group Home A | $176.00 per day; 30 days  *Probation does not pay for the date of discharge for 24hour services. All dates are included in the report, however, only NIGHTS spent in the facility are billable.* |
| Group Home B | $132.00 per day; 30 days  *Probation does not pay for the date of discharge for 24hour services. All dates are included in the report, however, only NIGHTS spent in the facility are billable.* |
| Independent Living | $136.00 per day; 30 days |
| Relative/Kinship Foster Care Assessment | $256.00 per evaluation |
| Shelter Care | $274.00 per day; 30 days  *Probation does not pay for the date of discharge for 24hour services. All dates are included in the report, however, only NIGHTS spent in the facility are billable.* |
| RESTORE  Specialized Restorative Residential Program | $352.00/day |

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| **Description – Additional Probation**  **District Services** | **Rate** |
| Continuous Alcohol Monitoring (CAM) | As ordered by the court. Landline $17.00 per day  Ether Cable $18.00 per day  Cellular $18.00 per day |
| Electronic Monitoring (EM) | Average of 4-6 weeks or as ordered by the court.  Land Line Non-GPS $16.00 per day  Cellular: $19.00 per day  GPS: $26.00 per day |

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