

- The list below contains the codes most commonly used by MHRS's and MHW's. It is not a definitive list of codes available for these classifications to use. For more codes, detailed descriptions, and information on code usage, refer to the current Approved Yolo County SMHS Codes.
- All codes beginning with letters H or T bill in 15-minute units and multiple units are allowed. Minimum billing time is 8 minutes.

| Code | Description | Guidance | |
|--|--|--|--|
| ASSESSMENT | | | |
| H2000MH | Comprehensive Multidisciplinary Evaluation | | |
| H0031MH | Mental Health Assessment by a Non-Physician | | |
| T1001MH | Nursing Assessment/Evaluation | | |
| 96127MH | Brief Emotional/Behavioral Assessment | RN Only Using standardized assessment tool Billing limited to one 15-minute unit | |
| 96110MH | Developmental Screening | RN Only Using standardized screening tool Billing limited to one 15-minute unit | |
| CRISIS INTERVENTION SERVICES | | | |
| H2011MH | Crisis Intervention Services | | |
| MEDICATION SUPPORT SERVICES | | | |
| H0034MH | Medication Training and Support | | |
| H0034MHGRP | Group Medication Training and Support | | |
| H0033MH | Oral and Injectable Medication Administration, Direct Observation | | |
| 96372MH | Therapeutic, Prophylactic, or Diagnostic Injection; Subcutaneous or Intramuscular | RN OnlyBilling limited to one 15-minute unit | |
| INTENSIVE CARE COORDINATION (ICC) AND INTENSIVE HOME-BASED SERVICES (IHBS) | | | |
| T1017MHICC | ICC Case Management | • RN Only | |

| H2017MHIHB | IHBS Rehabilitation | RN Only | |
|------------------|--|--|--|
| PLAN DEVELOPMENT | | | |
| 99366MH | Medical Team Conference with Interdisciplinary Team, Participation by Non- Physician, Face-to-Face with Patient and/or Family | RN Only Minimum 30 minutes required to bill | |
| 99368MH | Medical Team Conference with Interdisciplinary Team, Participation by Non- Physician, Patient or Family Not Present | RN Only Minimum 30 minutes required to bill | |
| 99484MH | Care Management Service for Behavioral Health Conditions, Directed by Physician | Minimum 20 minutes required to bill | |
| H0032MH | Mental Health Service Plan Developed by Non-Physician | | |
| CASE MANAGEMENT | | | |
| T1017MH | Targeted Case Management | • RN Only | |
| REHABILITATION | | | |
| H2017MH | Psychosocial Rehabilitation | • RN Only | |
| H2017MHGRP | Group Psychosocial Rehabilitation | RN Only | |
| ADD-ON CODES | | | |
| 90785MH | Interactive Complexity | | |
| T1013MH | Sign Language or Oral Interpretive Services | | |