

<b>Service Description</b>	<b>CPT CODE</b>	<b>Revenue Code</b>	<b>Procedure Type</b>
Administrative Necessary Day Psych	129	129	Day
Administrative Necessary Day EDS	129	129	Day
WBC Boarder RESI	BOARD	BOAR	Day
WBC Subsequent Hospital Care,per day, E&M (problem focused) ;at least 15 minutes	99231	NULL	Flat
WBC Subsequent Hospital Care,per day, E&M (expanded problem), at least 25 minutes	99232	NULL	Flat
WBC Subsequent Hospital Care, per day, E&M (detailed), at least 35 minutes	99233	NULL	Flat
WBC Hospital Discharge Day Management; 30 minutes or less	99238	NULL	Flat
WBC Hospital Discharge Day Management; more than 30 minutes	99239	NULL	Flat
WBC Hospital Psychiatric Diagnostic Evaluation with Medical Services	90792	NULL	Flat
WBC Hospital Psychiatric Diagnostic Evaluation	90791	NULL	Flat
WBC Adolescent Inpatient EDS	124	124	Day
WBC Adult Inpatient EDS	124	124	Day
WBC Adolescent Inpatient Psych	124	124	Day
WBC Adult Inpatient Psych	124	124	Day
WBC Adolescent Residential Treatment	1001	1001	Day
WBC Adult Residential Treatment	H0017	1001	Day
WBC GA Adult Residential Treatment	1001	1001	Day

<b>Standard Rate</b>
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\$1,200.00
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\$1,400.00
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\$250.00
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\$80.00
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\$150.00
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\$175.00
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\$150.00
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\$175.00
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\$250.00
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\$200.00
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\$2,400.00
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\$2,400.00
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\$2,000.00
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\$2,000.00
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\$2,000.00
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\$2,000.00
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\$2,000.00
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