

ALASKA HEALTH

AKBH Charges

CPT CODE	SERVICE DESCRIPTION	RATE
90792	Psychiatric Evaluation w/ Medical Services	\$695.00
99202	New Patient, Evaluation & Management, Focused	\$250.00
99203	New Patient, Evaluation & Management, Detailed	\$375.00
99204	New Patient, Evaluation & Management, Comprehensive/Mod Complexity	\$550.00
99205	New Patient, Evaluation & Management, Comprehensive/High Complexity	\$735.00
99211	Established Patient, Evaluation & Management	\$75.00
99212	Established Patient, Evaluation & Management, Focused	\$185.00
99213	Established Patient, Evaluation & Management, Detailed	\$295.00
99214	Established Patient, Evaluation & Management, Comprehensive/Mod Complexity	\$470.00
99215	Established Patient, Evaluation & Management, Comprehensive/High Complexity	\$600.00
96372	Injection	\$120.00
96127	Brief Emotional/Behavioral Assessment	\$30.00
36415	Venipuncture w/ Blood Collection	\$35.00
H0031	Mental Health Intake Assessment	\$550.00
90832	Individual Psychotherapy 30 min	\$150.00
90834	Individual Psychotherapy 45 min	\$200.00
90837	Individual Psychotherapy 60 min	\$250.00
90846	Family Psychotherapy w/o Patient, Per Hour	\$225.00
90847	Family Psychotherapy w/ Patient, Per Hour	\$260.00
90849	Multiple-Family Group Psychotherapy, Per Hour	\$150.00
90853	Group Psychotherapy, Per Hour	\$175.00
90839	Crisis Intervention, Per Hour	\$305.00
H2011	Short-Term Crisis Stabilization Services, Per 15 Minute Unit	\$60.00
H2019	Therapeutic Behavioral Health Services- Individual, Per 15 Minute Unit	\$50.00
T1016	Case Management, Per 15 Minute Unit	\$60.00
S9480	Intensive Outpatient Program (IOP), Per Day	\$875.00
H0035	Partial Hospitalization Program (PHP), Per Day	\$1,045.00

Charges are subject to change without notice. The list above does not include all services provided by AKBH. For questions on sliding fee scales or to obtain a full list of rates, please call (907) 563-1000.

Note: Sliding scale adjustments will not be applied towards services billable to Medicaid, Medicare or Private Insurance.