

Registered Service Provider Rates for Juvenile Services

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). <i>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.</i>

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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). <i>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.</i>
Multi-systemic Therapy (MST)	\$51.00 per 15-minute unit
Partial 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). <i>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.</i>
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.

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Psychiatric Residential Treatment (PRTF) Hospital-Based Facility	\$579.00 per day; 30 days <i>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.</i>
Psychiatric Residential Treatment (PRTF) Specialty-Based	\$458.00 per day; 30 days <i>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.</i>
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). <i>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.</i>
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) Partial 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 <i>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.</i>
Group Home A	\$176.00 per day; 30 days <i>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.</i>
Group Home B	\$132.00 per day; 30 days <i>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.</i>
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 <i>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.</i>
RESTORE Specialized Restorative Residential Program	\$352.00/day

Registered Service Provider Rates for Juvenile Services

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