

Suggested CM Description	Rev Code	HCPS	Outpatie	Outpatient Charge	Quantity	Inpatient Gross Charges	DISCOUN	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM
Inpatient Psych Adult		124				2000	1271	740	1271
Inpatient Psych Juvenile		124				2000	1271	740	1271
Inpatient Psych Child		124				2000	1271	740	1271
Inpatient Detox Adult		126				2000	1271	740	1271
Inpatient Detox Juvenile		126				2000	1271	740	1271
Inpatient Rehab Adult		128				2000	1249	740	1249
Inpatient Rehab Juvenile		128				2000	1249	740	1249
Inpatient Psych Geriatric		124				2000	1271	740	1271
Inpatient Detox Geriatric		126				2000	988	740	988
Inpatient Rehab Geriatric		128				2000	1249	740	1249
GROUP PSYCHOTHERAPY - IOP		915	G0410	480	1 per visit		462	210	462
GROUP PSYCHOTHERAPY - PHP		915	G0410	540	1 per visit		600	420	600
Inclusive Physician IP	NOT PROVIDED BY HOSPITAL (MAY BE BILLED SEPARATELY)							MAY BE BILLED SEPARATELY	MAY BE BILLED SEPARATELY
Inclusive H & P IP	NOT PROVIDED BY HOSPITAL (MAY BE BILLED SEPARATELY)							MAY BE BILLED SEPARATELY	MAY BE BILLED SEPARATELY
Inclusive Physician OP	NOT PROVIDED BY HOSPITAL (MAY BE BILLED SEPARATELY)							MAY BE BILLED SEPARATELY	MAY BE BILLED SEPARATELY
Inclusive H & P OP	NOT PROVIDED BY HOSPITAL (MAY BE BILLED SEPARATELY)							MAY BE BILLED SEPARATELY	MAY BE BILLED SEPARATELY