Routine Behavorial Health payments shift from RCC to procedure code and the BH Clinic fee schedule

RCC	Description	Current Allowed ¹		Projected Allowed ²	% Change	Current % of Total	Future % of Total
900	BH/GEN CLASS	\$ 857,400	\$	884,601	103%	19%	18%
914	BH/INDIV THERAPY	\$ 1,653,850	\$	1,589,530	96%	36%	32%
915	BH/GROUP THERAPY	\$ 557,669	\$	399,374	72%	12%	8%
916	BH/FAMILY THERAPY	\$ 121,989	\$	121,277	99%	3%	2%
918	BH/TESTING	\$ 304,899	\$	214,105	70%	7%	4%
919	BH/OTHER	\$ 978,311	\$	1,584,241	162%	21%	32%
	ECC Payments	\$ 153,368	\$	213,749	139%	3%	4%
Subtotal	Routine	\$ 4,627,486	\$	5,006,877	108%	100%	100%
Subtotal	Routine	\$ 4,627,486	\$	5,006,877	108%	27%	29%
Subtotal	Intermediate	\$ 12,494,419	\$	12,494,419	100%	73%	71%
BH Total		\$ 17,121,906	\$	17,501,297	102%	100%	100%

¹Current Allowed is the Fiscal Impact Model (FIM) allowed amount adjusted for policy changes.

² Projected Allowed for: RCCs 900,914,915,916,918 and 919 is based on the Clinic - Behavioral Health fee schedule in effect on 11/1/2015.

RCC 901 is the Fiscal Impact Model (FIM) allowed amount after policy adjustments. Does not include prof component. RCCs 761,562,907,905,906 and 913 is equal to the current allowed.