

**Montana Medicaid - Fee Schedule**  
**Targeted Case Management**  
**Proposed July 1, 2016**

**Definitions:**

**Modifier** – When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination.

**Description** – Procedure code description. You must refer to the appropriate official CPT-4 or HCPCS coding manual for complete definitions in order to assure correct coding.

**Effective** – This is the first date of service for which the listed fee is applicable.

**Method** – Source of fee determination  
**Fee Sched:** Medicaid fee for listed code

**Note: Not all codes are billable by all providers. Refer to description to determine appropriate code to bill.**

Fees as of July 1, 2016

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<b>Proc</b>	<b>Modifier</b>	<b>Code Description</b>	<b>For use by</b>	<b>Effective</b>	<b>Method</b>	<b>Fee</b>
T1016	HD	Targeted Case Management, each 15 minutes	TCM For High Risk Pregnant Women - Services Provided by the Social Worker	7/1/2016	FEE SCHED	\$6.77
T1016	HD	Targeted Case Management, each 15 minutes	TCM For High Risk Pregnant Women - Services Provided by the Nurse	7/1/2016	FEE SCHED	\$6.77
T1016	HD	Targeted Case Management, each 15 minutes	TCM For High Risk Pregnant Women - Services Provided by the Nutritionist	7/1/2016	FEE SCHED	\$6.77
T1016		Targeted Case Management, each 15 minutes	TCM For Children and Youth with Special Health Care Needs	7/1/2016	FEE SCHED	\$11.09

Fees as of July 1, 2016