

## Early Intensive Developmental and Behavioral Intervention (EIDBI) billing grid

**Provider type code:** The **provider type code (EI)** applies to all EIDBI services and may be used for both practice types: **Group (06)** and **Individual (01)**. Service codes 97151 and T1024 that are billable by the Comprehensive Multi-Disciplinary Evaluation (CMDE) provider may be billed using provider type **EI, 34, or 01**.

**Category of service (COS) and Minnesota service grouping (MSG) = 048: Early Intensive Developmental and Behavioral Intervention (EIDBI)** on the EIDBI provider enrollment record.

**Billing instructions:** A unit may be billed only when the time spent providing the service meets or exceeds the midpoint of the unit. Do not bill if the time spent with the person is **less than half of the unit time** of the code. For example, for **15-minute codes**, do not bill if the total face-to-face time is **less than eight minutes**. Encounter codes are billed **one time per day per provider per member**.

**Billing code limits:** Daily limits represent the **maximum amount that may be billed in a single day**, not a required amount, and services must be provided and billed **only to the extent that they are medically necessary**.

Comprehensive Multi-Disciplinary Evaluations (CMDEs) must be provided by Minnesota Health Care Programs-enrolled CMDE providers. CMDE providers are not required to be affiliated with an EIDBI agency. CMDEs do not require a qualified supervising professional (QSP) be listed on claims as a supervising professional, as the CMDE provider is the licensed professional.

The QSP must be on all other EIDBI claims as the supervising professional.

The following EIDBI services may be billed without the member present:

- Comprehensive Multi-Disciplinary Evaluation (CMDE)
- Individualized Treatment Plan (ITP)
- Family/Caregiver Training and Counseling
- Coordinated Care Conference
- Travel time

**Telehealth services:** The asterisks (\*) in the EIDBI Service Name column indicate which services may be billed via telehealth. Review the [EIDBI Benefit](#) section of the Minnesota Health Care Programs Provider Manual for additional information.

**UB** = EIDBI modifier. All services must be authorized, except as indicated in the Service Agreement Needed column. All service limits apply to the member receiving services.

### Provider Specialty Code – Description

- **DE** – Level 1 EIDBI provider
- **QD** – CMDE Provider
- **QS** – Qualified Supervisor
- **QP** – Qualified Supervising Professional
- **DF** – Level 2 EIDBI provider
- **DG** – Level 3 EIDBI provider

EIDBI Service Name	Professional or Provider Level	Procedure Code	Modifier	Reimbursement Percentage Rate	Service Agreement Needed (Yes/No)	Unit	Person or Service Limits
*Comprehensive Multi-Disciplinary Evaluation (CMDE): Behavior identification assessment	CMDE provider	97151	UB	100%	No	1 = 15 min.	One CMDE allowed per calendar year without a service agreement (maximum of 80 units per calendar year). Multiple providers may bill at the same time. Limit of 8 hours per day.
*Comprehensive Multi-Disciplinary Evaluation (CMDE): Behavior identification assessment	CMDE clinical trainee	97151	UB	100% (Billed at rate of supervisor)	No	1 = 15 min.	One CMDE allowed per calendar year without a service agreement (maximum of 80 units per calendar year). Multiple providers may bill at the same time. Limit of 8 hours per day.
*Individual Treatment Plan (ITP) Development and Monitoring	Qualified Supervising Professional (QSP)	H0032	UB	100%	No	1 = per encounter	May be billed as clinically necessary. Multiple providers may bill at the same time.
*Individual Treatment Plan (ITP) Development and Monitoring	Level I provider	H0032	UB	100%	No	1 = per encounter	May be billed as clinically necessary. Multiple providers may bill at the same time.
*Individual Treatment Plan (ITP) Development and Monitoring	Level II provider	H0032	UB	80%	No	1 = per encounter	May be billed as clinically necessary. Multiple providers may bill at the same time.
*Coordinated Care Conference: Medical Team Conference	CMDE provider	T1024	UB	100%	No	1 = per encounter	May be billed as clinically necessary. Multiple providers may bill at the same time.
*Coordinated Care Conference: Medical Team Conference	CMDE clinical trainee	T1024	UB	100% (Billed at rate of supervisor)	No	1 = per encounter	May be billed as clinically necessary. Multiple providers may bill at the same time.
*Coordinated Care Conference: Medical Team Conference	Qualified Supervising Professional (QSP)	T1024	UB	100%	No	1 = per encounter	May be billed as clinically necessary. Multiple providers may bill at the same time.
*Coordinated Care Conference: Medical Team Conference	Level I provider	T1024	UB	100%	No	1 = per encounter	May be billed as clinically necessary. Multiple providers may bill at the same time.

EIDBI Service Name	Professional or Provider Level	Procedure Code	Modifier	Reimbursement Percentage Rate	Service Agreement Needed (Yes/No)	Unit	Person or Service Limits
*Coordinated Care Conference: Medical Team Conference	Level II provider	T1024	UB	100%	No	1 = per encounter	May be billed as clinically necessary. Multiple providers may bill at the same time.
*Intervention – Individual: Adaptive behavior treatment by protocol	Qualified Supervising Professional (QSP)	97153	UB	100%	Yes	1 = 15 min.	Limit of 8 hours per day.
*Intervention – Individual: Adaptive behavior treatment by protocol	Level I provider	97153	UB	100%	Yes	1 = 15 min.	Limit of 8 hours per day.
*Intervention – Individual: Adaptive behavior treatment by protocol	Level II provider	97153	UB	80%	Yes	1 = 15 min.	Limit of 8 hours per day.
*Intervention – Individual: Adaptive behavior treatment by protocol	Level III provider	97153	UB	50%	Yes	1 = 15 min.	Limit of 8 hours per day.
*Intervention – Group: Group adaptive behavior treatment by protocol	Qualified Supervising Professional (QSP)	97154	UB	100%	Yes	1 = 15 min.	Limit of 4.5 hours per day. Up to 8 people in a group
*Intervention – Group: Group adaptive behavior treatment by protocol	Level I provider	97154	UB	100%	Yes	1 = 15 min.	Limit of 4.5 hours per day. Up to 8 people in a group
*Intervention – Group: Group adaptive behavior treatment by protocol	Level II provider	97154	UB	80%	Yes	1 = 15 min.	Limit of 4.5 hours per day. Up to 8 people in a group
*Intervention – Group: Group adaptive behavior treatment by protocol	Level III provider	97154	UB	50%	Yes	1 = 15 min.	Limit of 4.5 hours per day. Up to 8 people in a group
Intervention – Higher intensity: Adaptive behavior treatment with modifications in	Qualified Supervising	0373T	UB	100%	Yes	1 = 15 min.	Limit of 8 hours per day.

EIDBI Service Name	Professional or Provider Level	Procedure Code	Modifier	Reimbursement Percentage Rate	Service Agreement Needed (Yes/No)	Unit	Person or Service Limits
protocol administered by two or more providers	Professional (QSP)						<p>The 0373T code may be <b>billed only once for a given period of service</b>, even when two or more providers are present and participating. Billing is based on the face-to-face time of a single provider, not the combined time of multiple providers. For example, one hour with two or more providers present equals one hour of billable service, not multiple hours.</p> <p>Services must be provided under the direction of a Level I provider or Qualified Supervising Professional (QSP) who is on site (either in person or via telehealth) and delivered in an environment customized to address the person's behavioral needs.</p>
Intervention – Higher intensity: Adaptive behavior treatment with modifications in protocol administered by two or more providers	Level I provider	0373T	UB	100%	Yes	1 = 15 min.	<p>Limit of 8 hours per day.</p> <p>The 0373T code may be <b>billed only once for a given period of service</b>, even when two or more providers are present and participating. Billing is based on the face-to-face time of a single provider, not the combined time of multiple providers. For example, one hour with two or more providers present equals one hour of billable service, not multiple hours.</p> <p>Services must be provided under the direction of a Level I provider or Qualified Supervising Professional (QSP) who is on site (either in person or via telehealth) and delivered in an environment customized to address the person's behavioral needs.</p>
Intervention – Higher intensity: Adaptive behavior treatment with modifications in protocol administered by two or more providers	Level II provider	0373T	UB	100%	Yes	1 = 15 min.	<p>Limit of 8 hours per day.</p> <p>The 0373T code may be <b>billed only once for a given period of service</b>, even when two or more providers are present and participating. Billing is based on the face-to-face time of a single provider, not the combined time of multiple providers. For example, one hour with two or more providers present equals one hour of billable service, not multiple hours.</p> <p>Services must be provided under the direction of a Level I provider or Qualified Supervising Professional (QSP) who is on site (either in person or via telehealth) and delivered in an environment customized to address the person's behavioral needs.</p>

EIDBI Service Name	Professional or Provider Level	Procedure Code	Modifier	Reimbursement Percentage Rate	Service Agreement Needed (Yes/No)	Unit	Person or Service Limits
							person or via telehealth) and delivered in an environment customized to address the person's behavioral needs.
Intervention – Higher intensity: Adaptive behavior treatment with modifications in protocol administered by two or more providers	Level III provider	0373T	UB	100%	Yes	1 = 15 min.	<p>Limit of 8 hours per day.</p> <p>The 0373T code may be <b>billed only once for a given period of service</b>, even when two or more providers are present and participating. Billing is based on the face-to-face time of a single provider, not the combined time of multiple providers. For example, one hour with two or more providers present equals one hour of billable service, not multiple hours.</p> <p>Services must be provided under the direction of a Level I provider or Qualified Supervising Professional (QSP) who is on site (either in person or via telehealth) and delivered in an environment customized to address the person's behavioral needs.</p>
*Intervention – Individual: Observation and Direction: Adaptive behavior treatment with protocol modification	Qualified Supervising Professional (QSP)	97155	UB	100%	Yes	1 = 15 min.	<p>Limit of 6 hours per day.</p> <p>The requested and authorized amount of CPT 97155 should be <b>approximately 20% of the total authorized intervention time</b> (CPT 97153, 97154, and 0373T), unless a different proportion is clinically justified and documented in the Individual Treatment Plan (ITP).</p>
*Intervention – Individual: Observation and Direction: Adaptive behavior treatment with protocol modification	Level I provider	97155	UB	100%	Yes	1 = 15 min.	<p>Limit of 6 hours per day.</p> <p>The requested and authorized amount of CPT 97155 should be <b>approximately 20% of the total authorized intervention time</b> (CPT 97153, 97154, and 0373T), unless a different proportion is clinically justified and documented in the Individual Treatment Plan (ITP).</p>
*Intervention – Individual: Observation and Direction: Adaptive behavior treatment with protocol modification	Level II provider	97155	UB	80%	Yes	1 = 15 min.	<p>Limit of 6 hours per day.</p> <p>The requested and authorized amount of CPT 97155 should be <b>approximately 20% of the total authorized intervention time</b> (CPT 97153, 97154, and 0373T), unless a different proportion is clinically justified and documented in the Individual Treatment Plan (ITP).</p>

EIDBI Service Name	Professional or Provider Level	Procedure Code	Modifier	Reimbursement Percentage Rate	Service Agreement Needed (Yes/No)	Unit	Person or Service Limits
*Family or Caregiver Training and Counseling – Individual: Family adaptive behavior treatment guidance	Qualified Supervising Professional (QSP)	97156	UB	100%	Yes	1 = 15 min.	Multiple providers may bill at the same time. Limit of 4 hours per day.
*Family or Caregiver Training and Counseling – Individual: Family adaptive behavior treatment guidance	Level I provider	97156	UB	100%	Yes	1 = 15 min.	Multiple providers may bill at the same time. Limit of 4 hours per day.
*Family or Caregiver Training and Counseling – Individual: Family adaptive behavior treatment guidance	Level II provider	97156	UB	80%	Yes	1 = 15 min.	Multiple providers may bill at the same time. Limit of 4 hours per day.
*Family or Caregiver Training and Counseling – Group: Multiple family group adaptive behavior treatment guidance	Qualified Supervising Professional (QSP)	97157	UB	100%	Yes	1 = 15 min.	Multiple providers may bill at the same time. Limit of 4 hours per day. Up to 8 people or couples of caregivers in a group.
*Family or Caregiver Training and Counseling – Group: Multiple family group adaptive behavior treatment guidance	Level I provider	97157	UB	100%	Yes	1 = 15 min.	Multiple providers may bill at the same time. Limit of 4 hours per day. Up to 8 people or couples of caregivers in a group.
*Family or Caregiver Training and Counseling – Group: Multiple family group adaptive behavior treatment guidance	Level II provider	97157	UB	80%	Yes	1 = 15 min.	Multiple providers may bill at the same time. Limit of 4 hours per day. Up to 8 people or couples of caregivers in a group.
Travel Time	All	H0046	UB	100%	Yes	1 = 1 minute	Place of Service: 12 - Home; or 99 - Other