



Shoppable Services

BEACON BEHAVIORAL HOSPITALS

TABLE OF CONTENTS



Shoppable Services Codes Guide	3
Shoppable Services: Beacon Behavioral Hospital - Bunkie	4
<i>Semi Private Psychiatric Room and Board, all inclusive except prof. fees</i>	4
<i>Semi Private Detox Room and Board, all inclusive except prof. fees</i>	4
<i>Psychotherapy Services</i>	7
Shoppable Services: Beacon Behavioral Hospital - Lutcher	10
<i>Semi Private Psychiatric Room and Board, all inclusive except prof. fees</i>	10
<i>Semi Private Detox Room and Board, all inclusive except prof. fees</i>	10
<i>Psychotherapy Services</i>	13
Shoppable Services: Beacon Behavioral Hospital - New Orleans	16
<i>Semi Private Psychiatric Room and Board, all inclusive except prof. fees</i>	16
<i>Semi Private Detox Room and Board, all inclusive except prof. fees</i>	16
<i>Psychotherapy Services</i>	19
Shoppable Services: Beacon Behavioral Hospital - New Orleans Westbank	22
<i>Semi Private Psychiatric Room and Board, all inclusive except prof. fees</i>	22
<i>Semi Private Detox Room and Board, all inclusive except prof. fees</i>	22
<i>Psychotherapy Services</i>	25
Shoppable Services: Beacon Behavioral Hospital - Northshore	28
<i>Semi Private Psychiatric Room and Board, all inclusive except prof. fees</i>	28
<i>Semi Private Detox Room and Board, all inclusive except prof. fees</i>	28
<i>Psychotherapy Services</i>	31



Shoppable Services Codes

BEACON BEHAVIORAL HOSPITALS

SPECIFIED SHOPPABLE SERVICE	2025 CPT/HCPCS PRIMARY CODE <i>EFFECTIVE 01/01/2025</i>
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	124
Semi Private Detox Room and Board, all inclusive except prof. fees	126
Group psychotherapy (other than of a multiple-family group)	90853/S9480
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837
Psychotherapy for crisis, first 60 minutes	90839
Family psychotherapy (without the patient present), 50 minutes	90846
Intensive outpatient mental health, per diem	S9480



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- BUNKIE

PHYSICAL: 323 EVERGREEN, STE. B | MAILING: P.O. BOX 1160 | BUNKIE, LA 71322

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
SELF-PAY						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$750	\$720	\$1205.10	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$750	\$720	\$1174.20	\$750
	Physician services	Not provided by hospital (may be billed separately)				
MEDICARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1545	\$1545	\$1143.30	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$1545	\$1545	\$1112.40	\$750
	Physician services	Not provided by hospital (may be billed separately)				
HUMANA MEDICARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1545	\$1545	\$1112.40	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$1545	\$1545	\$1174.20	\$750
	Physician services	Not provided by hospital (may be billed separately)				
UNITED/OPTUM/UMR						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1020	\$720	\$1189.65	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$1020	\$720	\$1143.30	\$750
	Physician services	Not provided by hospital (may be billed separately)				
WELLCARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$750	\$720	\$1096.95	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$750	\$720	\$1158.75	\$750
	Physician services	Not provided by hospital (may be billed separately)				



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- BUNKIE

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
VA OPTUM CCN3						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$850	\$737.63	\$1143.30	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$850	\$737.63	\$1127.85	\$750
	Physician services	Not provided by hospital (may be billed separately)				
BCBS						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1545	\$1545	\$1220.55	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$1545	\$1545	\$1220.55	\$750
	Physician services	Not provided by hospital (may be billed separately)				
AETNA MEDICARE/COMMERCIAL						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$900	\$737.63	\$1081.50	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$900	\$737.63	\$1112.40	\$750
	Physician services	Not provided by hospital (may be billed separately)				
HEALTHY BLUE DUAL ADVANTAGE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$777	\$737.63	\$1112.40	\$750
		Physician services	Not provided by hospital (may be billed separately)			
BLUE ADVANTAGE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1545	\$1545	\$1158.75	\$750
		Physician services	Not provided by hospital (may be billed separately)			



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- BUNKIE

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
ALL LOUISIANA MEDICAID BAYOU PLAN						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$737.63	\$720	\$1189.65	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$737.63	\$720	\$1127.85	\$750
	Physician services	Not provided by hospital (may be billed separately)				
AMBETTER						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$850	\$737	\$1112.40	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$850	\$737	\$1220.55	\$750
	Physician services	Not provided by hospital (may be billed separately)				
CIGNA						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1545	\$1545	\$1174.20	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$1545	\$1545	\$1112.40	\$750
	Physician services	Not provided by hospital (may be billed separately)				



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- BUNKIE

SHOPPABLE SERVICE	BILLING CODE	PRICE
SELF PAY		
Group psychotherapy (other than of a multiple-family group)	90853	\$150
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$200
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$250
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$275
Psychotherapy for crisis, first 60 minutes	90839	\$250
Family psychotherapy (without the patient present), 50 minutes	90846	\$150
MEDICARE/HUMANA MEDICARE/HEALTHY BLUE DUAL/OCHSNER PREMIER/VANTAGE HEALTH		
Group psychotherapy (other than of a multiple-family group)	90853	\$100
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$200
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$250
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$275
Psychotherapy for crisis, first 60 minutes	90839	\$250
Family psychotherapy (without the patient present), 50 minutes	90846	\$150
AETNA COMMERCIAL/MEDICARE		
Group psychotherapy (other than of a multiple-family group)	90853	\$233
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$233
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$233
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$233
Psychotherapy for crisis, first 60 minutes	90839	\$233
Family psychotherapy (without the patient present), 50 minutes	90846	\$233



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- BUNKIE

SHOPPABLE SERVICE	BILLING CODE	PRICE
AMBETTER		
Group psychotherapy (other than of a multiple-family group)	S9480	\$225
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	S9480	\$225
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	S9480	\$225
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	S9480	\$225
Psychotherapy for crisis, first 60 minutes	S9480	\$225
Family psychotherapy (without the patient present), 50 minutes	S9480	\$225
BCBS OF LOUISIANA		
Group psychotherapy (other than of a multiple-family group)	S9480	\$249
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	S9480	\$249
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	S9480	\$249
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	S9480	\$249
Psychotherapy for crisis, first 60 minutes	S9480	\$249
Family psychotherapy (without the patient present), 50 minutes	S9480	\$249
CIGNA		
Group psychotherapy (other than of a multiple-family group)	90853	\$226
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$226
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$226
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$226
Psychotherapy for crisis, first 60 minutes	90839	\$226
Family psychotherapy (without the patient present), 50 minutes	90846	\$226



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- BUNKIE

SHOPPABLE SERVICE	BILLING CODE	PRICE
UNITED/OPTUM/UMR		
Group psychotherapy (other than of a multiple-family group)	90853	\$255
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$255
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$255
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$255
Psychotherapy for crisis, first 60 minutes	90839	\$255
Family psychotherapy (without the patient present), 50 minutes	90846	\$255
AETNA BETTER HEALTH/AMERIHEALTH CARITAS/HEALTHY BLUE LA MEDICAID BAYOU PLANS		
Intensive outpatient mental health, per diem	S9480	\$175
LOUISIANA HEALTHCARE CONNECTION LA MEDICAID BAYOU PLAN		
Intensive outpatient mental health, per diem	S9480	\$180
HUMANA HEALTH BENEFIT LA MEDICAID BAYOU PLAN		
Intensive outpatient mental health, per diem	S9480	\$185



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- LUTCHER

2471 LOUISIANA AVENUE | LUTCHER, LA 70071

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
SELF-PAY						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$750	\$737.63	\$1158.75	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$750	\$737.63	\$1081.50	\$750
	Physician services	Not provided by hospital (may be billed separately)				
MEDICARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$825.29	\$737.63	\$1220.55	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$908	\$737.63	\$1174.20	\$750
	Physician services	Not provided by hospital (may be billed separately)				
HUMANA MEDICARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$849.09	\$737.63	\$1081.50	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$830	\$737.63	\$1220.55	\$750
	Physician services	Not provided by hospital (may be billed separately)				
UNITED/OPTUM/UMR						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1020	\$737.63	\$1158.75	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$1020	\$737.63	\$1158.75	\$750
	Physician services	Not provided by hospital (may be billed separately)				
WELLCARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$737.63	\$737.63	\$1174.20	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$740	\$737.63	\$1174.20	\$750
	Physician services	Not provided by hospital (may be billed separately)				



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- LUTCHER

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
VA OPTUM CCN3						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$850	\$737.63	\$1220.55	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$850	\$737.63	\$1143.30	\$750
	Physician services	Not provided by hospital (may be billed separately)				
BCBS						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1038.47	\$737.63	\$1158.75	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$1038	\$737.63	\$1143.30	\$750
	Physician services	Not provided by hospital (may be billed separately)				
AETNA MEDICARE/COMMERCIAL						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$900	\$737.63	\$1127.85	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$900	\$737.63	\$1127.85	\$750
	Physician services	Not provided by hospital (may be billed separately)				
HEALTHY BLUE DUAL ADVANTAGE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$789.50	\$737.63	\$1174.20	\$750
	Physician services	Not provided by hospital (may be billed separately)				
BLUE ADVANTAGE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$737.63	\$737.63	\$1143.30	\$750
	Physician services	Not provided by hospital (may be billed separately)				



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- LUTCHER

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
ALL LOUISIANA MEDICAID BAYOU PLAN						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$737.63	\$737.63	\$1127.85	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$737.63	\$737.63	\$1081.50	\$750
	Physician services	Not provided by hospital (may be billed separately)				
AMBETTER						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$910	\$737.63	\$1205.10	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$910	\$737.63	\$1112.40	\$750
	Physician services	Not provided by hospital (may be billed separately)				
CIGNA						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$824.31	\$737.63	\$1081.50	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$800	\$737.63	\$1158.75	\$750
	Physician services	Not provided by hospital (may be billed separately)				



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- LUTCHER

SHOPPABLE SERVICE	BILLING CODE	PRICE
SELF PAY		
Group psychotherapy (other than of a multiple-family group)	90853	\$150
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$200
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$250
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$275
Psychotherapy for crisis, first 60 minutes	90839	\$250
Family psychotherapy (without the patient present), 50 minutes	90846	\$150
MEDICARE/HUMANA MEDICARE/HEALTHY BLUE DUAL/OCHSNER PREMIER/VANTAGE HEALTH		
Group psychotherapy (other than of a multiple-family group)	90853	\$100
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$200
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$250
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$275
Psychotherapy for crisis, first 60 minutes	90839	\$250
Family psychotherapy (without the patient present), 50 minutes	90846	\$150
AETNA COMMERCIAL/MEDICARE		
Group psychotherapy (other than of a multiple-family group)	90853	\$233
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$233
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$233
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$233
Psychotherapy for crisis, first 60 minutes	90839	\$233
Family psychotherapy (without the patient present), 50 minutes	90846	\$233



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- LUTCHER

SHOPPABLE SERVICE	BILLING CODE	PRICE
AMBETTER		
Group psychotherapy (other than of a multiple-family group)	S9480	\$225
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	S9480	\$225
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	S9480	\$225
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	S9480	\$225
Psychotherapy for crisis, first 60 minutes	S9480	\$225
Family psychotherapy (without the patient present), 50 minutes	S9480	\$225
BCBS OF LOUISIANA		
Group psychotherapy (other than of a multiple-family group)	S9480	\$258
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	S9480	\$258
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	S9480	\$258
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	S9480	\$258
Psychotherapy for crisis, first 60 minutes	S9480	\$258
Family psychotherapy (without the patient present), 50 minutes	S9480	\$258
CIGNA		
Group psychotherapy (other than of a multiple-family group)	90853	\$226
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$226
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$226
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$226
Psychotherapy for crisis, first 60 minutes	90839	\$226
Family psychotherapy (without the patient present), 50 minutes	90846	\$226



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- LUTCHER

UNITED/OPTUM/UMR		
Group psychotherapy (other than of a multiple-family group)	90853	\$255
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$255
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$255
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$255
Psychotherapy for crisis, first 60 minutes	90839	\$255
Family psychotherapy (without the patient present), 50 minutes	90846	\$255
AETNA BETTER HEALTH/AMERIHEALTH CARITAS/HEALTHY BLUE LA MEDICAID BAYOU PLANS		
Intensive outpatient mental health, per diem	S9480	\$175
LOUISIANA HEALTHCARE CONNECTION LA MEDICAID BAYOU PLAN		
Intensive outpatient mental health, per diem	S9480	\$180
HUMANA HEALTH BENEFIT LA MEDICAID BAYOU PLAN		
Intensive outpatient mental health, per diem	S9480	\$185



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NEW ORLEANS

14500 HAYNE BLVD., SUITE 200 | NEW ORLEANS, LA 70128

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
SELF-PAY						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$750	\$737.63	\$1174.20	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$750	\$750	\$1189.65	\$750
	Physician services	Not provided by hospital (may be billed separately)				
MEDICARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$825.29	\$737.63	\$1205.10	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$825.29	\$750	\$1205.10	\$750
	Physician services	Not provided by hospital (may be billed separately)				
HUMANA MEDICARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$849.09	\$737.63	\$1220.55	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$919	\$750	\$1096.95	\$750
	Physician services	Not provided by hospital (may be billed separately)				
UNITED/OPTUM/UMR						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1020	\$737.63	\$1158.75	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$1020	\$750	\$1096.95	\$750
	Physician services	Not provided by hospital (may be billed separately)				
WELLCARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$737.63	\$737.63	\$1158.75	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$740	\$750	\$1220.55	\$750
	Physician services	Not provided by hospital (may be billed separately)				



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NEW ORLEANS

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
VA OPTUM CCN3						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$850	\$737.63	\$1189.65	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$850	\$750	\$1127.85	
	Physician services	Not provided by hospital (may be billed separately)				
BCBS						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1005	\$737.63	\$1205.10	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$1005	\$750	\$1081.50	
	Physician services	Not provided by hospital (may be billed separately)				
AETNA MEDICARE/COMMERCIAL						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$900	\$737.63	\$1081.50	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$900	\$750	\$1189.65	
	Physician services	Not provided by hospital (may be billed separately)				
HEALTHY BLUE DUAL ADVANTAGE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$777	\$737.63	\$1127.85	\$750
		Physician services	Not provided by hospital (may be billed separately)			
BLUE ADVANTAGE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$737.63	\$737.63	\$1127.85	\$750
		Physician services	Not provided by hospital (may be billed separately)			



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NEW ORLEANS

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
ALL LOUISIANA MEDICAID BAYOU PLAN						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$737.63	\$737.63	\$1189.65	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$750	\$750	\$1127.85	\$750
	Physician services	Not provided by hospital (may be billed separately)				
AMBETTER						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$910	\$737.63	\$1189.65	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$850	\$750	\$1220.55	\$750
	Physician services	Not provided by hospital (may be billed separately)				
CIGNA						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$824.31	\$737.63	\$1205.10	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$912	\$750	\$1158.75	\$750
	Physician services	Not provided by hospital (may be billed separately)				



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NEW ORLEANS

SHOPPABLE SERVICE	BILLING CODE	PRICE
SELF PAY		
Group psychotherapy (other than of a multiple-family group)	90853	\$150
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$200
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$250
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$275
Psychotherapy for crisis, first 60 minutes	90839	\$250
Family psychotherapy (without the patient present), 50 minutes	90846	\$150
MEDICARE/HUMANA MEDICARE/HEALTHY BLUE DUAL/OCHSNER PREMIER/VANTAGE HEALTH		
Group psychotherapy (other than of a multiple-family group)	90853	\$100
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$200
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$250
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$275
Psychotherapy for crisis, first 60 minutes	90839	\$250
Family psychotherapy (without the patient present), 50 minutes	90846	\$150
AETNA COMMERCIAL/MEDICARE		
Group psychotherapy (other than of a multiple-family group)	90853	\$233
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$233
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$233
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$233
Psychotherapy for crisis, first 60 minutes	90839	\$233
Family psychotherapy (without the patient present), 50 minutes	90846	\$233



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NEW ORLEANS

SHOPPABLE SERVICE	BILLING CODE	PRICE
AMBETTER		
Group psychotherapy (other than of a multiple-family group)	S9480	\$225
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	S9480	\$225
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	S9480	\$225
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	S9480	\$225
Psychotherapy for crisis, first 60 minutes	S9480	\$225
Family psychotherapy (without the patient present), 50 minutes	S9480	\$225
BCBS OF LOUISIANA		
Group psychotherapy (other than of a multiple-family group)	S9480	\$258
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	S9480	\$258
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	S9480	\$258
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	S9480	\$258
Psychotherapy for crisis, first 60 minutes	S9480	\$258
Family psychotherapy (without the patient present), 50 minutes	S9480	\$258
CIGNA		
Group psychotherapy (other than of a multiple-family group)	90853	\$226
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$226
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$226
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$226
Psychotherapy for crisis, first 60 minutes	90839	\$226
Family psychotherapy (without the patient present), 50 minutes	90846	\$226



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NEW ORLEANS

SHOPPABLE SERVICE	BILLING CODE	PRICE
UNITED/OPTUM/UMR		
Group psychotherapy (other than of a multiple-family group)	90853	\$255
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$255
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$255
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$255
Psychotherapy for crisis, first 60 minutes	90839	\$255
Family psychotherapy (without the patient present), 50 minutes	90846	\$255
AETNA BETTER HEALTH/AMERIHEALTH CARITAS/HEALTHY BLUE LA MEDICAID BAYOU PLANS		
Intensive outpatient mental health, per diem	S9480	\$175
LOUISIANA HEALTHCARE CONNECTION LA MEDICAID BAYOU PLAN		
Intensive outpatient mental health, per diem	S9480	\$180
HUMANA HEALTH BENEFIT LA MEDICAID BAYOU PLAN		
Intensive outpatient mental health, per diem	S9480	\$185



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NEW ORLEANS WESTBANK

4201 WOODLAND DR. | NEW ORLEANS, LA 70131

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
SELF-PAY						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$750	\$737.63	\$1096.95	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$750	\$737.63	\$1143.30	\$750
	Physician services	Not provided by hospital (may be billed separately)				
MEDICARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$825.29	\$737.63	\$1189.65	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$908	\$737.63	\$1081.50	\$750
	Physician services	Not provided by hospital (may be billed separately)				
HUMANA MEDICARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$849.09	\$737.63	\$1143.30	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$830	\$737.63	\$1081.50	\$750
	Physician services	Not provided by hospital (may be billed separately)				
UNITED/OPTUM/UMR						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$977	\$737.63	\$1205.10	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$977	\$737.63	\$1158.75	\$750
	Physician services	Not provided by hospital (may be billed separately)				
WELLCARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1020	\$737.63	\$1174.20	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$1020	\$737.63	\$1127.85	\$750
	Physician services	Not provided by hospital (may be billed separately)				



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NEW ORLEANS WESTBANK

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
VA OPTUM CCN3						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$850	\$737.63	\$1189.65	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$850	\$750	\$1127.85	
	Physician services	Not provided by hospital (may be billed separately)				
BCBS						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1005	\$737.63	\$1205.10	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$1005	\$750	\$1081.50	
	Physician services	Not provided by hospital (may be billed separately)				
AETNA MEDICARE/COMMERCIAL						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$900	\$737.63	\$1081.50	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$900	\$750	\$1189.65	
	Physician services	Not provided by hospital (may be billed separately)				
HEALTHY BLUE DUAL ADVANTAGE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$777	\$737.63	\$1127.85	\$750
		Physician services	Not provided by hospital (may be billed separately)			
BLUE ADVANTAGE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$737.63	\$737.63	\$1127.85	\$750
		Physician services	Not provided by hospital (may be billed separately)			



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NEW ORLEANS WESTBANK

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
ALL LOUISIANA MEDICAID BAYOU PLAN						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$737.63	\$737.63	\$1189.65	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$750	\$750	\$1127.85	\$750
	Physician services	Not provided by hospital (may be billed separately)				
AMBETTER						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$910	\$737.63	\$1189.65	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$850	\$750	\$1220.55	\$750
	Physician services	Not provided by hospital (may be billed separately)				
CIGNA						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$824.31	\$737.63	\$1205.10	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$912	\$750	\$1158.75	\$750
	Physician services	Not provided by hospital (may be billed separately)				



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NEW ORLEANS WESTBANK

SHOPPABLE SERVICE	BILLING CODE	PRICE
SELF PAY		
Group psychotherapy (other than of a multiple-family group)	90853	\$150
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$200
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$250
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$275
Psychotherapy for crisis, first 60 minutes	90839	\$250
Family psychotherapy (without the patient present), 50 minutes	90846	\$150
MEDICARE/HUMANA MEDICARE/HEALTHY BLUE DUAL/OCHSNER PREMIER/VANTAGE HEALTH		
Group psychotherapy (other than of a multiple-family group)	90853	\$100
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$200
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$250
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$275
Psychotherapy for crisis, first 60 minutes	90839	\$250
Family psychotherapy (without the patient present), 50 minutes	90846	\$150
AETNA COMMERCIAL/MEDICARE		
Group psychotherapy (other than of a multiple-family group)	90853	\$233
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$233
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$233
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$233
Psychotherapy for crisis, first 60 minutes	90839	\$233
Family psychotherapy (without the patient present), 50 minutes	90846	\$233



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NEW ORLEANS WESTBANK

SHOPPABLE SERVICE	BILLING CODE	PRICE
AMBETTER		
Group psychotherapy (other than of a multiple-family group)	S9480	\$225
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	S9480	\$225
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	S9480	\$225
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	S9480	\$225
Psychotherapy for crisis, first 60 minutes	S9480	\$225
Family psychotherapy (without the patient present), 50 minutes	S9480	\$225
BCBS OF LOUISIANA		
Group psychotherapy (other than of a multiple-family group)	S9480	\$258
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	S9480	\$258
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	S9480	\$258
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	S9480	\$258
Psychotherapy for crisis, first 60 minutes	S9480	\$258
Family psychotherapy (without the patient present), 50 minutes	S9480	\$258
CIGNA		
Group psychotherapy (other than of a multiple-family group)	90853	\$226
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$226
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$226
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$226
Psychotherapy for crisis, first 60 minutes	90839	\$226
Family psychotherapy (without the patient present), 50 minutes	90846	\$226



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NEW ORLEANS WESTBANK

UNITED/OPTUM/UMR		
Group psychotherapy (other than of a multiple-family group)	90853	\$255
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$255
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$255
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$255
Psychotherapy for crisis, first 60 minutes	90839	\$255
Family psychotherapy (without the patient present), 50 minutes	90846	\$255
AETNA BETTER HEALTH/AMERIHEALTH CARITAS/HEALTHY BLUE LA MEDICAID BAYOU PLANS		
Intensive outpatient mental health, per diem	S9480	\$175
LOUISIANA HEALTHCARE CONNECTION LA MEDICAID BAYOU PLAN		
Intensive outpatient mental health, per diem	S9480	\$180
HUMANA HEALTH BENEFIT LA MEDICAID BAYOU PLAN		
Intensive outpatient mental health, per diem	S9480	\$185



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NORTHSORE

64026 HWY 434, STE 300 | LACOMBE, LA 70445

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
SELF-PAY						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$750	\$737.63	\$1096.95	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$750	\$737.63	\$1143.30	\$750
	Physician services	Not provided by hospital (may be billed separately)				
MEDICARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$825.29	\$737.63	\$1189.65	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$908	\$737.63	\$1081.50	\$750
	Physician services	Not provided by hospital (may be billed separately)				
HUMANA MEDICARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$849.09	\$737.63	\$1143.30	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$830	\$737.63	\$1081.50	\$750
	Physician services	Not provided by hospital (may be billed separately)				
HUMANA COMMERCIAL						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$977	\$737.63	\$1205.10	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$977	\$737.63	\$1158.75	\$750
	Physician services	Not provided by hospital (may be billed separately)				
UNITED/OPTUM/UMR						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1020	\$737.63	\$1174.20	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$1020	\$737.63	\$1127.85	\$750
	Physician services	Not provided by hospital (may be billed separately)				



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NORTHSORE

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
WELLCARE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$737.63	\$737.63	\$1220.55	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$740	\$737.63	\$1143.30	\$750
	Physician services	Not provided by hospital (may be billed separately)				
VA OPTUM CCN3						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$850	\$737.63	\$1081.50	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$850	\$737.63	\$1220.55	\$750
	Physician services	Not provided by hospital (may be billed separately)				
BCBS						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$1038	\$737.63	\$1189.65	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$1038	\$737.63	\$1189.65	\$750
	Physician services	Not provided by hospital (may be billed separately)				
AETNA MEDICARE/COMMERCIAL						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$900	\$737.63	\$1127.85	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees		126	\$900	\$737.63	\$1081.50	\$750
	Physician services	Not provided by hospital (may be billed separately)				
HEALTHY BLUE DUAL ADVANTAGE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$789.50	\$737.63	\$1143.30	\$750
	Physician services	Not provided by hospital (may be billed separately)				



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NORTHSORE

SHOPPABLE SERVICE	ANCILLARY SERVICES	BILLING CODE	PAYOR-SPECIFIC CONTRACT RATE	DE-IDENTIFIED MINIMUM	DE-IDENTIFIED MAXIMUM	DISCOUNTED CASH PRICE
BLUE ADVANTAGE						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$737.63	\$737.63	\$1127.85	\$750
	Physician services	Not provided by hospital (may be billed separately)				
ALL LOUISIANA MEDICAID BAYOU PLAN						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$737.63	\$737.63	\$1127.85	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	126	\$737.63	\$737.63	\$1220.55	\$750
	Physician services	Not provided by hospital (may be billed separately)				
AMBETTER						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$910	\$737.63	\$1220.55	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	126	\$910	\$737.63	\$1189.65	\$750
	Physician services	Not provided by hospital (may be billed separately)				
CIGNA						
Semi Private Psychiatric Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	124	\$824.31	\$737.63	\$1127.85	\$750
Semi Private Detox Room and Board, all inclusive except prof. fees	Pathology/interpretation of results Pharmacy Radiology	126	\$800	\$737.63	\$1081.50	\$750
	Physician services	Not provided by hospital (may be billed separately)				



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NORTHSORE

SHOPPABLE SERVICE	BILLING CODE	PRICE
SELF PAY		
Group psychotherapy (other than of a multiple-family group)	90853	\$150
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$200
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$250
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$275
Psychotherapy for crisis, first 60 minutes	90839	\$250
Family psychotherapy (without the patient present), 50 minutes	90846	\$150
MEDICARE/HUMANA MEDICARE/HEALTHY BLUE DUAL/OCHSNER PREMIER/VANTAGE HEALTH		
Group psychotherapy (other than of a multiple-family group)	90853	\$100
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$200
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$250
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$275
Psychotherapy for crisis, first 60 minutes	90839	\$250
Family psychotherapy (without the patient present), 50 minutes	90846	\$150
AETNA COMMERCIAL/MEDICARE		
Group psychotherapy (other than of a multiple-family group)	90853	\$233
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$233
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$233
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$233
Psychotherapy for crisis, first 60 minutes	90839	\$233
Family psychotherapy (without the patient present), 50 minutes	90846	\$233



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NORTHSORE

SHOPPABLE SERVICE	BILLING CODE	PRICE
AMBETTER		
Group psychotherapy (other than of a multiple-family group)	S9480	\$225
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	S9480	\$225
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	S9480	\$225
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	S9480	\$225
Psychotherapy for crisis, first 60 minutes	S9480	\$225
Family psychotherapy (without the patient present), 50 minutes	S9480	\$225
BCBS OF LOUISIANA		
Group psychotherapy (other than of a multiple-family group)	S9480	\$263
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	S9480	\$263
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	S9480	\$263
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	S9480	\$263
Psychotherapy for crisis, first 60 minutes	S9480	\$263
Family psychotherapy (without the patient present), 50 minutes	S9480	\$263
CIGNA		
Group psychotherapy (other than of a multiple-family group)	90853	\$226
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$226
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$226
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$226
Psychotherapy for crisis, first 60 minutes	90839	\$226
Family psychotherapy (without the patient present), 50 minutes	90846	\$226



Shoppable Services

BEACON BEHAVIORAL HOSPITAL- NORTHSORE

SHOPPABLE SERVICE	BILLING CODE	PRICE
UNITED/OPTUM/UMR		
Group psychotherapy (other than of a multiple-family group)	90853	\$255
Psychotherapy, 30 minutes with patient and/or family member (16 to 37 minutes)	90832	\$255
Psychotherapy, 45 minutes with patient and/or family member (38 to 52 minutes)	90834	\$255
Psychotherapy, 60 minutes with patient and/or family member (53 minutes or longer)	90837	\$255
Psychotherapy for crisis, first 60 minutes	90839	\$255
Family psychotherapy (without the patient present), 50 minutes	90846	\$255
AETNA BETTER HEALTH/AMERIHEALTH CARITAS/HEALTHY BLUE LA MEDICAID BAYOU PLANS		
Intensive outpatient mental health, per diem	S9480	\$175
LOUISIANA HEALTHCARE CONNECTION LA MEDICAID BAYOU PLAN		
Intensive outpatient mental health, per diem	S9480	\$180
HUMANA HEALTH BENEFIT LA MEDICAID BAYOU PLAN		
Intensive outpatient mental health, per diem	S9480	\$185