

Insyst Proc Code	InSyst SUD Proc Code	Short name	SFC	HCPC Code	PHY	PSY	PSY TECH	NP	PA	RN	Pharm	PhD	PhD Waivered	LCSW	LPCC	LPCC FAMILY	MFT	Intern/Lic-elig pract	Rehab Coun/SUD Counselor (Cert/Reg)	Unlicensed/Non-Prof Staff
Clinically Managed 3.1 Low-Intensity Residential Services																				
197*	SUD CG Informational Note	CGNO	OO	no Mcal bill																
880*	SUD Tracking-Assessment	KASST	OO	no Mcal bill																
881*	SUD TRACKING MED NECESS/JUSTIF	KMNE	OO	no Mcal bill																
882*	SUD TRACKING ALOC	KALO	OO	no Mcal bill																
101	3.1 RES Residential Day	RES	LA	H0019	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
106	3.1 RES Non-DMC Assessment NMN	NASM	OO	no Mcal bill	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
109	3.1 RES NonDMC Residential NMN	NMNR	OO	no Mcal bill	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
112	3.1 RES Case Mgmt-Care Coord	RCMC	GG	H0006	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
113	3.1 RES Case Mgmt-Serv Coord	RCMS	GG	H0006	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
116	3.1 RES Physician Consult	YCSL	DD	G9008	X	X														
Clinically Managed Population-Specific 3.3 High-Intensity Residential Services																				
197*	SUD CG Informational Note	CGNO	OO	no Mcal bill																
880*	SUD Tracking-Assessment	KASST	OO	no Mcal bill																
881*	SUD TRACKING MED NECESS/JUSTIF	KMNE	OO	no Mcal bill																
882*	SUD TRACKING ALOC	KALO	OO	no Mcal bill																
131	3.3 RES Residential Day	RES	LB	H0019	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
136	3.3 RES Non-DMC Assessment NMN	NASM	OO	no Mcal bill	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
139	3.3 RES NonDMC Residential NMN	NMNR	OO	no Mcal bill	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
142	3.3 RES Case Mgmt-Care Coord	RCMC	GI	H0006	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
143	3.3 RES Case Mgmt-Serv Coord	RCMS	GI	H0006	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
146	3.3 RES Physician Consult	YCSL	DF	G9008	X	X														
Clinically Managed 3.5 High-Intensity Residential Services																				
197*	SUD CG Informational Note	CGNO	OO	no Mcal bill																
880*	SUD Tracking-Assessment	KASST	OO	no Mcal bill																
881*	SUD TRACKING MED NECESS/JUSTIF	KMNE	OO	no Mcal bill																
882*	SUD TRACKING ALOC	KALO	OO	no Mcal bill																
161	3.5 RES Residential Day	RES	LC	H0019	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
166	3.5 RES Non-DMC Assessment NMN	NASM	OO	no Mcal bill	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
169	3.5 RES NonDMC Residential NMN	NMNR	OO	no Mcal bill	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
172	3.5 RES Case Mgmt-Care Coord	RCMC	GK	H0006	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
173	3.5 RES Case Mgmt-Serv Coord	RCMS	GK	H0006	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X
176	3.5 RES Physician Consult	YCSL	DG	G9008	X	X														

* Procedure code is required for Clinician Gateway (CG) users only