

**SHINE WELLNESS CLINIC
BCBS NEW CLIENT RATES
STARTING JULY 2024**

CODE	DESCRIPTIONS	SHINE RATE	BCBSM RATE	10%	20%	25%	50%
90791	INTAKE ASSESSMENT	176.00	173.71	17.37	34.74	43.43	86.86
90832	INDIVIDUAL - 16-37 MINUTES	79.00	78.96	7.90	15.79	19.74	39.48
90834	INDIVIDUAL - 38-52 MINUTES	105.00	104.16	10.42	20.83	26.04	52.08
90837	INDIVIDUAL - 53 + MINUTES	154.00	153.55	15.36	30.71	38.39	76.78
90846	CONJOINT THERAPY WITHOUT PATIENT	125.00	124.84	12.48	24.97	31.21	62.42
90847	CONJOINT THERAPY - FULL SESSION	104.00	103.15	10.32	20.63	25.79	51.58
90853	GROUP THERAPY	28.00	27.89	2.79	5.58	6.97	13.95