

Indiana Disordered/Problem Gambling Services Rate Sheet  
SFY 2025

SOGS - RA Scores 6 - 12

Modality/Type of Service	Rate	Unit	Maximum Amount
Enrollment: Data entry into WITS & DARMHA; Creation of Individualized Integrated Care Plan	\$190.00	Flat Fee (1 Unit Max)	\$190.00
Individualized Integrated Care Plan Review	\$25.00	Per Occurrence (3 Units Max)	\$75.00
24 - Hour Crisis Intervention	\$132.00	Flat Fee	No Limit
Case Management	\$15.00	Per 15 Minutes (10 Hours / 40 Units Max)	\$600.00
Intensive Outpatient Treatment	\$50.00	Flat Fee / Per Session (36 Sessions / Units Max)	\$1,800.00
Outpatient Treatment (Group)	\$50.00	Flat Fee / Per Session (30 Sessions / Units Max)	\$1,500.00
Individual Counseling	\$25.00	Per 15 Minutes (20 Hours / 80 Units Max)	\$2,000.00
Acute Stabilization including Detoxification <i>(service must be related to Problem Gambling)</i>	\$78.00	Per Day (3 Days / Units Max)	\$234.00
Residential Services <i>(service must be billed as a separate event from Acute Stabilization)</i>	\$75.00	Per Day (7 Days / Units Max)	\$525.00
Medication, Evaluation & Monitoring	\$20.00	Per Day (60 Days / Units Max)	\$1,200.00
Psychiatric Consultation	\$120.00	Per Hour (4 Hours / Units Max)	\$480.00
Financial Counseling (Group)	\$15.00	Per 15 Minutes (7 Hours / 28 Units Max)	\$420.00
Financial Counseling (Individual)	\$25.00	Per 15 Minutes (10 Hours / 40 Units Max)	\$1,000.00
Transportation	\$15.00	Per Unit (10 Units Max)	\$150.00
Family Counseling	\$25.00	Per Half - Hour (15 Hours / 30 Units Max)	\$750.00
Education (Group)	\$25.00	Per Half - Hour (10 Hours / 20 Units Max)	\$500.00
Education (Individual)	\$25.00	Per Half - Hour (10 Hours / 20 Units Max)	\$500.00
Family Education	\$25.00	Per Half - Hour (10 Hours / 20 Units Max)	\$500.00
Certified Recovery Specialist Services	\$34.00	Per Hour (35 Hours / Units Max)	\$1,190.00
Certified Recovery Coach	\$34.00	Per Hour (35 Hours / Units Max)	\$1,190.00

***Fee for disordered/problem gambling service payments for individuals receiving a SOGS-RA Score in the 6 - 12 range shall not exceed three-thousand dollars (\$3,000.00) during this agreement period, unless authorized by DMHA.***