

**DHS Addictions and Mental Health Division
 Medicaid Procedure Codes and Reimbursement Rates
 For Chemical Dependency Services Provided On or After 08/01/2011**

Code	Modifier(s)	Unit Value Service/Minute	HCPCS/CPT Description	Payment Amount**	Service Description
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Oregon Health Plan – Fee-For-Service/Non-Managed Care

Out Patient Chemical Dependency Services

H0001	HF or HG	Per Service	Alcohol and/or Drug Assessment	\$139.70	The assessment process provides an accurate diagnosis along with recommendations for follow-up or care. Recommendations may include addiction treatment or referrals to physical and mental health practitioners, family counselors, or other helping professionals.
H0002T	HF or HG	Per Service	Behavioral Health screening to determine eligibility for admission to treatment program(s)	\$35.05	Patients are screened for mental health condition as well as substance use disorders and are medically assessed to ensure appropriate treatment is given. 1 unit per billing
H0004T	HF or HG	Per 15 Min	Behavioral Health Counseling and Therapy. Individual Counseling by a clinician	\$17.46	Behavioral health counseling and therapy, provides individual counseling for a patient in a private setting as identified by the assessment and listed in the treatment plan.

Modifiers are to be used on all codes

HF-Substance Abuse/Outpatient
 HG-Opiate/Methadone Addiction Treatment Programs (OTP)

Place of Service Codes

03-School, facilities primary purpose is education
 11-Office Location
 12-Hom Location
 55-Residential Substance Abuse Treatment Center

57-Non-Residential Substance Abuse Treatment (OP)
 49-Independent Clinic: Opiate/Methadone Treatment Program (OTP)
 99-Other place of service, not identified

“T” indicates service may be provided telephonically

Providers must bill at rates, based upon the cost of services determined through a cost allocation plan, not in excess of their usual and customary charge to the general public
 (OAR 309-016-0105 and OAR 309-016-0420)

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H0005	HF or HG	Per Service	Alcohol and/or drug services; group counseling by a clinician	\$39.66	Provides the patient support in a group setting assisting the patient with sobriety maintenance. Focus on cognitive or behavioral approaches that address triggers and relapse prevention, self evaluation, process of recovery and issues pertaining to changes in lifestyle.
H0006T	HF or HG	Per 15 Min	Alcohol and/or drug services; Case Management	\$17.46	Case management of patients needing services relating to alcohol or drug abuse/dependence, provides assistance and care coordination based on the needs of the individual. The case manager assesses the needs of the patient, assists in the development of recovery plans to benefit the patient, as well as the implementation of the plans. Reviews and evaluates the patient's progress in relation to the plan.

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H0016	HG (OTP only)	Per Service	Alcohol and/or drug services; Medical/somatic intervention in ambulatory setting	\$79.19	This service includes the supervision of medication, physical examinations, or other medical needs required to maintain the physical health of the patient receiving medical intervention treatment for alcohol and drug related problems. 1 physical per 12 months
H0020	HG (OTP only)	Per Service	Alcohol and/or drug services; Methadone administration and/or services (provision of the drug by licensed program)	\$4.54	This code is used for methadone maintenance therapy medication administration. The patient is closely supervised adhering to all federal regulations of methadone maintenance. Take home doses must comply with OAR 415-020-0053. Frequency limitations up to 30 doses per month.
H0033	HG (OTP only)	Per Service	Oral Medication Administration, direct observation.	\$8.60	Patients are assisted or observed by professional medical staff during the administration of oral medication. Frequency limitation 4 doses per week.

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H0048	HF or HG	Per Service	Alcohol and/or drug testing; Collection and handling only, specimens other than blood	\$11.48	Collection and handling of specimens (UAs) for alcohol/drug analysis. To ensure the integrity of the specimen a chain of custody from the point of collection throughout the analysis process in necessary.
J3490	HG (OTP only)	Per Dose	Unclassified Drug	Actual Cost per Dose	This code may only be used for Buprenorphine dosing by an Alcohol & Drug provider type. Billing must include; name of drug, NDC # and dosage per unit. Frequency maximum of 16 units per day (1 unit = 2mg).
T1006	HF or HG	Per Service	Alcohol and/or substance abuse services; Family/couple counseling	\$87.56	This code provides family or couple counseling in a private setting as identified by the assessment and listed in the treatment plan.
T1013	HF or HG	Per 15 min	Sign language or oral interpretation service.	\$7.69	This code is used for sign language or oral interpretation or services provided. There is no co-pay required (1 unit = 15 minutes)
T1502	HG (OTP only)	Per Service	Administration of oral, intramuscular and/or subcutaneous medication by health care agency/professional	\$5.18	This code may only be used for Buprenorphine administration by an alcohol and drug provider type. Frequency max 7 administrations per week (1 unit = 1 administration).

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90849	HF or HG	Per Service	Multiple-family group psychotherapy	\$37.38	This code provides family counseling in a group setting as identified by the assessment and listed in the treatment plan.
90887T	HF or HG	Per Service	Interpretation or explanation of results of psychiatric, other medical examination and procedures, or other accumulated data to family or other responsible persons, or advising them how to assist patient.	\$33.23	This code is used for when the clinician spends time explaining the patient's condition to family members and/or other responsible parties involved with the patient's care and well-being. Advice is also given as to how family members can best assist the patient.
97810	HF or HG	Per initial 15 minutes	Acupuncture, 1 or more needles; without electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient.	\$14.23	This code is used for acupuncture therapy by inserting on or more fine needles into the patient as dictated by acupuncture meridians for the treatment of substance abuse. No electrical stimulation is employed with this procedure (1 unit = initial 15 minutes)
97811	HF or HG	Per 15 minutes	Acupuncture, 1 or more needles; without electrical stimulation, additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of the needle(s).	\$7.12	This code is used for each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of the needle, no electrical stimulation is employed (1 unit = 15 minutes, list separately in addition to primary)

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97813	HF or HG	Per initial 15 minutes	Acupuncture, 1 or more needles; with electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient.	\$14.23	This code is used for acupuncture therapy by inserting on or more fine needles into the patient as dictated by acupuncture meridians for the treatment of substance abuse. The needles are energized by employing a micro-current for electrical stimulation. (1 unit = initial 15 minutes)
97814	HF or HG	Per 15 Minutes	Acupuncture, 1 or more needles; with electrical stimulation, additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of the needle(s).	\$7.12	This code is used for each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of the needle(s), electrical stimulation is employed (1 unit = 15 minutes, list separately in addition to primary)

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MANAGED CARE-ENCOUNTER ONLY

Use of the following codes requires authorization by AMH

H0012		Per Service	Alcohol and/or drug service; sub-acute detoxification (residential addiction program outpatient).	Non- capitated	This code is used for sub-acute detoxification service in which the patient is monitored as an outpatient coming to a residential addiction program for the treatment of long-term symptoms associated with withdrawal.
H0038		Per 15 minutes	Self-help/peer services, per 15 minutes	Non- capitated	This code is used for Peer to Peer Delivered Services (1 unit = 15 minutes)

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BREAKTHROUGH ONLY-MORRISON CENTER
 Use of the following codes requires authorization by AMH

H2035	HF	Per Hour	Alcohol and/or other drug treatment program	\$73.03	This code is used for Individual, family and consultation services. Billed per hour (1 unit = 1 hour). Frequency maximum of 4 units per day up to 16 per month.
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