

Substance Use Disorder (Chemical Dependency) Medicaid Provider Fee Schedule
Proposed Effective October 1, 2017

Medicaid Standard Procedure Codes and Rates

Procedure Code	Modifier	Description	Unit	Rate
H0010	N/A	Inpatient Residential Detox	per day	\$228.84
H0018	N/A	Inpatient Residential Treatment	per day	\$228.84
H0001	N/A	Assessment and Placement	per assessment	\$281.11
H0004	N/A	Individual Therapy	15 min	\$ 16.90
H2035	N/A	Group Therapy	1 hour	\$ 24.15
H0012	N/A	Day Treatment	per day	\$114.42
H0048	N/A	Dip Strip or Saliva Collection, Handling, and testing	per test	\$ 7.88
T1016	HF	Targeted Case Management	15 min	\$ 11.47

IN RBRVS

Procedure Code	Description	Unit	Rate
99408	SBIRT/ATOD Screening – (e.g. Audit, DAST) and brief intervention - 15-30 Minutes	per visit	See RBRVS Schedule
99409	SBIRT/ATOD Screening – (e.g. Audit, DAST) and brief intervention - 30 Minutes or more	per visit	See RBRVS Schedule
90849	Multi-Family Group Therapy	per visit	See RBRVS Schedule
90847	Family Therapy with Patient	per visit	See RBRVS Schedule
90846	Family Therapy without Patient	per visit	See RBRVS Schedule
90853	Group Psychotherapy	Per visit	See RBRVS Schedule