

Division of Substance Use Programs (DSU) Medicaid Rate Sheet
 Effective: 7/1/2023

Provider Specialty: S18
 Provider Type: T25

Procedure Code	Procedure Description(Paid Claims)	Modifiers	Modifier Explanation	Rates with 5% increase (8/1/2022, Act 135)	Rates with 5% increase as of 7/1/2023 (includes HCBS)	Rates as of 4/1/2024 (without HCBS) and will be new base rate	Unit		
H0001	ALCOHOL AND/OR DRUG ASSESSMENT	H0001HA	adolescent (<18)	\$196.48	\$212.49	\$206.11	Encounter		
		H0001HB	adult (18+)						
H0004	BEHAVIORIAL HEALTH COUNSELING AND THERAPY, PER 15 MINUTES	H0004HA	adolescent (<18)	\$28.32	\$30.62	\$29.70	15 min		
		H0004HB	adult (18+)						
		H0004HS	adol (<18), without client present						
H0005	ALCOHOL AND/OR DRUG SERVICES; GROUP COUNSELING BY A CLINICIAN	H0005HA	adolescent (<18)	\$105.10	\$113.67	\$110.26	Encounter		
		H0005HB	adult (18+)						
H0010	ALCOHOL AND/OR DRUG SERVICES; SUB-ACUTE DETOXIFICATION (RESIDENTIAL ADDICTION PROGRAM INPATIENT)	H0010HB	adult (18+)	\$154.78	\$167.40	\$162.37	Per Diem		
H0011	ALCOHOL AND/OR DRUG SERVICES; ACUTE DETOXIFICATION (RESIDENTIAL ADDICTION PROGRAM INPATIENT)	H0011HB	adult (18+)	\$154.78	\$167.40	\$162.37	Per Diem		
H0015	ALCOHOL AND/OR DRUG SERVICES; INTENSIVE OUTPATIENT (TREATMENT PROGRAM THAT OPERATES AT LEAST 3 HOUR *SEE BOOK	H0015HB H0015 HA	adult (18+) adolescent (<18)	\$151.12	\$163.43	\$158.53	Encounter		
H0020	ALCOHOL AND/OR DRUG SERVICES; METHADONE ADMINISTRATION AND/OR SERVICE (PROVISION OF DRUG BY LICENSED PROGRAM)	H0020HACG	Adol (<18),buprenorphine, no health home services	\$370.69	\$400.90	\$388.88	Month		
		H0020HGCG	General pop, methadone, no health home services						
		H0020HBCG	Adult (18+), buprenorphine, no health home services						
		H0020	ALCOHOL AND/OR DRUG SERVICES; METHADONE ADMINISTRATION AND/OR SERVICE (PROVISION OF DRUG BY LICENSED PROGRAM)	H0020HBHGCG	Adult (18+), methadone, no health home services	\$529.56	\$572.72	\$555.53	Month
				H0020HASE	Adol (<18),buprenropine, with health home services				
				H0020HGSE	General pop, methadone, with health home services				
				H0020HBSE	Adult (18+), buprenorphine, with health home services				
H0020HBHGSE	Adult (18+), methadone, with health home services								
H0020	ALCOHOL AND/OR DRUG SERVICES; METHADONE ADMINISTRATION AND/OR SERVICE (PROVISION OF DRUG BY LICENSED PROGRAM)	H0020HG	General pop, methadone	\$425.00	\$425.00	\$425.00	Month		

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T1006	ALCOHOL AND/OR SUBSTANCE ABUSE SERVICES, FAMILY/COUPLE COUNSELING	T1006	Any	\$141.58	\$153.11	\$148.52	Encounter
		T1006HS	Adol (<18) without client present				
T1016	CASE MANAGEMENT, EACH 15 MINUTES		Adolescent (<18) Adult(18+)	\$15.13	\$16.36	\$15.87	15 Min

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Valley Vista and Recovery House Adult Episodic Rates for Treatment Episodes of Three or more nights
Provider May Use Either H0011 or H0018 -- the episodic rate includes BOTH services so they may not be billed separately

Primary Substance and Co-Occurring Category	Rates with 5% increase (8/1/2022, Act 135)	Rates with 5% increase as of 7/1/2023 (includes HCBS)	Rates as of 4/1/2024 (without HCBS) and will be new base rate	Unit
Other/Opioid Z - No co-occurring	\$3,508.39	\$3,683.81	\$3,573.29	Episode
Other/Opioid A	\$3,708.46	\$3,893.89	\$3,777.07	Episode
Other/Opioid B	\$3,930.17	\$4,126.68	\$4,002.88	Episode
Other/Opioid C	\$4,164.86	\$4,373.10	\$4,241.91	Episode
Alcohol/Benzo Z - No co-occurring	\$3,993.98	\$4,193.68	\$4,067.87	Episode
Alcohol/Benzo A	\$4,230.83	\$4,442.37	\$4,309.10	Episode
Alcohol/Benzo B	\$4,484.98	\$4,709.23	\$4,567.95	Episode
Alcohol/Benzo C	\$4,756.44	\$4,994.26	\$4,844.43	Episode
Short Stay (per diem)	\$237.93	\$249.83	\$242.33	Episode