



Date: September 30, 2021

To: Substance use disorder (SUD) providers
Coordinated care organizations (CCOs)

From: David Inbody, CCO Operations Manager
Donny Jardine, Transformations Team Manager
Medicaid Programs

Subject: SUD treatment code and rate changes effective January 1, 2022

Effective January 1, 2022, the Oregon Health Authority (OHA) will implement fee-for-service reimbursement for:

- Treatment provided within SUD facilities with more than 16 beds, and
- Community integration services (housing and employment support services) for members with SUD.

OHA is working to identify applicable CPT and HCPCS procedure codes and develop rates commensurate to these services. Preliminary codes are shown on pages 2 and 3 of this communication. If OHA identifies other codes or rates to add to this list, OHA will communicate them to providers and CCOs.

OHA will publish the official list of codes and rates for these services in the fee-for-service [behavioral health fee schedule](#) on or before January 1, 2022.

Why is this happening?

On April 8, 2021, OHA received approval from the Centers for Medicare & Medicaid Services (CMS) to implement an [SUD 1115 demonstration waiver](#). Under the waiver, OHA can use federal matching funds to reimburse for the services listed above to support the goals of Oregon's SUD 1115 demonstration:

- Increase beneficiary adherence to, and retention in, SUD treatment programs.
- Reduce inappropriate or preventable utilization of emergency departments and inpatient hospital settings through improved access to a continuum of care.
- Provide a full continuum of care to support long-term recovery.

What should you do?

Fee-for-service providers may bill OHA for codes identified on the [behavioral health fee schedule](#).

CCOs should update provider reimbursement schedules and contracts as applicable to ensure codes associated with the SUD 1115 demonstration waiver are included for reimbursement effective January 1, 2022.

Questions?

- **Fee-for-service providers:** Please contact the [SUD Waiver Project Team](#).
- **CCOs:** Please contact [your CCO account representative](#).

Thank you for your continued support of the Oregon Health Plan and the services you provide to our members.

Preliminary CPT and HCPCS codes and rates effective on or after January 1, 2022

Notes:

- “Ancillary” means services supportive of or necessary for providing a primary service. Ancillary services must be medically necessary (OAR 410-120-0000(146)). For the purposes of this definition, primary services are covered condition/treatment pairs above funding line on the Prioritized List or condition/treatment pairs covered under the comorbidity rule. Ancillary services may be provided on the same date of service as the primary service, before the primary service, or after but they must always be in support of or necessary for the success of a primary service.
- Highlighted lines are being considered for Prioritized List placement. This means the identified codes are not currently added to the Prioritized List, above the funding line, but will be considered during the next Behavioral Advisory Panel, scheduled for October 18, 2021.

Code	Description	Current Rate	Proposed Rate	Unit	Prioritized List Status
G9012	Substance use care coordination: services provided to transition an individual from higher levels of care (inpatient or residential) to lower levels of care. (This service should be provided at discharge, one unit per person per discharge)	N/A	\$127.19	Per Service	Ancillary
H0006	Alcohol and/or drug services; Case Management	\$20.60	\$22.56	15 Minutes	On Line 4 On Line 62
H0018	Adolescent A&D residential treatment without room and board (short term 30 days or less)	\$220.80	\$277.00	Per Diem	On Line 4
H0018	Adult A&D residential treatment without room and board (short term 30 days or less) – For IMD facilities	\$165.60	\$229.00	Per Diem	On Line 4
H0018	Adult A&D residential treatment without room and board (short term 30 days or less) – For non-IMD facilities	\$165.60	\$245.00	Per Diem	On Line 4
H0018	Adult A&D residential treatment without room and board (short term 30 days or less) – For specialty programs	\$165.60	\$308.00	Per Diem	On Line 4
H0019	Adolescent A&D residential treatment without room and board (long term longer than 30 days)	\$220.80	\$277.00	Per Diem	On Line 4
H0019	Adult A&D residential treatment without room and board (long term longer than 30 days) – For IMD facilities	\$165.60	\$229.00	Per Diem	On Line 4
H0019	Adult A&D residential treatment without room and board (long term longer than 30 days) – For non-IMD facilities	\$165.60	\$245.00	Per Diem	On Line 4
H0019	Adult A&D residential treatment without room and board (long term longer than 30 days) – For specialty programs	\$165.60	\$308.00	Per Diem	On Line 4
H0020	Alcohol and/or drug services; Methadone administration and/or services (provision of the drug by licensed program)	\$4.99	\$12.50	Per Service	On Line 4
H0022	Alcohol and/or drug intervention service (planned facilitation)	N/A	\$15.67	15 minutes	Considered for Line 4

Code	Description	Current Rate	Proposed Rate	Unit	Prioritized List Status
H0023	Behavioral health outreach service (planned approach to reach a targeted population)	N/A	\$45.31	Per Service	On Line 4
H0039	Assertive community treatment, face-to-face, per 15 minutes (only used with mental health diagnosis)	N/A	\$27.25	15 minutes	On Mental Health Lines
H0043	Supported Housing (available after April 22, 2022)	N/A	\$68.04	Per Diem	Considered for Line 4
H0050	Alcohol and/or drug services, brief intervention 15 Minutes	N/A	\$45.31	Per Service	On Line 3
H2010	Comprehensive medication services	\$24.81	\$24.81	15 minutes	On Line 4
H2011	Crisis intervention services	N/A	\$30.00	15 minutes	On Line 4
H2014	Skills training and development	\$17.56	\$19.92	15 minutes	On Line 4
H2023	Supported Employment, per 15 min	N/A	\$19.92	15 minutes	Considered for Line 4
H2032	Activity therapy	N/A	\$25.00	15 minutes	Considered for Line 4
H2036	Alcohol and/or other drug day treatment program	N/A	\$165.60	Per Diem	Considered for Line 4
Q3014	Telehealth originating site facility fee	\$20.72	\$20.72	Per service	Ancillary and described in HERC Guideline Note A5 Telehealth
T1016	Case management, per 15 minutes	N/A	\$22.56	15 minutes	Ancillary