Chart of 1115 Medicaid Waiver Services Effective: 2 / 2 / 2024 Version date: December 15, 2022

Unit	SUD Service Description	Procedure Code/Modifier	Rate	
15 minutes	Outpatient Services ASAM 1.0 Individual	H0007 V1	\$	26.79
15 minutes	Outpatient Services ASAM 1.0 - Group (Adolescent)	H0007 HQ HA V1	\$	8.81
15 minutes	Outpatient Services ASAM 1.0 - Group (Adult)	H0007 HQ HB V1	\$	8.81
15 minutes	Intensive Outpatient ASAM 2.1- Individual	H0015 V1	\$	30.94
15 minutes	Intensive Outpatient ASAM 2.1- Group	H0015 HQ V1	\$	10.21
Daily	Partial Hospitalization	H0035 V1	\$	522.50
Daily	SUD Residential 3.1 (Adolescent age 12-17)	H2036 HA V1	\$	369.96
Daily	SUD Residential 3.1 (Adolescent age 18-21)	H2036 CG HA V1	\$	369.96
Daily	SUD Residential 3.1 (Adult)	H2036 HF V1	\$	418.87
Daily	SUD Residential 3.3 (Adult)	H0047 HF V1	\$	643.66
Daily	SUD Residential 3.5 (Adolescent age 12-17)	H0047 HA V1 TF	\$	521.06
Daily	SUD Residential 3.5 (Adolescent age 18-21)	H0047 CG V1 HA TF	\$	521.06
Daily	SUD Residential 3.5 (Adult)	H0047 TG V1	\$	475.78
Daily	Medically Monitored Intensive Inpatient Services 3.7 (Adolescent age 12-17)	H0009 TF HA V1	\$	940.50
Daily	Medically Monitored Intensive Inpatient Services 3.7 (Adolescent age 18-21)	H0009 CG V1 HA TF	\$	940.50
Daily	Medically Monitored Intensive Inpatient Services 3.7 (Adult)	H0009 TF V1	\$	940.50
Daily	Medically Managed Intensive Inpatient Services 4.0	H0009 TG V1	\$	1,567.50
15 minutes	Ambulatory Withdrawal Management without Extended Monitoring	H0014 V1	\$	31.35
15 minutes	Ambulatory Withdrawal Management with Extended Monitoring	H0014 CG V1	\$	31.35
Daily	Clinically Managed Residential Withdrawal Management 3.2 WM	H0010 V1	\$	315.85
Daily	Medically Monitored Inpatient Withdrawal Management 3.7 WM	H0010 TG V1	\$	940.50
Daily	Medically Managed Intensive Inpatient Withdrawal Management 4.0 WM	H0011 V1	\$	1,567.50
15 minutes	Community & Recovery Support Services - Individual	H2021 V1	\$	22.43
15 minutes	Community & Recovery Support Services - Group	H2021 HQ V1	\$	5.88
Monthly	SUD Care Coordination	H0047 V1	\$	313.50
15 minutes	Intensive Case Management	H0023 V1	\$	29.33
15 minutes	Peer-Based Crisis Services	H0038 V1	\$	21.38
Hourly	23 Hour Crisis Stabilization Observation	S9484 V1	\$	121.43
Per Call Out	Mobile Outreach and Crisis Response Services	T2034 V1	\$	183.54
15 minutes	Crisis Intervention Service - Follow-Up	H2011 TS V1	\$	21.38
Daily	Crisis Residential Stabilization	S9485 V1	\$	940.50
Per Assessment	Treatment Plan Development/Review	T1007 V1	\$	141.52

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Unit	BH Service Description	Procedure Code/Modifier	Rate
15 minutes	Home-Based Family Treatment Level 1	H1011 V2	\$ 25.25
15 minutes	Home-Based Family Treatment Level 2	H1011 TF V2	\$ 25.74
15 minutes	Home-Based Family Treatment Level 3	H1011 TG V2	\$ 28.41
Daily	Therapeutic Treatment Homes	H2020 V2	\$ 307.91
Daily	Children's Residential Treatment Level 1	T2033 V2	\$ 319.77
Daily	Children's Residential Treatment Level 2	T2033 TF V2	\$ 444.51
15 minutes	Intensive Case Management	H0023 V2	\$ 29.33
15 minutes	Community & Recovery Support Services - Individual	H2021 V2	\$ 22.43
15 minutes	Community & Recovery Support Services - Group	H2021 HQ V2	\$ 5.88
15 minutes	Assertive Community Treatment	H0039 V2	\$ 32.01
15 minutes	Intensive Outpatient 2.1 - Individual	H0015 V2	\$ 30.94
15 minutes	Intensive Outpatient 2.1 - Group	H0015 HQ V2	\$ 10.21
Daily	Partial Hospitalization	H0035 V2	\$ 522.50
Daily	Adult MH Residential Treatment Level 1	T2016 V2	\$ 628.68
Daily	Adult MH Residential Treatment Level 2	T2016 TG V2	\$ 501.87
15 minutes	Peer-Based Crisis Services	H0038 V2	\$ 21.38
Hourly	23 Hour Crisis Stabilization Observation	S9484 V2	\$ 121.43
Per Call Out	Mobile Outreach and Crisis Response Services	T2034 V2	\$ 183.54
15 minutes	Crisis Intervention Service - Follow-Up	H2011 TS V2	\$ 21.38
Daily	Crisis Residential Stabilization	S9485 V2	\$ 940.50
Per Assessment	Treatment Plan Development/Review	T1007 V2	\$ 141.52