### Medicaid Reimbursement Categories Key

#### Peer Services
- H0038 – Peer Support Services
- H2015 – Recovery Support Specialist Service
- H2016 – Comprehensive Community Support Services (Peer), per diem
- S9445 – Group Peer Support Services
- T1012 – Individual Peer Support Services

#### Screening/Evaluation/Assessment
- 90791 – Psychiatric Diagnostic Evaluation/Intake Interview
- 96127 – Brief Assessment
- 99408 – SBIRT/Screening (15-30 mins)
- 99409 – SBIRT/Screening (30+ mins)
- H0001 – Alcohol and/or Drug Assessment
- H0002 – Behavioral Health Screening to Determine Admission Eligibility; Extended Assessment (75+ mins); Screening and Referral
- H0031 – Behavioral/Mental Health Assessment by Non-Physician
- H0049 – Screening
- H2000 – Comprehensive Assessment
- T1011 – Evaluation/Determination of Placement
- T1023 – Program Intake Assessment; Brief Assessment

#### Brief Intervention
- 99408 – SBIRT
- H0004 – Brief Treatment
- H0022 – Alcohol and/or Drug Intervention Services; Early Intervention
- H0049 – Screening and Intervention (less than 15 mins)
- H0050 – Brief Intervention

#### Counseling Services
- 90832 – Individual Counseling/Psychotherapy, 30 mins (16-37 mins)
- 90834 – Individual Counseling/Psychotherapy, 45 mins (38-52 mins)
- 90837 – Individual Counseling/Psychotherapy, 60 mins (53+ mins)
- 90839 – Psychotherapy for Crisis, first 60 mins
- 90840 – Psychotherapy for Crisis, additional 30 mins
- 90489 – Psychoanalysis
- 90846 – Family Counseling/Psychotherapy (without client)
- 90847 – Family Counseling/Psychotherapy (with client)
- 90849 – Multiple Family Counseling/Psychotherapy
- 90853 – Group (non-family) Counseling/Psychotherapy
- 90877 – Collateral Therapy/Family Consultation
- 96153 – Group Therapy
- 96154 – Family Therapy (with client)
- 96155 – Family Therapy (without client)
- 99354 – Prolonged Individual Counseling/Psychotherapy Service (additional 30-60 mins)
- 99355 – Additional Prolonged Individual Counseling/Psychotherapy Service (per 15-30 mins)
- H0004 – Individual Behavioral Health Therapy and Counseling
- H0005 – Group/Family Counseling
- H2019 – Individual/Group Therapy
- G0396 – Substance Use Disorder Counseling (25-45 mins)
- G0397 – Substance Use Disorder Counseling (45+ mins)
- T1006 – Family/Couple Counseling

#### Community/Rehabilitative Supports
- H0025 – Behavioral Health Prevention Education
- H0034 – Medication Monitoring/Training/Support
- H0036 – Basic Living Skills Training
- H0043 – Supported Housing
- H2014 – Individual/Family Skills Training and Development; Behavioral Modification
- H2015 – Comprehensive Community Support Services; Addictive Diseases Support Services
- H2017 – Individual/Group Psychosocial Rehabilitative Services; Living Skills Training
- H2019 – Individual/Family Therapeutic Behavioral Services
- H2022 – Intensive In-Home Services
- H2025 – Supported Employment
- H2026 – Supported Employment (per diem)
- H2027 – Psychoeducational Services; Didactic Counseling
- S5110 – Family Support (Home Care Training)
- S5111 – Family Support and Training
- S9482 – Family Support
- T1012 – (Non-Peer) Recovery Support; Family Education
- T1019 – Personal Care Services
- T1020 – Personal Care Services (per diem)

#### Case Management/Care Coordination
- H0006 – Substance Use Disorder Case Management
- H0032 – Service Plan Development
- H2036 – Recovery Navigation Support
- G9012 – Substance Use Care Coordination; Ongoing Case Management
- T1007 – Treatment Plan Development
- T1016 – Case Management; Treatment Coordination
- T1017 – Case Management; Targeted Case Management
- T2023 – Targeted Case Management

#### Crisis Intervention
- 90791 – Crisis Evaluation
- 90839 – 24 Hour Access to Crisis Response, first 60 mins
90840 – 24 Hour Access to Crisis Response, additional 30 mins
99510 – Mobile Crisis Response
H2011 – Crisis Intervention/Management/Follow-up; Mobile Crisis Management
H2018 – Crisis Residential Services
S9484 – Crisis Stabilization/Intervention; Crisis Service Center; Mobile Crisis Service
S9485 – Crisis Stabilization (per diem)

Bundles
H0010 – Subacute Detoxification (Residential Setting) (ASAM 3.2-WM); High Intensity Residential Treatment; Clinically Managed Residential Treatment (ASAM 3.3; 3.5)
H0011 – Acute Detoxification (Residential Setting) (ASAM 3.7-WM); Medically-Manged Residential Treatment (ASAM 4)
H0012 – Subacute Detoxification (Outpatient Setting) (ASAM 2-WM); Non-Medical Community Residential Treatment (ASAM 3.5)
H0013 – Outpatient Detoxification (Residential Setting) (ASAM 2-WM); Medically Monitored Community Residential Treatment (ASAM 3.7)
H0014 – Outpatient Detoxification (Ambulatory Setting) (ASAM 2-WM)
H0015 – Intensive Outpatient Program (ASAM 2)
H0018 – Short-Term Residential Services; Medically Monitored Intensive Residential Treatment (ASAM 3.7); Residential Treatment Program with 17+ beds
H0019 – Long-Term Residential Services; Clinically Managed High-Intensity Residential Treatment (ASAM 3.5)
H0035 – Partial Hospitalization (ASAM 2.5)
H0043 – Residential Alcohol and Drug Services (ASAM 3)
H2001 – Outpatient Rehabilitation (2-4 hours)
H2012 – Day Treatment (≤55 hours) (ASAM 2.1)
H2015 – Day Treatment (after 5 hours) (ASAM 2.5)
H0020 – Opioid Treatment Program
H2034 – Low-Intensity Residential Treatment/Halfway House (ASAM 3.1)
H2035 – Outpatient Alcohol and/or Drug Treatment Services
H2036 – High-Intensity Residential Treatment (ASAM 3.3/3.5/3.7); Outpatient Alcohol and/or Drug Treatment Service, per diem/>4 hours; Medically Supervised Detoxification Crisis Stabilization (ASAM 3.7-WM); Residential Treatment Program with <16 beds; Residential Treatment Program (ASAM 3.1/3.3/3.5/3.7)
S0201 – Partial Hospitalization Services in Acute Care or Psychiatric Hospital; Partial Hospitalization Services (ASAM 2.5)
S2080 – Health Home initial Recovery Action Plan
S2081 – Health Home Ongoing Care Management
S9480 – Intensive Outpatient Program