Maryland Department of Health Combination of Substance Use Disorder Services Rules

Provider Type 32

1. H0001 (Substance Use Disorder Assessment)

Can only be billed once per 12-months, per participant, per provider unless there is more than a 30 day break in treatment

2. H0004 (Individual outpatient therapy)

Cannot bill with H0015 (SUD IOP) or H2036 (Partial Hospitalization)

3. **H0005** (Group outpatient therapy)

Cannot bill with H0015 (SUD IOP) or H2036 (Partial Hospitalization)

4. H0016 (Medication Assisted Treatment Initial Induction)

- a) Cannot be billed with H0014 (Ambulatory Detox).
- b) Cannot be billed with H0020 (Methadone Maintenance) or H0047 (Ongoing Buprenorphine Monitoring) except for the initial induction week

5. H0020-HG (Methadone maintenance)

- a) Cannot be billed with H0014 (Ambulatory Detox), or H0047 (Ongoing Buprenorphine Monitoring).
- b) Cannot be billed with H0016 (MAT Initial Induction) except for the induction week.

6. W9520 (Methadone Guest Dosing)

- a) Guest dosing may be billed once per day that the patient is receiving their medication at the guest dosing program.
- b) One patient is eligible for up to 30 days of guest dosing per year, regardless of guest dosing location. If additional days are required, providers must contact the ASO with clinical reasoning to request additional units.
- c) The home program and guest dosing program shall be in communication regarding dosage, days of guest dosing required and other clinical concerns.

7. H0047 (Ongoing Buprenorphine Monitoring)

- a) Cannot be billed with H0014 (Ambulatory Detox) or H0020 (Methadone Maintenance).
- b) Cannot be billed with H0016 (MAT Initial Induction) except for the induction week.

8. W9521 (Buprenorphine Guest Dosing)

a) Guest dosing may be billed once per day that the patient is receiving their medication at the guest dosing program.

- b) One patient is eligible for up to 30 days of guest dosing per year, regardless of guest dosing location. If additional days are required, providers must contact the ASO with clinical reasoning to request additional units.
- c) The home program and guest dosing program shall be in communication regarding dosage, days of guest dosing required and other clinical concerns.

9. 99211 - 99215 – HG (MAT Ongoing Evaluation and Management, including Rx -Minimal)

- a) May only be billed PT 32s when the service is delivered by an appropriately credentialed physician or nurse practitioner (and billed with the HG modifier).
- b) Cannot be billed with H0014 (Ambulatory Detox) or H0016 (MAT Initial Induction).

Provider Type 50

1. H0001 (Substance Use Disorder Assessment)

Can only be billed once per 12-months, per participant, per provider unless there is more than a 30 day break in treatment

2. H0004 (Individual outpatient therapy)

- a) Cannot be billed with H0015 (SUD IOP) or H2036 (Partial Hospitalization)
- b) Cannot be billed by the PT 50 while patient is receiving services through an OTP

3. **H0005** (Group outpatient therapy)

- a) Cannot be billed with H0015 (SUD IOP) or H2036 (Partial Hospitalization)
- b) Cannot be billed by the PT 50 while patient is receiving services through an OTP

4. H0015 (Intensive outpatient – IOP)

- a) Cannot bill with H0004 (Individual OP therapy), H0005 (Group Outpatient Therapy), MH PHP (0912, S0201, S0201 with 52 modifier) and SUD PHP (H2036).
- b) Cannot bill MH IOP (S9480, 0905, 0949) on the same date of service

5. H2036 (Partial Hospitalization)

- a) Cannot be billed with H0004 (individual outpatient therapy) H0005 (group outpatient therapy), H0015 (IOP), MH IOP (S9480, 0905, 0949) or MH PHP (0912, S0201, S0201 with 52 modifier).
- b) Cannot bill MH PHP (0912, 0913, S0201) on the same date of service

6. H0014 (Ambulatory Detox)

Cannot be billed with H0016 (Buprenorphine Induction), H0020 (Methadone Maintenance), H0047 (Ongoing Buprenorphine Monitoring), or E&M MAT Ongoing Medication Management provided by a PT 50.

7. 99211 – 99215 - HG (MAT Ongoing Evaluation and Management, including Rx -Minimal)

- a) May only be billed by PT 50s when the service is delivered by a practitioner with a DATA 2000 waiver.
- b) Cannot be billed with H0014 (Ambulatory Detox) or H0016 (MAT Initial Induction).

c) Cannot be billed by the PT 50 while patient is receiving services through an OTP

Provider Type 54

1. H0001 (Alcohol and/ or Drug Assessment)

Can only be billed if the patient is assessed and does NOT meet ASAM Residential Levels of Care 3.3, 3.5, 3.7, or 3.7WM. Cannot be billed within 7 days of W7330, W7350, W7370, or W7375.

2. W7330, W7350, W7370, W7375 (ASAM Levels 3.3, 3.5, 3.7, and 3.7 WM)

Cannot be billed with any community based SUD codes with the exception of H0020 and H0047. Cannot be billed with any mental health community based services except for on the date of admission or for services rendered by a community based psychiatrist.

Additional Combination of Service Rules

- 1. For the individual practitioner, a limit of only one individual, family or group therapy per day per consumer, regardless of the provider.
- 2. For the SUD programs, it is a maximum of two counseling services per day per consumer; but H0004 (individual outpatient therapy) can be billed up to 6 units per day.
- 3. Both IOP and Partial Hospitalization codes cannot be billed for the same service date across MH & SUD.
- 4. MH Inpatient and SUD community based services cannot be billed for the same service date except for date of admission
- 5. SUD inpatient and MH community based services cannot be billed for the same service date except for date of admission
- 6. FQHCs can bill one unit of the daily rate –T1015 for MH and one H-code for SUD on the same date of service within the FQHC. FQHC must include rendering physician on claims.
- 7. ICF-A cannot bill with any of the above referenced H codes and may only bill using revenue code 0100