

PrimeWest Health Chemical Dependency (CD) Coding Structure - effective July 1, 2011



| Service Description  | Service Type               | Claim Type   | Type of Bill       | Type of Bill Description                                     | Revenue Code         | Revenue Code Description  | Unit | HCPCS code | Comments/HCPCS Code Description  |   |
|--|----------------------------|--------------|--------------------|--|----------------------|---|------|------------|--|---|
| <b>NON-HOSPITAL-BASED RESIDENTIAL TREATMENT FACILITY</b>   |                            |              |                    |  |                      |   |      |            |  |   |
| Non-Hospital-Based Inpatient Residential Program   | Room & Board               | UB04/837I    | 086X               | Special Facility - Residential Facility                      | 1002                 | Behavioral Health Accommodations: Residential Treatment - CD            | Day  | N/A        | Residentially Licensed CD Treatment Providers use Revenue Code 1002 (e.g., Rule 31 Licensed Facility, Children's Residential Facility with CD, Tribal CD Licensed Facility)  |   |
|  |                            |              |                    |  | 1003                 | Behavioral Health Accommodations: Supervised Living                     |      |            | Providers licensed to provide Room & Board only use Revenue Code 1003 (e.g., Board & Lodge, Supervised Living Facility, Foster Care)   |   |
| Non-Hospital-Based Inpatient Residential Program   | Treatment                  | UB04/837I    | 086X               | Special Facility – Residential Facility                      | 0944<br>0945<br>0949 | Drug Rehabilitation<br>Alcohol Rehabilitation<br>Other Therapy Services | Day  | N/A        | Only one Revenue Code (0944, 0945, or 0949) may be used for each stay  |   |
| <b>OUTPATIENT SERVICES</b><br>(CMS1500 or UB04 claim form submission is based on your facility's requirements) |                            |              |                    |  |                      |   |      |            |  |   |
| Outpatient Program   | Treatment                  | UB04/837I    | 089X<br>or<br>013X | Special Facility Other (089X) or Outpatient Hospital (013X)* | 0944<br>0945         | Drug Rehabilitation<br>Alcohol Rehabilitation                           | Hour | H2035      | <i>Individual</i> , alcohol and/or other drug treatment program, <b>per hour</b><br><br>*013X is for Acute Care Hospital outpatient programs <b>only</b>   |   |
|  |                            |              |                    |  | 089X<br>or<br>013X   | Special Facility Other (089X) or Outpatient Hospital (013X)*            |      |            | 0944<br>0945   | Drug Rehabilitation<br>Alcohol Rehabilitation   |
|  |                            | CMS1500/837P | N/A                | N/A  | N/A                  | N/A   | N/A  | Hour       | H2035  | <i>Individual</i> , alcohol and/or other drug treatment program, <b>per hour</b>                                      |
|  |                            |              | N/A                | N/A  | N/A                  | N/A   | N/A  | Hour       | H0005  | <i>Group</i> , alcohol and/or other drug treatment program, <b>per hour</b> (may be billed simultaneously with H2035) |
| Medication Assisted Therapy (MAT)<br>(methadone, buprenorphine, naltrexone, antabuse)                          | Treatment                  | UB04/837I    | 089X<br>or<br>013X | Special Facility Other (089X) or Outpatient Hospital (013X)* | 0944                 | Drug Rehabilitation   | Day  | H0020      | Alcohol and/or drug services; methadone administration and/or service (provision of the drug by a licensed program); <b>LIN segment to identify drug</b><br><br>*013X is for Acute Care Hospital outpatient programs <b>only</b> |   |
|  |                            | CMS1500/837P | N/A                | N/A  | N/A                  | N/A   | Day  | H0020      | Alcohol and/or drug services; methadone administration and/or service (provision of the drug by a licensed program); <b>LIN segment to identify drug</b>   |   |
| <b>ACUTE HOSPITAL INPATIENT</b>  |                            |              |                    |  |                      |   |      |            |  |   |
| Rule 24 Option   | Room & Board and Treatment | UB04/837I    | 011X               | Hospital - Inpatient   | 0101                 | All-inclusive Room & Board  | Day  | N/A        |  |   |