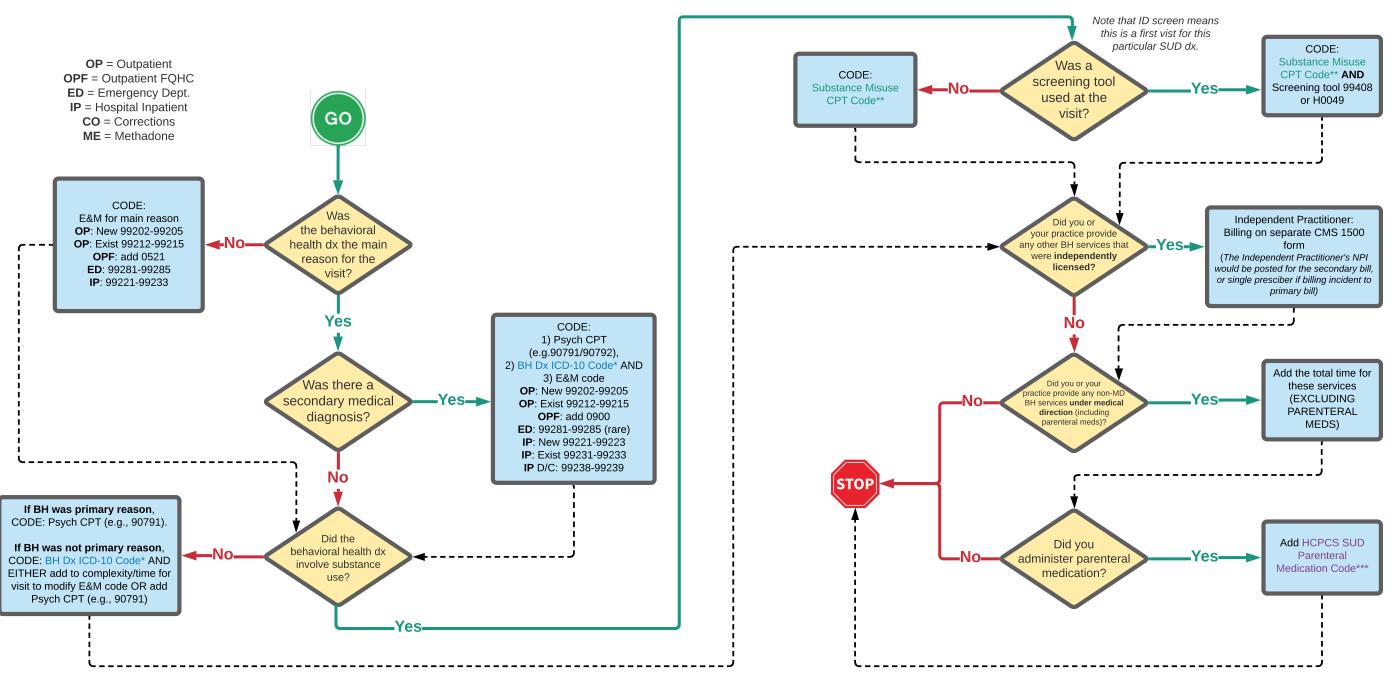
SUD Billing Algorithm

with Common Codes



*Common BH Dx ICD-10 Codes

for behavioral health dx seen with dual dx (MH/SUD) patients
Generalized Anxiety Disorder: F41.1
Major Depressive Disorder, Recurrent Moderate: F33.1
Bipolar Disorder: F31
PTSD: F43.11

Panic Disorder: F41

Pain Disorder with Psychological Factors: F45.42

https://www.aapc.com/codes/cpt-codes-range/

**Common Substance Misuse CPT Codes OP/ED/IP: MDQ, PHQ-9, PTSD: 96127 AUDIT, DAST, CRAFFT: 96160 OPF: add G0512

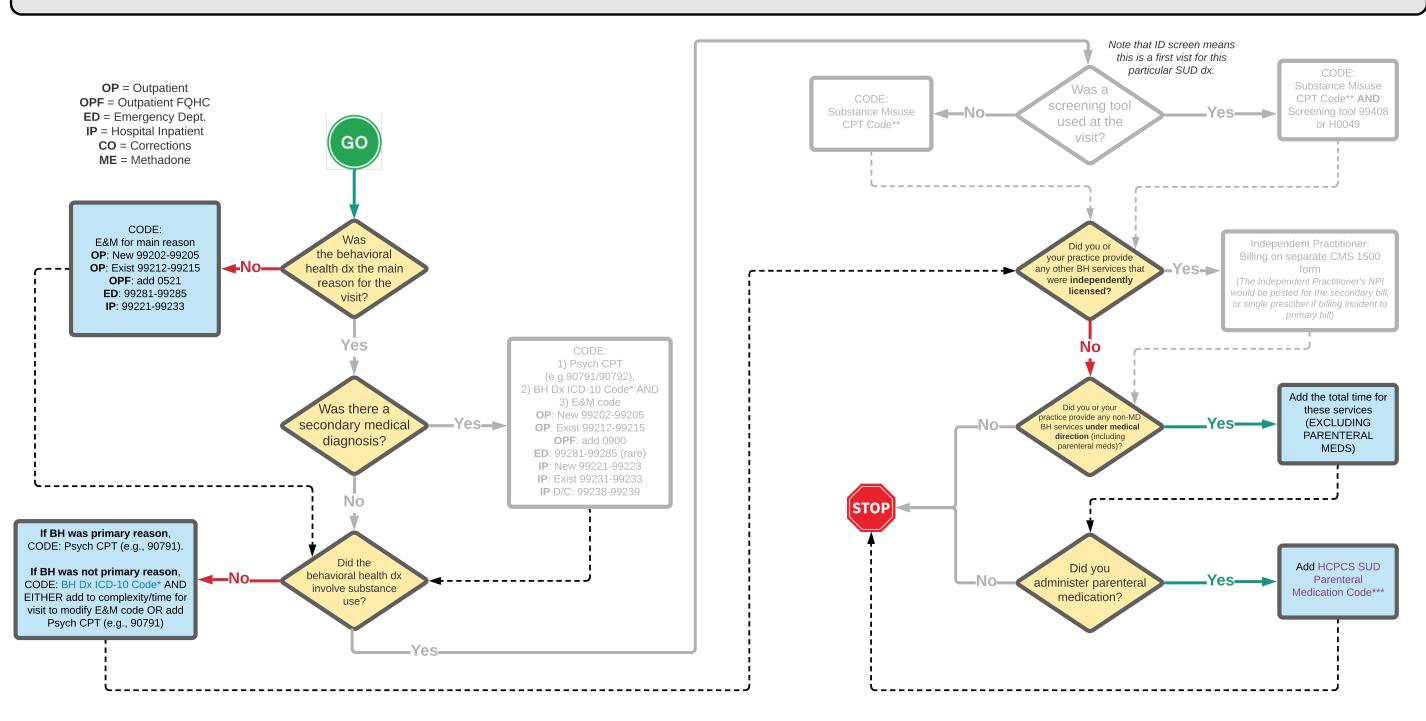
***Common HCPCS SUD Parenteral Medication Codes OP/OPF/ED/IP:

Buprenorphine implant: J0570
Buprenophine oral, 1mg: J0571
Buprenorphine/naloxone, oral, ≤ 3mg: J0572
Buprenorphine/naloxone, oral ≤ 6 mg: J0573
Buprenoxone/naloxone > 10mg: J0575
Naloxone, per 1mg: J2315

Edoardo's Case

Edoardo, "Trek" a 55 y/o Latino man reports he'd been using heroin for 30 years, in recovery for the past 6 years, and has had 2 EMS calls in the past 6 months due to his blood pressure. Trek reports panic attacks when riding the subway because he's worried about contracting COVID-19 with his health conditions. Trek has Hepatitis C untreated, and several healed scars on his arms and legs, from past infections when using. He reports he's not been able to take his BP or cholesterol meds, and has some highly pigmented spots on his face suggestive of Acanthosis Nigracans. He presents today at the Medicaid mobile van to get back on his medications. After diagnosing him with Panic Disorder, he learns relaxation techniques in a 15 minute appointment with a licensed case manager, he agrees to take a shot of hydroxyzine 25 mg for his panic attacks.

Billing Codes: E&M 99215, Panic disorder F41.0, Psych CPT 90792 (meds), 15 min for case management, HCPCS Code for Injection, hydroxyzine HCl, up to 25 mg J3410 (see marked path in algorithm below)



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PTSD: F43.11
Panic Disorder: F41.0

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**Common Substance Misuse CPT Codes
OP/ED/IP: MDQ, PHQ-9, PTSD: 96127
AUDIT, DAST, CRAFFT: 96160
OPF: add G0512

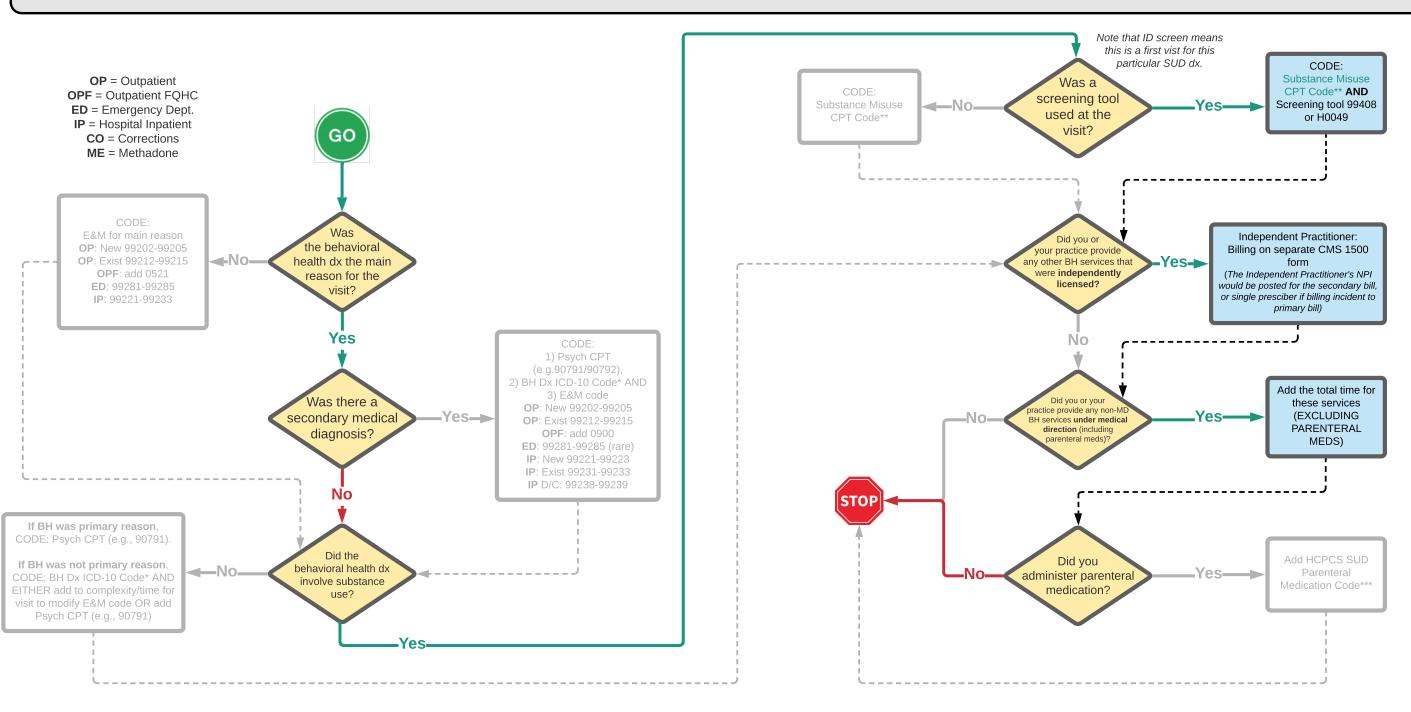
***<u>Common HCPCS SUD Parenteral Medication Codes</u> OP/OPF/ED/IP:

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Buprenoxone/naloxone > 10mg: J0575
Naloxone, per 1mg: J2315

Joseph's Case

Joseph, a 23 y/o African-American male was admitted through the Young adult program for poly substance use. He reports he had a 4 year history of recreational cannabis use, 3-4 times/week, 1-2 blunts/day. He reports during the assessment his mother died of COVID-19 in June, 2020. He tried to take care of her, but never saw her after calling 911, even after she died, which he keeps repeating. Since then he's had nightmares about her illness, hasn't been living at home since she died, "can't be there, too many memories," not being able to say goodbye or have a funeral, and has been using oxycontin pain pills to deal with his stress since July. He's taking Oxycontin 20mg 4-5 tabs daily, and 3-4x/week smoking heroin with fentanyl when he can't get OxyContin. He tells the Certified Recovery Specialist in a 30 minute appointment, that includes the DAST-10, he has N/V and sweats when not using daily, and wants to get help for his pain pills and dealing with his mother's death.

Billing Codes: Opioid Use Disorder F11.23, Substance misuse CPT code 96160, Screening tool H0049, 90791 on separate CMS 1500 form, 30 min incident to recovery support (see marked path in algorithm below)



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PTSD: F43.11
Panic Disorder: F41

Pain Disorder with Psychological Factors: F45.42

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**Common Substance Misuse CPT Codes
OP/ED/IP: MDQ, PHQ-9, PTSD: 96127
AUDIT, DAST, CRAFFT: 96160
OPF: add G0512

***Common HCPCS SUD Parenteral Medication Codes OP/OPF/ED/IP:

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Naloxone, per 1mg: J2315