

# Provider Memorandum

## HFS Managed Care Billing and Encounter Reporting Guidelines: SUPR Services

Molina uses the following standardized billing codes and claims submission processes established by the Illinois Department of Healthcare and Family Services (HFS). The billing and claims submission codes listed below are to be used for the reimbursement of services rendered by Division of Alcohol and Substance Abuse (SUPR) certified providers.

### Services Overview

The required SUPR services covered by Molina are listed below, along with the corresponding American Society of Addiction Medicine (ASAM) level(s) and general billing structure overview:

SUPR Services Overview			
Service Name	ASAM Level(s)	Claim Type	Unit
Admission and Discharge Assessment	All levels	837P	1/4 hour
Psychiatric Evaluation	All levels	837P	Event
Psychotropic Medication Monitoring	All levels	837P	1/4 hour
Medication Assisted Treatment (MAT)	All levels	837P	Event
Individual - Therapy/Counseling, Substance Abuse	Level I	837P	1/4 hour
Group - Therapy/Counseling, Substance Abuse	Level I	837P	1/4 hour
Individual - Intensive Outpatient, Substance Abuse	Level II	837P	1/4 hour
Group - Intensive Outpatient, Substance Abuse	Level II	837P	1/4 hour
Rehabilitation - Adult (age 21+)	Level III.5	837I	Per Diem
Rehabilitation - Child (age 20 or under)	Level III.5	837I	Per Diem
Adolescent Residential	Level III.5	837I	Per Diem
Detoxification	Level III.7D	837I	Per Diem

### General Claims Submission Requirements

1. SUPR services may only be rendered from a site that is certified by the Department of Human Services' Division of Alcohol and Substance Abuse (Provider Type 075). The NPI providers bill Molina under must correspond to a SUPR-certified site.
2. Providers of MAT services must also be certified and enrolled with HFS under the Methadone Clinic Subspecialty (Category of Service 106).
3. Providers offering both substance abuse and mental health services from the same site may not utilize the same NPI number for billing substance abuse and mental health services. Mental health services must be billed under a separate NPI number from substance abuse services.
4. All outpatient SUPR services are to be submitted on an 837P claim. All inpatient/residential SUPR services are to be submitted on an 837I claim, in line with the Claim Type listed in Table 1.
5. As with all other encounter data submissions, the HCP and K3 segments are required on all SUPR claims.
6. Molina requires providers to follow these guidelines on their historical SUPR claims.
7. Any valid SUPR services not listed but paid by Molina will be accepted but default priced at \$0 on encounters.

### Diagnosis Codes

A primary diagnosis code is required on all SUPR claims. Acceptable primary diagnosis codes for SUPR claims are listed below:

Acceptable Primary Diagnosis Codes for SUPR Services	
ICD-9	ICD-10
303-305.93	F10-F19.99

### Professional Claims

The following billing codes will be accepted for all outpatient SUPR services:

SUPR 837P Billing Codes					
Service Name	Billing Code	Modifier	Taxonomy	Unit	Place of Service
Admission and Discharge Assessment	H0002		261QR0405X, 276400000X	1/4 hour	03, 21, 22, 55, 57, 99
Psychiatric Evaluation	90791			Event	03, 21, 22, 55, 57, 99
Psychotropic Medication Monitoring	H2010			1/4 hour	03, 21, 22, 55, 57, 99
Individual - Therapy/Counseling, SA	H0004			1/4 hour	03, 22, 57, 99
Group - Therapy/Counseling, SA	H0005			1/4 hour	03, 22, 57, 99
Individual - Intensive Outpatient, SA	H0004	TF		1/4 hour	03, 22, 57, 99
Group - Intensive Outpatient, SA	H0005	TF		1/4 hour	03, 22, 57, 99
Medication Assisted Treatment (MAT)	H0020		261QM2800X	Event	11, 55

**Additional 837P professional claims submission requirements:**

1. MAT services are reimbursed on an event-based basis, with a maximum of one unit every seven calendar days.
2. MAT services must be submitted on a unique claim.

**Institutional Claims**

The following billing codes will be accepted for all institutional/residential SUPR services:

SUPR 837I Billing Codes					
Service Name	Revenue Code	Billing Code	Modifier	Taxonomy	Type of Bill
Rehabilitation - Adult (age 21+)	944 or 945	H0047		324500000X, 3245S0500X	086X, 089X
Rehabilitation - Child (age 20 or under)	944 or 945	H0047	HA		
Adolescent Residential	944 or 945	H2036			
Detoxification	944 or 945	H0010			

**Questions**

Providers with questions, may contact their provider network managers or email the Provider Network Management Department at [MHILProviderNetworkManagement@MolinaHealthcare.com](mailto:MHILProviderNetworkManagement@MolinaHealthcare.com).

Providers who need help identifying their assigned provider network manager may visit Molina's Service Area page at [www.molinahealthcare.com/providers/il/medicaid/contacts/Pages/servicearea.aspx](http://www.molinahealthcare.com/providers/il/medicaid/contacts/Pages/servicearea.aspx).