



MassHealth Payments for Hospitals Providing Substance Use Disorder Services [as of January 2025]

Through its annual contract with Hospitals, MassHealth has established several payment policies that allow providers to bill and receive payment for services provided to patients in emergency departments (EDs) and inpatient units (Med/Surg) who have substance use disorder (SUD) treatment needs.

Below is the overview of payment opportunities for substance use disorder services furnished to MassHealth Members in hospital settings. The policy descriptions included in this document are intended for educational purposes only¹. Rates of payment included in the document are current as of the time of publication. MassHealth's rates of payment are subject to change. Please refer directly to MassHealth's policy document for up to date rates of payment for services.

Behavioral Health Crisis Evaluation and Management Services

Hospitals can bill MassHealth for an additional payment if they provide crisis evaluation and management services to patients with a primary or co-occurring SUD in the ED or Med/Surg. A visit can be billed as crisis evaluation if the following service is provided:

- "the initial comprehensive assessments of risk, diagnosis, and treatment needs, the initial crisis interventions, the initial determination and coordination of appropriate disposition, and the required reporting and community collaboration"²

A visit can be billed as crisis management if the following service is provided:

- "ongoing behavioral health crisis interventions, ongoing determination and coordination of appropriate disposition, and ongoing reporting and community collaboration."²

Services can be provided by a variety of hospital staff that:

- must include a qualified behavioral health professional and complex behavioral health care clinician²
- can include additional staff such as "certified peer specialists, and recovery coaches, with appropriate training and experience to provide a welcoming, supportive, responsive, and recovery-oriented encounter"²

If Addiction Consult Service provided by hospitals meet these standards, they may be eligible to bill for crisis evaluation and management services.

For a crisis evaluation, the rate is \$695.29.² For ongoing crisis management, the rate is either \$325.64 (Level 1 payment) or \$653.64 (Level 2 payment) based on the patient's level of acuity and the services provided by the hospital.² Hospitals may bill for Level 2 payments when they provide crisis management services to patients who require a 1:1 or other specialized support due to acuity, aggression or other safety factors. If these additional services are not provided, hospitals may bill a Level 1 payment.

Hospitals may bill for these services up to once per day per member² and may not bill for crisis evaluation and ongoing crisis management on the same day for the same member.² These Crisis Evaluation and Management services constitute facility/technical charges and are intended to cover the additional resources

used by the hospital in treating these patients. Standard professional charging and billing for Psychiatrists and other Professional staff is not impacted by this policy.

Crisis Evaluation and Management Codes and Rates

Crisis Service	Code	Modifier	Rate	Billing Frequency
Crisis Evaluation	S9485		\$695.29	One Time
Crisis Management V1	S9485	V1	\$325.64	Daily
Crisis Management V2	S9485	V2	\$653.64	Daily

Recovery Support Navigator Services

Hospitals can bill MassHealth for “Recovery Support Navigator Services” if they provide care navigation to patients who are admitted to the ED or Med/Surg and “are identified as having signs or symptoms of an untreated substance use disorder”.² Care navigation services billed to MassHealth as “Recovery Support Navigator Services” must be provided by paraprofessionals with “specialized training in the essentials of substance use disorder or other addictive disorders and evidence-based techniques such as motivational interviewing”.³ Many types of staff can be considered Recovery Support Navigators for the purpose of billing MassHealth, provided they meet the above criteria.

Hospitals can bill MassHealth for “Recovery Support Navigator Services” when staff provide services that include supporting members in “accessing and navigating the SUD treatment system”³ as they transition to outpatient care through activities that can include care coordination, case management, and motivational support.³ Hospitals can bill MassHealth for activities that occur face-to-face or virtually with the member and for activities conducted on the member’s behalf when the member is not present, including making phone calls to treatment programs and contacting collateral contacts. The rate is \$17.09 per 15 minutes of services per member.⁴ There is no daily limit on units billed. The required billing code and modifier is H2015-HF.⁴

Peer Recovery Coach Services

Recovery Coaches are increasingly used in EDs and other medical settings to provide connection, support, engagement, and motivation to patients with substance use disorders. Unlike Recovery Support Navigators who are solely responsible for addressing logistical and navigation needs, Recovery Coaches are intended to establish a connection with the patient and ideally be positioned for an ongoing relationship with the patient when they transition to the community. The unique payment model for Recovery Coaches, the daily case rate, supports this goal. Below are the opportunities for hospitals to bill Recovery Coaches to MassHealth fee for service and MassHealth contracted health plans (i.e. MassHealth Managed Care Entities).

MassHealth Managed Care: Managed Care Entities, including Accountable Care Partnership Plans (ACPPs), Managed Care Organizations (MCOs), the MassHealth Behavioral Health Vendor, One Care Plans, Senior Care Organizations, and PACE Organizations “may establish a contractual relationship with any type of provider organization that meets credentialing requirements for the purpose of providing Peer Recovery Coach services.”⁴ This includes any type of community-based or healthcare provider including hospitals, provided

they meet all applicable requirements associated with Recovery Coaches. This is not the case for MassHealth fee for service.

MassHealth Fee For Service: Hospitals may not contract directly with MassHealth fee for service for Recovery Coaches, but can bill for Recovery Coaches employed by eligible outpatient programs who do in reach to the ED and Med/Surg. This includes Recovery Coaches working on Addiction Consult Teams provided they are employed by the outpatient department.

To encourage an ongoing relationship, providers can bill the Recovery Coach daily case rate of \$19.10⁶ each day a member remains on their case⁵. For example, if a Recovery Coach has 10 members on their case on a given day, they would bill \$191. This applies to Managed Care and Fee for Service. The required billing code and modifier is H2016-HM.

“A member is considered to be on the Peer Recovery Coach’s caseload if the Peer Recovery Coach has had documented contact with the member within the past 21 days.”⁵ Contact can include an in-person meeting or communication text, email, phone, or audio-visual communication where the member demonstrates engagement through responding.

Documentation that gives a brief description of the contact, including a brief description of the goals and outcomes must be available in the record.

Initiation of Medications for Opioid Use Disorder (MOUD) in Emergency Departments

Hospitals can bill MassHealth for initiation of MOUD in the ED. These services are intended for patients seeking treatment for any medical or behavioral health need and found to have “signs or symptoms of an opioid use disorder”.² These services can be provided by:

- health care practitioners with a “a standard DEA controlled medication registration that includes Schedule III authority”²
- or any “such healthcare provider is eligible to provide the evaluation and initiation of MOUD”¹ in accordance with the G2213 code

Hospitals may receive payment at “a non-facility fee rate of \$52.90 and a facility fee rate of \$49.41”.² This would apply for methadone induction under the 72 hour rule, injectables, and initiation of buprenorphine in the Emergency Department provided all requirements to bill the code are met.

Emergency Department-Dispensed Nasal Naloxone Packages

Hospitals can bill MassHealth to cover the cost of nasal naloxone packages that are dispensed to patients from their EDs, intended for patients being discharged to the community that present with opioid use. This payment is for cases when the patient is sent from the hospital with said packages, which contain two nasal spray inhalers that each contain 4 mg of naloxone.² This payment does not cover cases where the naloxone is administered in the ED, or when the patient is given a prescription to fill the naloxone.

The rate is \$125 per package.² This is a hospital charge, not a professional or pharmacy charge.

END NOTES

1. The policy descriptions included in this document are intended for educational purposes only and nothing contained herein should be construed to constitute legal advice or professional advice. For full details of MassHealth's requirements, please refer directly to MassHealth's actual regulatory and policy documents which are included in the "End Notes" section of the document. All information is provided in good faith, however Aligned Solutions makes no representation or warranty of any kind, express or implied, regarding the accuracy, adequacy, validity, reliability, availability or completeness of any information contained here. Rates of payment included in the document are current as of the time of publication. MassHealth's rates of payment are subject to change. Please refer directly to MassHealth's policy document for up to date rates of payment for services.

2. Commonwealth of Massachusetts Executive Office of Health and Human Services, Office of Medicaid. (2024). *Rate Year 2025 Acute Hospital Request for Applications*.

[LINK TO SOURCE](#)

3. Commonwealth of Massachusetts. (2023). *Substance Use Disorder Treatment Manual, Subchapter 4 Program Regulations (130 CMR 418.000)*.

[LINK TO SOURCE](#)

4. Commonwealth of Massachusetts Executive Office of Health and Human Services. (2023). 101 CMR 444: Rates for Certain Substance Use Disorder Services

[LINK TO SOURCE](#)

5. Commonwealth of Massachusetts Executive Office of Health and Human Services, Office of Medicaid. (2022). *Managed Care Entity Bulletin 82*. MassHealth.

[LINK TO SOURCE](#)

6. Commonwealth of Massachusetts Executive Office of Health and Human Services. (2024). *101 CMR 346.00: Rates for Certain Substance-Related and Addictive Disorders Programs*.

[LINK TO SOURCE](#)