



November 20, 2024

Nevada Medicaid Web Announcement 3487

Attention Provider Type 93 (Substance Use Treatment):

New Residential Substance Use Disorder (SUD) Bundled Rates for Level 3 Providers

The Centers for Medicare and Medicaid Services (CMS) has approved the bundled rates for residential substance use treatment services. The Division of Health Care Financing and Policy (DHCFP) is working on Medicaid Management Information System (MMIS) updates to upload the codes and rates and map them to the appropriate specialties. The MMIS updates are anticipated to be completed by the end of 2024.

The table below contains a list of the new codes with the corresponding American Society of Addiction Medicine (ASAM) level, the description, and the rate for each.

HCPCS Code	Description	Level	Approved Daily Rate
H0018	Behavioral health; short-term residential (nonhospital residential treatment program), without room and board, per diem	3.1	\$259.00
H0019	Behavioral health; long-term residential (nonmedical, nonacute care in a residential treatment program where the stay is typically longer than 30 days), without room and board, per diem.	3.5	\$341.94
H0011	Alcohol and/or drug services; acute detoxification (residential addiction program inpatient)	3.7WM	\$472.02