



## Substance Use Screenings & Treatment





People can develop substance use disorders (SUDs) from using various substances, like alcohol, tobacco, marijuana, opioids, and heroin. SUDs interfere with a person's physical health and their ability to meet life's responsibilities.

CMS expanded SUD coverage to ensure more people can access the care and help they need for recovery. We cover services for SUDs when reasonable and necessary, as these services are critical to our comprehensive approach to address our nation's opioid problem. As a provider, you can play a major role.

Together we can advance health equity and help eliminate health disparities for all minority and underserved groups. Find resources and more from the [CMS Office of Minority Health](#):

- [Health Equity Technical Assistance Program](#)
- [Disparities Impact Statement](#)

## Who Can Provide Substance Use Services?

Some Medicare Part B providers can furnish substance use services, including:

- Physicians (medical doctors or doctors of osteopathy)
- Clinical psychologists (CPs)
- Clinical social workers (CSWs)
- Certified alcohol and drug counselors
- Nurse practitioners (NPs)
- Clinical nurse specialists (CNSs)
- Physician assistants (PAs)
- Certified nurse-midwives (CNMs)
- Marriage and family therapists (MFTs)
- Mental health counselors (MHCs)

Physicians and certain non-physician practitioners (NPPs) have a provision under their benefit category that authorizes auxiliary personnel to provide ancillary services and supplies "[incident to](#)" their own personal professional services.

For patients with Medicare Advantage (MA) plans, we added a [new facility-specialty provider category](#) called "Outpatient Behavioral Health," which includes a range of behavioral health providers under 1 category.

## How Am I Paid?

Medicare pays:

- Physicians and CPs for services at 100% under the [Medicare Physician Fee Schedule \(PFS\)](#)
- CSWs, MFTs, and MHCs for services at 80% of the lesser of the actual charge or 75% of the amount a CP gets under the Medicare PFS
- NPs, CNSs, and PAs for services at 80% of the lesser of the actual charge or 85% of the amount a physician gets under the Medicare PFS
- CNMs for services at 80% of the lesser of the actual charge or 100% of the amount a physician gets under the Medicare PFS

## Alcohol Misuse Screenings

---

### What's Covered?

Part B covers alcohol misuse screening and counseling for adults who use alcohol but aren't dependent. If you detect misuse, we cover up to 4 brief, face-to-face counseling sessions per year if the patient is competent and alert during counseling. Don't do more than 1 intervention per day.

### Who's Eligible?

Adults (including pregnant women) are eligible if they:

- Misuse alcohol, but their levels or patterns of alcohol consumption don't meet criteria for alcohol dependence, which is defined as the patient having at least 3 of these:
  - Tolerance
  - Withdrawal symptoms
  - Impaired control
  - Preoccupation with acquiring or using alcohol
  - Persistent desire or unsuccessful efforts to quit
  - Sustained social, occupational, or recreational disability
  - Continued use despite negative consequences
- Are competent and alert during counseling

### How Can I Provide Effective Counseling Interventions?

Various tools are available to screen your patients for alcohol misuse. When completing a behavioral counseling intervention, follow the [U.S. Preventive Services Task Force's \(USPSTF's\) 5 A's Behavioral Counseling Framework](#):

- **Assess:** Ask about any behavioral health risks and factors affecting the patient's choice of behavior change goals or methods
- **Advise:** Give clear, specific, and personalized behavior change advice, including information about the patient's personal health harms and benefits
- **Agree:** Together, you and the patient select appropriate treatment goals and methods based on the patient's interest in, and willingness to, change their behavior
- **Assist:** Using behavior change techniques (self-help, counseling, or both), help the patient achieve agreed-on goals by acquiring the skills, confidence, and social and environmental supports for behavior change, along with other medical treatments when appropriate
- **Arrange:** Schedule follow-up contacts (in person or by phone) to provide ongoing help and support and to adjust the treatment plan as needed, including referring to a more intensive or specialized treatment

## Where Can I Provide These Services?

You can provide these services in an outpatient hospital or primary care setting, like your office.

Don't provide these services in these settings, as we don't consider them primary care settings:

- Emergency departments
- Inpatient hospital settings
- Ambulatory surgical centers
- Independent diagnostic testing facilities
- Skilled nursing facilities
- Inpatient rehabilitation facilities
- Hospices

## How Do I Bill?

Use these codes:

- G0442 — Annual alcohol misuse screening, 5 to 15 minutes
- G0443 — Brief face-to-face behavioral counseling for alcohol misuse, 15 minutes

[Medicare Preventive Services: Alcohol Misuse Screening & Counseling](#) has the most current billing and coding information.

## Where Can I Get More Information?

[National Coverage Determination \(NCD\) 210.8: Screening and Behavioral Counseling Interventions in Primary Care to Reduce Alcohol Misuse](#)

## Patient Resources

[SAMHSA: Alcohol](#)

## Counseling to Prevent Tobacco Use & Tobacco-Related Diseases

### What's Covered?

Part B covers up to 8 smoking and tobacco-use cessation counseling sessions per year by qualified physicians or other Medicare-recognized practitioners:

- You can provide minimal counseling (3 minutes or less) at each [Evaluation and Management \(E/M\)](#) visit.
- We cover 2 cessation attempts each year. Each attempt may include a maximum of 4 intermediate or intensive sessions.

## Who's Eligible?

Adults are eligible for counseling if they:

- Use tobacco or tobacco products regardless of whether they exhibit signs or symptoms of tobacco-related disease
- Are competent and alert during counseling

## How Can I Provide Effective Counseling?

You and your patient can decide together between intermediate and intensive cessation strategies for each attempt.

## Where Can I Provide These Services?

Provide counseling services in 1 of these:

- An outpatient setting
- A hospital if the patient is hospitalized for a reason other than tobacco cessation

## How Do I Bill?

Use these codes:

- 99406 — Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes
- 99407 — Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes

[Medicare Preventive Services: Counseling to Prevent Tobacco Use](#) has the most current billing and coding information.

## Where Can I Get More Information?

[National Coverage Determination \(NCD\) 210.4.1: Counseling to Prevent Tobacco Use](#)

## Patient Resources

- [Smokefree.gov](https://www.smokefree.gov)
- [CDC: Smoking and Tobacco Use](https://www.cdc.gov/tobacco)

## Opioid Use Disorder Screenings

---

### What's Covered?

Part B covers opioid use disorder (OUD) screenings by physicians and NPPs.

### Who's Eligible?

Adults are eligible for OUD screenings during:

- Their [initial preventive physical exam \(IPPE\)](#)
- Their [annual wellness visit \(AWV\)](#)
- A visit in a physician's office or hospital outpatient setting where you can provide screening, brief intervention, and referral to treatment ([SBIRT](#)) services

### What's Next?

If you diagnose a patient with an OUD, Medicare covers several treatment options. See [OUD Treatment](#).

### Where Can I Get More Information?

[Opioid Use Disorder Screening & Treatment](#)

## OUD Treatment: E/M Services

---

### What's Covered?

Part B covers E/M visits. These visits allow you to provide medication management to make sure your patients take medications, like buprenorphine and naltrexone, properly as part of their recovery process.

### Who's Eligible?

Adults are eligible for OUD treatment options, like E/M, if their physician or NPP diagnoses them with an OUD during a screening (above).

### Where Can I Get More Information?

[Evaluation and Management Services Guide](#)

## OUD Treatment: Office-Based SUD Treatment

### What's Covered?

Part B covers a monthly bundle of services, when reasonable and necessary, including:

- Overall management
- Substance use counseling
- Care coordination
- Additional counseling
- Individual and group psychotherapy
- Prescriptions for buprenorphine and naltrexone

### Where Can I Provide Treatment?

You can provide treatment in an office setting or in a patient's home (an acceptable telehealth substance use treatment or a co-occurring mental health disorder service site).

### How Can I Provide Effective Treatment?

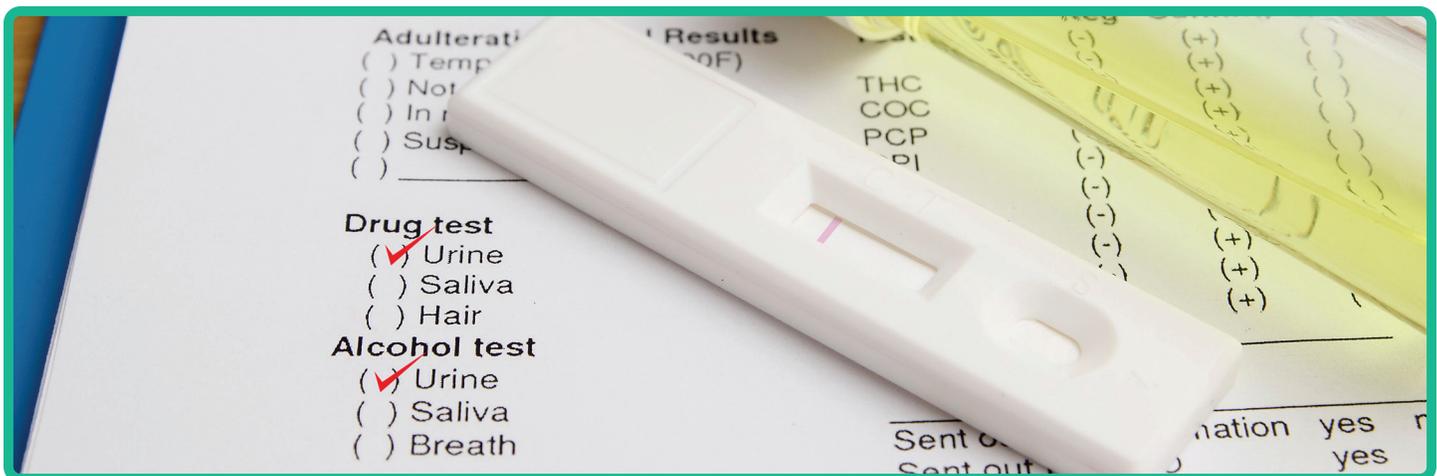
If you're treating your patient in your office but think they may benefit from a more comprehensive treatment, refer them to an opioid treatment program ([OTP](#)).

### Who's Eligible?

Adults are eligible for OUD treatment options, like office-based SUD treatment, if their physician or NPP diagnoses them with an OUD during a [screening](#).

### Where Can I Get More Information?

[Office-Based Substance Use Disorder \(SUD\) Treatment Billing](#)



## ODU Treatment: OTPs

---

### What's Covered?

OTPs provide [medication-assisted treatment \(MAT\)](#). Part B covers these [ODU treatment services](#):

- FDA-approved opioid agonist and antagonist MAT medications, which include these 3 currently approved drugs:
  - Buprenorphine
  - Methadone
  - Naltrexone
- Dispensing and administering MAT medications, if applicable
- Substance use counseling
- Individual and group therapy, including services provided through 2-way interactive audio-video communication technology
- Toxicology testing
- Intake activities
- Periodic assessments
- Intensive outpatient program services

### Who's Eligible?

Adults are eligible for ODU treatment options, like OTP treatment, if their physician or NPP diagnoses them with an ODU during a [screening](#).

### Where Can I Get More Information?

- [Opioid Treatment Programs \(OTPs\)](#)
- [Medicare Benefit Policy Manual, Chapter 17](#)

## ODU Treatment: Drugs to Treat Opioid Dependence

---

### What's Covered?

Medicare drug plans (Part D) cover drugs when medically necessary for treating OUD. Coverage isn't limited to single entity products; plans must include a combination of products.

### What Else Do I Need to Know?

- For newly Medicare-eligible patients, Part D plans must have a transition policy to prevent unintended interruptions of drugs for OUD treatment
- Part D doesn't cover methadone for treating opioid dependence as it can't be dispensed for OUD treatment with a prescription at a retail pharmacy

### Where Can I Get More Information?

[A Prescriber's Guide to Medicare Prescription Drug \(Part D\) Opioid Policies](#)

## Behavioral Health Integration Services

---

### What's Covered?

Part B covers behavioral health integration (BHI), which is a type of care management service. These services treat behavioral health disorders, which stem from destructive behaviors.

### Who's Eligible?

Adults can get BHI services if they have an [eligible condition](#), like an SUD.

### Where Can I Get More Information?

[Behavioral Health Integration Services](#)



## Principal Illness Navigation Services

---

### What's Covered?

You can provide principal illness navigation (PIN) services following an initiating E/M visit that addresses a serious high-risk condition, illness, or disease with these characteristics:

- One serious, high-risk condition expected to last at least 3 months that places the patient at significant risk of hospitalization, nursing home placement, acute exacerbation or decompensation, functional decline, or death.
- The condition requires developing, monitoring, or revising a disease-specific care plan and may require frequently adjusting the medication or treatment routine or substantial help from a caregiver. Examples include an SUD.

PIN services are important for all affected patients, but especially for those with socioeconomic disadvantages or barriers to care. They're critical when a patient is first undergoing treatment for an SUD condition due to the extensive need to access and coordinate care from several different specialties or service providers for different aspects of the diagnosis or treatment and, in some cases, related social services for rehabilitation and recovery programs for an SUD.

### Where Can I Get More Information?

[Health Equity Services in the 2024 Physician Fee Schedule Final Rule](#)

### Patient Resources

[Principal Illness Navigation Services](#)

## SBIRT Services

---

### What's Covered?

[SBIRT](#) is a comprehensive approach to provide effective strategies for intervention before patients need more extensive or specialized treatment. This approach differs from the primary focus of specialized treatment of patients with more severe substance use or those who meet the criteria for an SUD diagnosis.

SBIRT services aim to prevent the unhealthy consequences of alcohol and drug use among patients who may not reach the diagnostic level of an SUD and help patients with addiction enter and adhere to treatment.

SBIRT consists of 3 components:

1. **Structured Assessment (Medicare) or Screening (Medicaid):** Assessing or screening a patient for risky substance use behaviors using standardized assessment or screening tools
2. **Brief Intervention:** Engaging in a short conversation with a patient showing risky substance use behaviors, providing feedback, motivation, and advice
3. **Referral to Treatment:** Providing a referral to brief therapy or specialty care treatment to patients whose assessment or screening shows they need it

## Who's Eligible?

Adults are eligible for SBIRT if they have nondependent substance use and may not be seeking help for a substance use problem, but whose alcohol or drug use may cause or complicate their ability to successfully handle health, work, or family issues.

## Where Can I Provide These Services?

You can provide SBIRT in an outpatient hospital or primary care setting if you're a physician or an NPP.

## Where Can I Get More Information?

[SBIRT Services](#)

## Resources

---

- [Chemical Aversion Therapy for Treatment of Alcoholism](#)
- [Inpatient & Outpatient Hospital Services for Treatment of Alcoholism](#)
- [Intensive Outpatient Services](#)
- [Partial Hospitalization Services](#)
- [Treatment of Alcoholism and Drug Abuse in a Freestanding Clinic](#)
- [Treatment of Drug Abuse \(Chemical Dependency\)](#)
- [Withdrawal Treatments for Narcotic Addictions](#)

View the [Medicare Learning Network® Content Disclaimer and Department of Health & Human Services Disclosure](#).

The Medicare Learning Network®, MLN Connects®, and MLN Matters® are registered trademarks of the U.S. Department of Health & Human Services (HHS).