



**U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services**

REPORT TO CONGRESS

**Outreach & Reporting on Opioid Use Disorder Treatment
Services Furnished by Opioid Treatment Programs**

October 2024



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Executive Summary

The Centers for Medicare & Medicaid Services (CMS) serves the public as a trusted partner and steward, dedicated to advancing health equity, expanding coverage, and improving health outcomes. As the administrator of the Medicare program, CMS has a commitment to support health care providers and suppliers (collectively referred to as providers) who ensure individuals and families receive the highest quality care and services. One way we do this is by developing educational products for the Medicare Fee-for-Service (FFS) provider community. Starting in 2023, we created a robust provider outreach campaign about Medicare payment for opioid use disorder (OUD) treatment services furnished by opioid treatment programs (OTPs). Raising awareness of Medicare beneficiary eligibility and practitioner billing for these important services may lead to increased screening and improved access to OUD treatment for Medicare beneficiaries. We also conducted outreach to Medicare beneficiaries with respect to OUD treatment services furnished by an OTP to inform beneficiaries of the eligibility requirements to receive OTP services.

Section 4129(a)(1) of the Consolidated Appropriations Act, 2023 (CAA, 2023) (Pub. L. 117–328) requires the Secretary of Health and Human Services (hereinafter the Secretary) to conduct outreach to physicians and appropriate non-physician practitioners participating under the Medicare program with respect to OUD treatment services furnished by an OTP. The outreach was required to include a comprehensive, one-time education initiative to inform physicians and non-physician practitioners (hereinafter providers) of the inclusion of such services as a covered benefit under the Medicare program, including describing the requirements for billing and the requirements for beneficiary eligibility for such services. Additionally, section 4129(a)(2) of the CAA, 2023 requires the Secretary to conduct outreach to Medicare beneficiaries with respect to OUD treatment services furnished by an OTP including a comprehensive, one-time education initiative informing such beneficiaries about the eligibility requirements to receive such services.

Section 4129(b)(1) of the CAA, 2023 requires the Secretary to submit a report to the Committee on Ways and Means, the Committee on Energy and Commerce of the House of Representatives, as well as the Committee on Finance of the Senate, on the outreach to providers and beneficiaries, including a description of the methods used for such outreach, no later than one year after the date of the completion of the education initiatives. This Report provides information on the educational content and our methods to the outreach campaigns for both providers and beneficiaries. For providers, we tailored multi-faceted national and local distribution methods to physicians and non-physician practitioners eligible to provide OUD screening and treatment services to Medicare beneficiaries. For beneficiaries, we updated key resources accessible to beneficiaries and partnered with organizations to educate beneficiaries.

Additionally, section 4129(b)(2) of the CAA, 2023 requires the Secretary to submit a report to the Committee on Ways and Means and the Committee on Energy and Commerce of the House of Representatives, as well as the Committee on Finance of the Senate, not later than 18 months after the date of the completion of the education initiatives, and two years thereafter, on the number of Medicare beneficiaries who were furnished OUD treatment services by an OTP for which Medicare payment was made during the preceding year. This report meets the requirements of section 4129(b)(1) of the CAA, 2023 and provides utilization data (Appendix 5) meeting the within 18-month reporting requirement in section 4129(b)(2) of the CAA, 2023. CMS will update this report's utilization data two years thereafter as required by section 4129(b)(2) of the CAA, 2023.

This Report summarizes our approach to implementing the outreach campaigns required by section 4129 of the CAA, 2023 and details the methods used, including:

- Creating research-based educational content for providers, including:
 - Opioid Use Disorder Screening & Treatment webpage (Appendix 1)
 - Letter for direct mailing to certain health care providers (Appendix 2)
 - Email messaging series (Appendix 3)
- Collaborating with Medicare Administrative Contractors and CMS Regional Offices for local outreach to providers
- Creating a beneficiary outreach campaign (Appendix 4)

We provide additional information on available utilization rates during calendar year (CY) 2023 (as of May 31, 2024) (Appendix 5).

Background

We develop and implement outreach campaigns for new initiatives or changes to the Medicare FFS program to ensure health care providers have the information they need to:

- Provide quality health care services to Medicare beneficiaries;
- Correctly file claims for their services; and
- Stay informed about program changes.

Section 2005 of the Substance Use-Disorder Prevention That Promotes Opioid Recovery And Treatment For Patients and Communities Act (SUPPORT Act) amended section 1861 of the Social Security Act (the Act) by adding a new subsection (jjj)(2) to define an OTP as an entity meeting the definition of OTP in 42 CFR 8.2 or any successor regulation (that is, a program or practitioner engaged in opioid treatment of individuals with medications approved by the Food and Drug Administration under section 505 of the Federal Food, Drug, and Cosmetic Act (21 USC 355) for use in the treatment of opioid use disorder) registered under 21 U.S.C. 823(h)(1)), that meets the additional requirements set forth in subparagraphs (A) through (D) of section 1861(jjj)(2) of the Act. The SUPPORT Act also added section 1861(s)(2)(HH) which established coverage for OUD treatment services, section 1861(jjj), which specifies the definition of OUD treatment services and services, and section 1834(w), which discusses the bundled payment methodology.

CMS established payment policies for OUD treatment services at OTPs in the CY 2020 Physician Fee Schedule final rule (84 FR 62630 through 62677, 84 FR 62919 through 62926) and revised payment policies for these services in subsequent final rules. OTPs provide medications for OUD (MOUD).

Under the opioid treatment program benefit, Medicare covers:

- U.S. FDA-approved opioid agonist and antagonist MOUD medications
- Dispensing and administering MOUD medications, if applicable
- Substance use counseling
- Individual and group therapy
- Toxicology testing
- Intake activities
- Periodic assessments
- Intensive outpatient program (IOP) services beginning January 1, 2024

Medicare pays enrolled OTPs bundled payments for OUD treatment based on weekly episodes of care. The bundled payment rates are calculated by combining the drug component and the non-drug components. The CY 2024 Hospital Outpatient Prospective Payment System and Ambulatory Surgical

Center Payment System final rule (88 FR 81845 through 81858) established a weekly payment adjustment for IOP services provided by an OTP for OUD treatment.

Introduction

Medicare pays for OUD screenings performed by physicians and non-physician practitioners in the following ways:

- As a required element of the initial preventive physical exam.
- As a required element of annual wellness visits.
- As screening, brief intervention, and referral to treatment (SBIRT) services during a physician office or outpatient hospital setting visit.¹ SBIRT is a comprehensive, integrated, public health approach to the delivery of early intervention and treatment services for persons with substance use disorders (SUDs), as well as those who are at risk of developing these disorders.

If a provider diagnoses a beneficiary with OUD, Medicare pays for certain treatment services, including:

- Evaluation and management visits for medication management:² Providers can bill for visits involving services such as medication management to assess and adjust beneficiaries' treatment using medications (like buprenorphine) as part of their recovery process;
- Office-based SUD treatment services:³ Medicare pays for a monthly bundle of services (such as for beneficiaries who are prescribed buprenorphine or naltrexone in the office setting) for the treatment of OUD or other substance use disorders; and
- OTP services: Provision of medications for OUD, includes methadone, buprenorphine, naloxone, and naltrexone, as well as a range of other services including individual and group therapy, substance use counseling, and toxicology testing, for beneficiaries diagnosed with OUD.

CMS maintains several resources^{4, 5, 6, 7} for SUD treatment for providers and for opioid treatment programs. We realized that physician and non-physician practitioners need more awareness about the screening and treatment options they can provide to Medicare FFS beneficiaries, including referrals to OTPs. To fill this information gap, we developed OUD screening and treatment educational content (Appendix 1) on coverage, eligibility, and billing for these services. Once we developed educational content specific to these services, we began the campaign with a direct mailing letter (Appendix 2) and series of email messages (Appendix 3) to Medicare FFS physicians and non-physician practitioners. Through this initial effort, we targeted providers and gave them information and a way to easily access

¹ Depending on the duration of the service, providers may bill G2011 (5-14 minutes), G0396 (15-30 minutes), or G0397 (greater than 30 minutes)

² CPT codes 99202-99499 represent services that involve the evaluation and management of a beneficiary's health. CPT codes, descriptions, and other data only are copyright 2023 American Medical Association. All Rights Reserved. Applicable FARS/HHSARS apply.

³ HCPCS codes G2086–G2088 allow for billing of a group of services for the treatment of substance use disorders in the office setting

⁴ "Office-Based Substance Use Disorder (SUD) Treatment Billing." *CMS webpage*. <https://www.cms.gov/medicare/payment/opioid-treatment-programs-otp/billing-payment/office-based-substance-use-disorder-sud-treatment-billing>. Updated September 2023.

⁵ "SBIRT Services." *Medicare Learning Network Publication*. https://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnproducts/downloads/sbirt_factsheet_icn904084.pdf. Updated February 2023.

⁶ "Medicare & Mental Health Coverage." *Medicare Learning Network Publication*. <https://www.cms.gov/files/document/mln1986542-medicare-mental-health-coverage.pdf>. Updated January 2024.

⁷ "Opioid Treatment Programs." *CMS Webpage*. <https://www.cms.gov/medicare/payment/opioid-treatment-program>. Updated December 2023.

our new materials. We further amplified our outreach using national and local distribution channels. We monitored provider inquiries to Medicare Administrative Contractor (MAC) contact centers to identify opportunities for further education and outreach.

Approach

We began this outreach campaign with an environmental scan and meetings with our internal subject matter experts. Through this effort we identified several OUD resources. The environmental scan also revealed opportunities for us to create educational content focused on explaining to providers how they can bill for OUD screening and treatment options.

Our outreach campaign goal was to educate physicians and non-physician practitioners on OUD screening and treatment options, including:

- Coverage
- Billing requirements
- Medicare beneficiary eligibility

We identified certain health care providers as our target audience, including:

- Physicians
- Non-physician practitioners eligible to provide SBIRT services, such as:
 - Physician Assistants
 - Nurse Practitioners
 - Clinical Nurse Specialists
 - Clinical Psychologists
 - Clinical Social Workers
 - Certified Nurse-Midwives
 - Independently Practicing Psychologists
 - Marriage and Family Therapists
 - Mental Health Counselors

Keeping our goal and target audience in mind, we developed key messages as the foundation for all content we created for the campaign:

- Medicare pays for OUD screenings performed by physicians and non-physician practitioners:
 - During the annual wellness visit and initial preventive physical exam
 - As part of SBIRT services
- If a beneficiary is diagnosed with OUD, Medicare pays for certain treatment services, including:
 - Evaluation and management visits for medication management
 - Office-based SUD treatment services
 - OTP services
- Directing providers to a webpage with actionable information about coverage, coding, and billing

Creating Research-Based Educational Content

After reviewing relevant websites and publications to determine key messages that resonated with our target audience, we worked with our policy staff to understand additional information gaps. We then created the Opioid Use Disorder Screenings & Treatment webpage (Appendix 1). The webpage includes plain language information about coverage, eligibility, and billing for these services. We regularly update

the webpage to meet health care provider needs.

We then used our results to create additional resources that were easy for health care providers to understand, including:

- Direct mailing letter to eligible providers (Appendix 2)
- Email messaging to all providers receiving the MLN Connects® newsletter (Appendix 3)

Direct Mailing Letter to Providers

We created a letter (Appendix 2) for healthcare providers with information on three behavioral health services Medicare pays for that may improve outcomes for Medicare beneficiaries:

1. Behavioral health integration services
2. Psychotherapy for crisis
3. OUD screening and treatment

The letter also provided links to all our online resources. Our MACs mailed almost 300,000 letters targeting all active physicians (MD and DO) and non-physician practitioners. To ensure group practices with multiple providers didn't get the same information numerous times, we sent one letter to a single group practice. By casting this wide net, we reached our target audience quickly and in a direct manner.

Email Messaging Series

To further our reach, we used our MLN Connects® newsletter to share this educational content (Appendix 3) via our national and local distribution channels. Our weekly MLN Connects® newsletter reaches over 1.5 million subscribers between direct subscribers (700,000+) and MAC listserv subscribers (800,000+). We featured 7 different messages in the newsletter over 13 months.

We regularly partner with 227 national health care organizations representing over 5.8 million members, including provider associations, federations, and societies for health care professionals (including providers and support staff like billers, coders, and office managers). Partnered organizations agree to share relevant content from our MLN Connects® newsletter with their members. In addition to sharing content in the newsletter with all our partners, we asked 106 physician and non-physician practitioner partner associations to share our letter. We regularly create messages in response to external recommendations (for example, the Office of the Inspector General and the Office of the General Counsel) to address any compliance or billing issues. We included two such messages^{8,9} related to OTPs in the MLN Connects® newsletter during this outreach campaign.

Leveraging Medicare Administrative Contractors

The MACs are CMS contractors that process Medicare Part A and Part B claims on a jurisdiction-by-jurisdiction basis. Among other functions, MACs also:

- Answer provider inquiries; and
- Educate providers about the Medicare program.

⁸ "Opioid Treatment Program: Bill Correctly for Opioid Use Disorder Treatment Services". MLN Connects® Newsletter. <https://www.cms.gov/training-education/medicare-learning-network/newsletter/2024-01-25-mlnc>. Published January 2024.

⁹ "Opioid Treatment Program: Bill Correctly for Opioid Use Disorder Treatment Services" MLN Connects® Newsletter. <https://www.cms.gov/training-education/medicare-learning-network/newsletter/2024-04-25-mlnc>. Published April 2024.

By communicating regularly with providers, MACs are a trusted resource. We routinely work with the MACs on outreach campaigns to use their various methods for more direct provider interaction within each jurisdiction. Each MAC has a Provider Outreach & Education program that informs providers about the Medicare program, including new or changing policies and how to bill correctly.

As previously mentioned, the MACs mailed our letter, ensuring direct and broad outreach. The MACs also amplified our OUD screening and treatment content at the local level by:

- Speaking about OUD treatment services at routine meetings and other outreach events;
- Sending our educational materials and messages through their electronic mailing lists;
- Posting relevant content to their websites; and
- Tracking inquiries from providers and using our materials to respond to their questions.

Collaborating with CMS Regional Offices

The Office of Program Operations and Local Engagement (OPOLE) within CMS is responsible for the regionally based Medicare operations work, local oversight of qualified health plans on the Federally-Facilitated Exchange, and external affairs. OPOLE staff provide the regional and grassroots viewpoint for the Medicare program. OPOLE's expertise helps CMS better understand provider information needs and questions.

OPOLE is taking steps to increase outreach to providers and OTPs to encourage accredited providers, certified by the Substance Abuse and Mental Health Services Administration (SAMHSA), to enroll in Medicare or Medicaid. For several years, OPOLE has engaged in outreach about OUD by educating Medicare beneficiaries about addiction and the proper and improper use of opioids. OPOLE also uses its expansive reach through hundreds of community partners to increase beneficiary awareness about Medicare coverage for OUD treatment.

Beneficiary Outreach Campaign

Section 4129(a)(2) of the CAA, 2023 also requires a Medicare beneficiary outreach campaign to educate beneficiaries about OUD treatment services furnished by OTPs and the eligibility requirements for these services. We engaged our Office of Communications to conduct the beneficiary education campaign using the following strategies to reach this audience (Appendix 4):

- Medicare.gov webpages
- Medicare & You Handbook content
- Partner with organizations to conduct education and outreach
- Social media outreach and email marketing

Medicare.gov is the key resource for people with Medicare and their caregivers. Medicare.gov includes an OUD treatment services webpage and a fact sheet that provides additional information for Medicare Advantage and beneficiaries who are dually eligible for Medicare and Medicaid. Eligibility information is also mentioned on the Mental Health & Substance Use Disorder Services webpage, which was updated most recently in May 2024.

In September 2023, we sent an updated Medicare & You Handbook to 45 million households and about 300,000 Handbooks per month to new program enrollees. The Handbook educates people with Medicare about their benefits including coverage, eligibility, costs, and changes from the previous year. We began including content on OUD treatment services, including OTPs, in 2021 and continued to include this

content through the most recent version at the time of this Report.

Partner organizations work with us to educate beneficiaries about a variety of topics. We included information about OTPs in the National Medicare Education Program in June 2024 and the CMS National Training Program. CMS works with 2,000 national organizations and more than 10,000 local and state organizations. We also sent emails with links to resources to over 1 million subscribers from partner organizations.

Medicare maintains a robust social media presence and an email list of more than 17 million subscribers. During the campaign, we periodically posted on Facebook and LinkedIn about Medicare coverage for OUD treatment services and sent beneficiary emails with links to the content on Medicare.gov to beneficiaries who subscribed to Medicare emails.

Next Steps

Our commitment to maintaining awareness of OUD screening and treatment services continues. CMS:

- Continues to include messages reminding providers about OUD screening and treatment services and the billing codes in the MLN Connects[®] newsletter on a regular basis;
- Updates webpage content regularly; and
- Continues to monitor and track provider inquiries.

Conclusion

CMS appreciates the importance of this required outreach and education campaign, and we developed a robust response encompassing national and local tactics to target providers and beneficiaries. We identified information gaps and created content and resources to give providers the information they need to promote and properly bill for these services. Raising awareness about Medicare eligibility requirements and billing for these important services may lead to increased screening and improved access to OUD treatment for Medicare beneficiaries. Moving forward, CMS will continue to update our resources as necessary and share this information with eligible Medicare providers using our national and local distribution channels.

In accordance with section 4129(b)(2) of the CAA, 2023, in two years, CMS will provide an update to Appendix 5 of this Report on the number of Medicare beneficiaries who, during the preceding year, were furnished OUD treatment services by an OTP.

Appendix 1: Opioid Use Disorder Screening & Treatment Webpage



Fee schedules

- Physician Fee Schedule
 - Look-Up Tool
 - Advanced Practice Nonphysician Practitioners
 - Anesthesiologists Center
 - Audiology Services
 - Care Management
 - Cognitive Assessment
 - CT Modifier Reduction List
 - Diagnostic Services by Physical Therapists
 - Evaluation & Management Visits
 - Global surgery data collection
 - Marriage and Family Therapists & Mental Health Counselors
 - Medicare PFS Preventive Services
 - Opioid Use Disorder Screening & Treatment**
 - Psychological and Neuropsychological Tests
 - Psychotherapy for Crisis
 - Skin Substitutes
 - Federal Regulation Notices
 - Carrier Specific Files
 - Medicare PFS Locality Configuration
 - Medicare PFS Locality Configuration and Studies
 - Medicare PFS Locality Key
 - National Payment Amount File
 - PFS Relative Value Files
 - Practice Expense Data & Methods
- DMEPOS Fee Schedule
- DMEPOS Competitive Bidding
- Ambulance Fee Schedule
- Clinical Laboratory Fee Schedule

Opioid Use Disorder Screening & Treatment

Medicare pays for opioid use disorder (OUD) screenings performed by physicians and non-physician practitioners. If you diagnose your patient with OUD, we also pay for treatment services.

When Can I Screen My Patients for OUD?

- During required screening elements of Medicare's [Initial Preventive Physical Exam \(IPPE\)](#) and [Annual Wellness Visit \(AWV\)](#).
- During visits in physicians' offices and outpatient hospital settings to screen people who may not seek substance use help. In these cases, you can offer [Screening, Brief Intervention, & Referral to Treatment \(SBIRT\)](#) treatment services.

How Do I Bill for These Screenings?

Service	HCPCS Code	Things to Know
IPPE	G0402	You're required to screen for OUD as part of the IPPE
Initial AWV	G0438	You're required to screen for OUD as part of the AWV
Subsequent AWVs	G0439	You're required to screen for OUD as part of subsequent AWVs
SBIRT	G2011	Alcohol and/or substance (other than tobacco) misuse structured assessment (e.g., audit, dast), and brief intervention 5-14 minutes
SBIRT	G0396	Alcohol and/or substance (other than tobacco) misuse structured assessment (e.g., audit, dast), and brief intervention 15 to 30 minutes
SBIRT	G0397	Alcohol and/or substance (other than tobacco) misuse structured assessment (e.g., audit, dast), and intervention, greater than 30 minutes

If I Diagnose a Patient with OUD, What are the Treatment Options?

We pay for certain treatment services:

- Evaluation & Management (E/M) visits for medication management
- Office-based Substance Use Disorder (SUD) treatment services
- Opioid Treatment Program (OTP) (a more comprehensive treatment)

What's an E/M Visit for Medication Management?

CPT codes 99202-99499 represent visits and services that involve evaluating and managing patient health. You can use E/M visits to provide medication management to make sure patients take medications properly as part of their recovery process. Medications prescribed for patients with OUD in the office setting could include buprenorphine and naltrexone. If your patient has Medicare Part D coverage, their plan may cover these medications.

Learn more about E/M visits in the [Evaluation and Management Services Guide \(PDF\)](#).

▼ [What are Office-Based SUD Treatment Services?](#)

Office-based SUD treatment services are a way for you to bill for a group of services in the office setting. We cover a monthly bundle of services (for patients who are prescribed buprenorphine or naltrexone in the office setting) for the treatment of OUD or other SUDs. Visit [Office-Based Substance Use Disorder \(SUD\) Treatment Billing](#) for more information.

▼ [What are Office-Based SUD Treatment Services?](#)

Office-based SUD treatment services are a way for you to bill for a group of services in the office setting. We cover a monthly bundle of services (for patients who are prescribed buprenorphine or naltrexone in the office setting) for the treatment of OUD or other SUDs. Visit [Office-Based Substance Use Disorder \(SUD\) Treatment Billing](#) for more information.

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

▼ [What are OTPs?](#)

[OTPs](#) provide medications for opioid use disorder (MOUD), including methadone, buprenorphine, and naltrexone, for patients diagnosed with OUD. OTPs must be SAMHSA certified and accredited by an independent, SAMHSA-approved accrediting body. Consider referring your patient to an OTP if this specific MOUD is helpful to their recovery.

Part B pays for MOUD provided by an OTP. There's no copayment for OTP services for Medicare patients, but the Part B deductible applies. Patients with Part B and an OUD diagnosis are eligible to get OUD treatment services at an OTP. Find a list of [Medicare-enrolled OTPs](#).

Read our [letter](#) to physicians and non-physician practitioners to learn more about the behavioral health services Medicare pays for, and help improve the health of your patients.



Dear Physicians and Non-Physician Practitioners,

The Centers for Medicare & Medicaid Services (CMS) wants to let you know about 3 behavioral health services Medicare will pay for that may improve outcomes for your Medicare patients:

1. Behavioral Health Integration (BHI) Services
2. Psychotherapy for Crisis
3. Opioid Use Disorder (OUD) Screening & Treatment

Behavioral Health Integration Services

BHI is a model of care that incorporates behavioral health care into other care, like primary care, to improve mental, behavioral, or psychiatric health for many patients. In addition to payment for evaluation and management services, Medicare covers 2 types of BHI services:

1. Psychiatric Collaborative Care Model (CoCM): To bill, use CPT codes 99492–99494 and HCPCS code G2214. A team of 3 individuals delivers CoCM: a behavioral health care manager, psychiatric consultant, and treating (billing) practitioner. This model enhances primary care by adding 2 key services to the primary care team:
 1. Care management support for patients getting behavioral health treatment
 2. Regular psychiatric inter-specialty consultation
2. General BHI services using models of care other than CoCM: To bill, use CPT code 99484 and HCPCS code G0323 to account for monthly care integration. General BHI includes service elements like:
 - Systemic assessment and monitoring
 - Care plan revision for patients whose condition isn't improving adequately
 - Continuous relationship with an appointed care team member

We make separate payment for services you supply over a calendar month service period. Beginning in CY 2023, general BHI services can also be furnished by clinical psychologists or clinical social workers whose services are limited to the diagnosis and treatment of mental illness.

Your patients may be eligible for BHI services. Eligible conditions include:

- Mental health
- Behavioral health, including substance use disorder (SUD)
- Psychiatric

These BHI services may be particularly helpful for patients who aren't improving under other models of care.

Read the booklet (<https://www.cms.gov/files/document/mln909432-behavioral-health-integration-services.pdf>) to learn more.

Psychotherapy for Crisis

Psychotherapy for crisis services are appropriate for patients in high distress with life-threatening, complex problems that require immediate attention. These services can help reduce a patient's mental health crisis (including SUD) through:

- Urgent assessment and history of a crisis state
- Mental status exam

- Disposition (or what happens next for the patient)

Physicians and non-physician practitioners whose scope of covered Medicare services includes the diagnosis and treatment of mental illnesses can offer these services. This includes clinical psychologists, clinical social workers, clinical nurse specialists, nurse practitioners, physician assistants, and certified nurse midwives. Medicare pays for these services under the Physician Fee Schedule.

Visit and bookmark <https://www.cms.gov/medicare/payment/fee-schedules/physician-fee-schedule/psychotherapy-crisis> for the most recent information including increased payment for Psychotherapy for crisis equal to 150% of the fee schedule amount for services furnished in non-facility sites of service, other than a physician or practitioner's office, effective January 1, 2024, as provided in the Consolidated Appropriations Act, 2023.

Opioid Use Disorder Screening & Treatment

Medicare pays OUD screenings performed by physicians and non-physician practitioners.

- Screening for OUD is a required element of Medicare's Initial Preventive Physical Exam and Annual Wellness Visit.
- During visits in physicians' offices and outpatient hospital settings, Medicare will pay for Screening, Brief Intervention, & Referral to Treatment (SBIRT) treatment services. This is an evidence-based, early intervention approach for people with non-dependent substance use before they need more specialized treatment. Depending on the duration of the service, you may bill G2011 (5-14 minutes), G0396 (15-30 minutes), or G0397 (greater than 30 minutes).

If you diagnose your patient with OUD, Medicare pays for certain treatment services, including:

- Evaluation & Management (E/M) visits for medication management
 - CPT codes 99202-99499 represent visits and services that involve evaluating and managing patient health. You can use E/M visits to provide medication management to make sure patients take medications (like buprenorphine) properly as part of their recovery process.
- Office-based SUD treatment services
 - Office-based SUD treatment services, HCPCS codes G2086-G2088, are a way for you to bill for a group of services for the treatment of SUDs in the office setting. Medicare pays for a monthly bundle of services (for patients who are prescribed buprenorphine or naltrexone in the office setting) for the treatment of OUD or other SUDs.
- Opioid Treatment Program (OTP)
 - OTPs provide medications for opioid use disorder (MOUD), including methadone, buprenorphine, and naltrexone, as well as a range of other services including individual and group therapy, substance use counseling, and toxicology testing, for patients diagnosed with OUD. Consider referring your patient to an OTP if this specific MOUD is helpful to their recovery.

Learn more about covered OUD screening and treatment options at <https://www.cms.gov/medicare/payment/fee-schedules/physician-fee-schedule/opioid-use-disorder-screening-treatment>, which includes a list of Medicare-enrolled OTPs.

Thank you for the essential care you provide to your Medicare patients.

DISCLAIMER: For the most current information, see the materials referenced in this letter.

Appendix 3: Newsletter Messaging Series

Date: 4/13/2023 – Opioid Treatment Program Webpage Updates

https://www.cms.gov/outreach-and-education/outreach/ffsprovpartprog/provider-partnership-email-archive/2023-04-13-mlnc#_Toc132203907

CMS streamlined [Opioid Treatment Program](#) content. Visit the revised webpages to learn more about:

- Enrollment
- Billing
- G-codes frequency of use guidelines
- Claims
- 2023 payment rates

Date: 11/2/2023 – Behavioral Health: Medicare Pays for 3 Services

https://www.cms.gov/training-education/medicare-learning-network/newsletter/2023-11-02-mlnc#_Toc149751972

Find out about 3 behavioral health services Medicare pays for that may improve patient outcomes:

1. [Behavioral Health Integration \(BHI\) Services \(PDF\)](#): BHI is a model of care that incorporates behavioral health care into other care, like primary care, to improve mental, behavioral, or psychiatric health for many patients. We cover 2 types of BHI services.
2. [Psychotherapy for Crisis](#): These services are appropriate for patients in high distress with life-threatening, complex problems that require immediate attention. These services can help reduce a patient's mental health crisis (including substance use disorder).
3. [Opioid Use Disorder \(OUD\) Screening & Treatment](#): Medicare pays for OUD screenings performed by physicians and non-physician practitioners. If you diagnose your patient with OUD, Medicare also pays for certain treatment services.

In October, we mailed a [letter \(PDF\)](#) to physicians and non-physician practitioners about these services. We encourage all providers to learn more and help improve your patients' behavioral health.

Date: 12/21/2023 – Opioid Use Disorder Screenings & Treatment: Medicare Pays for Services

https://www.cms.gov/training-education/medicare-learning-network/newsletter/2023-12-21-mlnc#_Toc153961361

Medicare pays for opioid use disorder (OUD) screenings performed by physicians and non-physician practitioners:

- Required element of the [initial preventative physical exam](#) and [annual wellness visit](#)
- In physician office and outpatient hospital settings, we'll pay for [screening, brief intervention, & referral to treatment services \(PDF\)](#):
 - Evidence-based, early intervention approach
 - For non-dependent substance use before patients need more specialized treatment

If you diagnose your patient with OUD we pay for certain treatment services. Visit [Opioid Use Disorder Screenings & Treatment](#) for coverage and coding information. Bookmark this webpage for the latest updates.

Date: 12/21/2023: Opioid Treatment Programs: New Information for 2024
https://www.cms.gov/training-education/medicare-learning-network/newsletter/2023-12-21-mlnc#_Toc153961362

Visit [Opioid Treatment Programs \(OTP\)](#) for CY 2024 updates, including:

- [Physician Fee Schedule](#) final rule extends the flexibility through the end of CY 2024 to provide periodic assessments via audio-only when video isn't available, when authorized by SAMHSA and DEA
- [Hospital Outpatient Prospective Payment System and Ambulatory Surgical Center Payment System](#) final rule establishes a weekly payment adjustment for an Intensive Outpatient Program (IOP) provided by an OTP for opioid use disorder treatment; the IOP service:
 - Must be medically reasonable and necessary
 - Can't duplicate any service paid for under any bundled payments billed for an episode of care in a given week

Date: 03/07/2024: Opioid Use Disorder: Medicare Pays for Certain Treatment Services
https://www.cms.gov/training-education/medicare-learning-network/newsletter/2024-03-07-mlnc#_Toc160622797

Medicare pays for opioid use disorder (OUD) screenings performed by physicians and non-physician practitioners. If you diagnose your patient with OUD, Medicare also pays for certain treatment services, including:

- Evaluation and management visits for medication management: Use these visits to provide medication management to make sure patients take medications (like buprenorphine) properly as part of their recovery process.
- Office-based substance use disorder (SUD) treatment services: You can bill for a group of services for the treatment of SUDs in the office setting. Medicare pays for a monthly bundle of services (for patients who are prescribed buprenorphine or naltrexone in the office setting) for the treatment of OUD or other SUDs.
- Opioid Treatment Program (OTP): Provide medications for opioid use disorder (MOUD), including methadone, buprenorphine, and naltrexone, as well as a range of other services including individual and group therapy, substance use counseling, and toxicology testing, for patients diagnosed with OUD. Consider referring your patient to an OTP if this specific MOUD is helpful to their recovery. OTPs may also furnish Intensive Outpatient Program services to treat OUD.

Visit [Opioid Use Disorder Screenings & Treatment](#) for more information, including coverage and coding.

Date: 05/09/2024: Mental Health: It's Important at Every Stage of Life
https://www.cms.gov/training-education/medicare-learning-network/newsletter/2024-05-09-mlnc#_Toc166060191

Mental and physical health are equally important components of overall health. For example, depression increases the risk for many types of physical health problems, particularly long-lasting conditions like [diabetes](#), [heart disease](#), and stroke (see [CDC](#)). During [Mental Health Awareness Month](#), recommend appropriate preventive services, including:

- [Alcohol misuse screening and counseling](#)

- [Annual wellness visit](#)
- [Depression screening](#)
- [Initial preventive physical exam](#)

Medicare covers preventive services, and your patients pay nothing if you accept assignment. Find out when your patient is [eligible for these services](#). If you need help, contact your eligibility service provider.

More Information:

- [Medicare & Mental Health Coverage](#) booklet
- [Behavioral Health Integration Services \(PDF\)](#) booklet
- [Opioid Use Disorder Screening & Treatment](#) webpage
- [Addressing & Improving Behavioral Health](#) webpage
- [Depression \(PDF\)](#) data snapshot: Learn about disparities in Medicare patients
- [Preventive & screening services](#) webpage: Get information for your patients

Date: 05/16/2024: Mental Health & Substance Use Disorders: Updated Medicare.gov

Content

https://www.cms.gov/training-education/medicare-learning-network/newsletter/2024-05-16-mlnc#_Toc166661427

May is Mental Health Awareness Month, and CMS updated our [Mental Health and Substance Use Disorders](#) content on medicare.gov. These updates are part of our broader [Behavioral Health Strategy](#) and make it easier for users to access mental health and substance use disorder information.

Appendix 4: Beneficiary Outreach Campaign


Opioid use disorder treatment services webpage

Medicare.gov Basics ▾ Health & Drug Plans ▾ Providers & Services ▾ Chat Log in

[Home](#) > [Your Medicare Coverage](#) > Opioid use disorder treatment services Search Print

Opioid use disorder treatment services

Medicare Part B (Medical Insurance) covers opioid use disorder treatment services in opioid treatment programs.



Find providers near you

Search for opioid use disorder treatment services

ENTER LOCATION

Medicare drug coverage (Part D) also covers drugs like buprenorphine (to treat opioid use disorders) and methadone (when prescribed for pain).

Medicare Part A (Hospital Insurance) covers methadone when it's used to treat an opioid use disorder as a hospital inpatient.

Your costs in Original Medicare

You won't have to pay any copayments for these services if you get them from an opioid treatment program provider who's enrolled in Medicare and meets other requirements. However, the Part B deductible still applies for supplies and medications you get through an opioid treatment program provider.

What it is

These services, which help people recover from opioid use disorder, include:

- Medication (like methadone, buprenorphine, naltrexone, and naloxone)
- Substance use counseling
- Individual and group therapy
- Drug testing
- Intake activities
- Periodic assessments
- Opioid antagonist medications (like naloxone) approved for the emergency treatment of known or suspected opioid overdose
- Overdose education you get along with opioid antagonist medication

Medicare covers counseling, therapy, and periodic assessments both in person and, in certain circumstances, virtually (using audio and video communication technology, like your phone or a computer). Medicare also covers services given through opioid treatment program mobile units.

Things to know

Talk to your doctor or other health care provider to find out where to go for these services. You can also search for providers at the top of this page.

Medicare Advantage Plans must also cover opioid treatment program services, but may require you see an in-network opioid treatment program. Since Medicare Advantage Plans can apply copayments to opioid treatment program services, check with your plan to find out.

Related resources

[Pain management](#)

[Drug plan coverage rules](#)

Is my test, item, or service covered?

Type your test, item, or service here	Go
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October 2022

Opioid treatment programs

Medicare covers opioid use disorder treatment services for people with Medicare when you get them from an opioid treatment program (OTP).

What does Medicare cover?

- Medication-assisted treatment medications approved for use in treatment of Opioid Use Disorder (OUD), like methadone, buprenorphine, naltrexone, and naloxone
Note: Medicare drug coverage (Part D) also covers drugs like buprenorphine (to treat opioid use disorders) and methadone (when prescribed for pain). Medicare Part A (Hospital Insurance) covers methadone when it's used to treat an opioid use disorder as a hospital inpatient.
- Substance use counseling you get in person or virtually (using video technology like your computer, or audio-only technology like your phone)
- Individual and group therapy you get in person or virtually
- Toxicology testing
- Intake activities
- Periodic assessments you get in person or virtually
- Opioid antagonist medications (like naloxone) approved for the emergency treatment of known or suspected opioid overdose
- Overdose education you get along with opioid antagonist medication

What do I pay?

You pay nothing for these services if you get them from an OTP that's enrolled in Medicare. The Part B deductible applies for supplies and medications you get through an OTP.

What if I'm in a Medicare Advantage Plan?

Medicare Advantage Plans must also cover OTP services. If you're in a Medicare Advantage Plan, your current OTP must be Medicare-enrolled and in the plan's network to make sure your treatment stays uninterrupted. If not, you may have to switch to a Medicare-enrolled OTP. You may also be charged a copayment. Contact your Medicare Advantage Plan for more information.

Who pays for my OTP services if I have both Medicare and Medicaid?

Medicare is now the primary payer for OTP services for people who have both Medicare and Medicaid. Medicare is working with opioid treatment providers and state Medicaid agencies so you won't have a break in your care.

Where can I get more information about opioid use disorder treatment services?

- Visit [Medicare.gov/coverage/opioid-use-disorder-treatment-services](https://www.Medicare.gov/coverage/opioid-use-disorder-treatment-services)
- Visit [Medicare.gov/talk-to-someone](https://www.Medicare.gov/talk-to-someone) and select "Find Treatment Near You" on the "Find treatment for opioid misuse" card. Then, select your state to find a program near you.

You have the right to get Medicare information in an accessible format, like large print, braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against. Visit [Medicare.gov/about-us/accessibility-nondiscrimination-notice](https://www.Medicare.gov/about-us/accessibility-nondiscrimination-notice), or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

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CMS Product No. 12085

Mental Health & Substance Use Disorders webpage

Mental Health & Substance Use Disorders

Medicare covers certain screenings, services, and programs that aid in the treatment and recovery of mental health and substance use disorders.



If you or someone you know is struggling or in crisis, call or text 988, the free and confidential Suicide Crisis Lifeline. You can call and speak with a trained crisis counselor 24 hours a day, 7 days a week. You can also connect with a counselor through web chat at 988lifeline.org. Call 911 if you're in immediate medical crisis.

Services & programs Medicare covers

Medicare covers a wide range of behavioral health services, including inpatient, outpatient, and more.

If you have:	Medicare covers:
Medicare Part A (Hospital Insurance)	Services you get when you're admitted to a general or psychiatric hospital as an inpatient.
Medicare Part B (Medical Insurance)	<ul style="list-style-type: none">• Inpatient services you get from a doctor or other health care provider while you're in the hospital.• Intensive outpatient program services you get at a hospital, community mental health center, Federally Qualified Health Center, Rural Health Clinic, or Opioid Treatment Program.• Outpatient services that you usually get outside a hospital, like in a doctor's office or community mental health center. This includes outpatient services you might get as part of substance use disorder treatment.• Partial hospitalization services you get through a hospital outpatient department or community mental health center, if you meet certain requirements.

	<ul style="list-style-type: none"> • Behavioral health integration services to help manage your care for your health condition.
Medicare drug coverage (Part D)	Many outpatient prescription drugs you may need to treat a mental health condition.

If you're eligible for Medicare and Medicaid you may have even more coverage than what's listed here. Call your [State Medical Assistance \(Medicaid\) office](#) to find out what other health services may be covered in your state.

Types of mental health care

<p>Outpatient Mental Health Care</p> <p>Services to help diagnose and treat mental health conditions (often called counseling or psychotherapy).</p> <p>Understand Services</p>	<p>Intensive Outpatient Program Services</p> <p>Part-time mental health care for people who need at least 9 hours of services per week.</p> <p>Learn About Coverage</p>	<p>Partial Hospitalization</p> <p>Full-day mental health care for people who need at least 20 hours of services per week.</p> <p>Understand Services</p>	<p>Inpatient Care</p> <p>Mental health care services when you're admitted to a general or psychiatric hospital.</p> <p>Learn About Coverage</p>
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Preventive screenings & counseling




<p>Depression screenings</p> <p>Assesses signs and symptoms of depression.</p> <p>Learn About Coverage</p>	<p>Opioid Use Disorder Treatments</p> <p>Counseling, therapy, assessments, and more to help recover from opioid use disorder.</p> <p>Explore Treatments</p>	<p>Tobacco Use Counseling</p> <p>Counseling for smoking and tobacco use cessation.</p> <p>Understand Coverage</p>	<p>Alcohol Misuse Screenings</p> <p>To identify unhealthy drinking habits and counseling needs.</p> <p>Understand Services</p>
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Find a mental health care provider

Find and compare providers for mental health and substance use disorder services near you. These providers can help to help treat conditions like depression, anxiety, or substance use disorders. Some providers may offer these services via telehealth, which allows you to communicate in real-time with your health care provider without going to the doctor's office. [Get information about covered telehealth services.](#)

Find Providers

Helpful links

- For finding the care you need 
- To learn more about mental health care 
- To learn about substance use disorders and treatment 

Generally, you pay 20% of the **Medicare-approved amount** and the Part B **deductible** applies for mental health care services.

Part A covers inpatient mental health care services you get in a hospital (go to page 27).



Preventive service

Obesity behavioral therapy

If you have a body mass index (BMI) of 30 or more, Medicare covers obesity screenings and behavioral counseling to help you lose weight by focusing on diet and exercise. Medicare covers this counseling if your **primary care doctor** or other primary care practitioner gives the counseling in a primary care setting (like a doctor's office), where they can coordinate your personalized prevention plan with your other care. You pay nothing for this service if your primary care doctor or other provider accepts **assignment**.

Occupational therapy services

Medicare covers **medically necessary** therapy to help you perform activities of daily living (like dressing or bathing). This therapy helps to improve or maintain current capabilities or slow decline when your doctor or other health care provider certifies you need it. You pay 20% of the Medicare-approved amount. The Part B deductible applies.

Opioid use disorder treatment services

Medicare covers opioid use disorder treatment services in opioid treatment programs. The services include medication (like methadone, buprenorphine, naltrexone, and naloxone), substance use counseling, drug testing, individual and group therapy, intake activities, and periodic assessments. Medicare covers counseling, therapy services, and periodic assessments both in-person and, in certain circumstances, by virtual delivery (using audio and video communication technology, like your phone or a computer). Medicare also covers services given through opioid treatment program mobile units.

Medicare pays doctors and other providers for office-based opioid use disorder treatment, including management, care coordination, psychotherapy, and counseling activities.

Under Original Medicare, you won't have to pay any **copayments** for these services if you get them from an opioid treatment program provider that's enrolled in Medicare and meets other requirements. However, the Part B deductible still applies. Talk to your doctor or other health care provider to find out where to go for these services. You can also visit [Medicare.gov/coverage/opioid-use-disorder-treatment-services](https://www.medicare.gov/coverage/opioid-use-disorder-treatment-services) to find a program near you.

Medicare Advantage Plans must also cover opioid treatment program services, but may require you see an in-network opioid treatment program. Since Medicare Advantage Plans can apply copayments to opioid treatment program services, check with your plan to find out if you have to pay a copayment.

Generally, you pay 20% of the **Medicare-approved amount** and the Part B **deductible** applies for mental health care services.

Part A covers inpatient mental health care services you get in a hospital (go to page 27).



Preventive service

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Appendix 5: Utilization Rates

Section 4129(b)(2) of the CAA, 2023 requires the Secretary to submit a report to certain committees of Congress not later than 18 months after the date of the completion of the education initiatives, and two years thereafter, on the number of Medicare Fee-for-Service (FFS) beneficiaries who, during the preceding year, were furnished OUD treatment services by OTPs for which payment was made under title XVIII of the Act.

Based on a study of Medicare Part B claims data from CY 2023, approximately 36,822 FFS Medicare beneficiaries received OUD treatment services from OTPs, and 26,046 FFS Medicare beneficiaries received additional add-on OUD treatment services (for example, take-home medications, periodic assessments, intake activities, etc.). G2067 (MAT¹⁰ Methadone) was the most frequently billed main HCPCS code and G2078 (Take-Home Methadone) was the most frequently billed add-on HCPCS code on both professional and institutional claim lines.

See Table 1 for the overall summary of FFS beneficiaries receiving Medicare-funded OUD treatment services furnished by an OTP in 2023.

Table 1. CY 2023 Utilization Summary of OTP HCPCS Codes on Professional and Institutional Claim Lines

Note: Data as of September 10, 2024, which includes most claims for CY 2023. Providers can continue to submit CY 2023 claims until December 31, 2024.

	Unique Beneficiaries
All Main HCPCS Codes	36,822
G2067 [MAT Methadone]	35,089
G2068 [MAT Buprenorphine Oral]	1,774
G2069 [MAT Buprenorphine Injectable]	14
G2070 [MAT Buprenorphine Implant Insertion]	2
G2071 [MAT Buprenorphine Implant Removal]	0
G2072 [MAT Buprenorphine Implant Insertion and Removal]	0
G2073 [MAT Naltrexone]	16
G2074 [MAT No Drug]	6,544
G2075 [MAT Unspecified Drug]	5
All Intensity Add-on HCPCS Codes	26,046
G2076 [Intake Activities]	4,421
G2077 [Periodic Assessment]	11,752
G2078 [Take-Home Methadone]	19,233
G2079 [Take-Home Buprenorphine]	956
G2080 [Additional 30 Minutes Counseling]	663
G2215 [Take-Home Nasal Naloxone, 4mg per 0.1 mL]	237
G2216 [Take-Home Injectable Naloxone]	0
G1028 [Take-Home Nasal Naloxone, 8mg per 0.1 mL]	158

¹⁰ Code descriptors use the outdated MAT terminology, as opposed to MOUD.