Heroin Detoxification Billing Codes

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This section contains a listing of procedure codes that are reimbursable to heroin detoxification providers. For general heroin detoxification policy, refer to the *Heroin Detoxification* section in this manual.

Heroin Detoxification Service Codes

Service codes, descriptions and billing limits for outpatient heroin detoxification are as follows:

HCPCS Code	Description
H0014	During the first seven days, per visit, services: Alcohol and/or drug services; ambulatory detoxification; includes taking of the initial history; physical examination by a physician; other physician services necessary to the heroin detoxification services; necessary urine screening tests and related specimen handling; daily visits to the clinic for medication or re-examination; any other procedures related to outpatient heroin detoxification services.
	Billing Limitation: Code H0014 with modifier UA may be billed for day 1 through day 7 of the 21-day detoxification course. This code may not be billed again by the same facility for the same patient for 90 days from the last date of service for a preceding course of treatment. This code may not be billed for the same patient by a new facility for 28 days following the last date of service for a preceding course of treatment by another provider.

HCPCS Code	Description
H0014	From the 8th through the 21st day, per visit, services include: Alcohol and/or drug services; ambulatory detoxification; administering medication and other procedures related to outpatient heroin detoxification services.
	Billing Limitation: Code H0014 with modifier UB may be billed for day 8 through day 21 of the 21-day detoxification course. This code may also be billed for up to 21 consecutive days when 28 days have elapsed from the last date of service for a preceding course of treatment for the same patient by the same facility.
H0014	Re-examination by a physician between the 8th and 21st days, maximum of one per week, per visit (payable only as a substitute for visits under H0014, modifier UB; payment includes all other services specified in H0014, modifier UB).
	Billing Limitation: Code H0014 with modifier UC may be billed once every week during the three-week treatment course.

Separately Billable Services

Services not included in the description of code H0014 may be billed separately. For example:

- Complete blood counts
- Venereal Disease Research Laboratory (VDRL) testing
- Urinalysis (other than screening for drugs)
- Other laboratory and imaging services needed to diagnose concurrent diseases
- Psychiatric or psychological services, within Medi-Cal coverage limitations, when not performed as part of routine clinic operation procedures related to outpatient heroin detoxification.

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Medical Necessity Requirements

In all cases, the usual Medi-Cal criteria of demonstrated medical necessity and specific prescription for the individual patient apply to reimbursement for these additional services. Routine, protocol types of testing which may be performed for all patients at the clinic are not separately reimbursable.

Physician Services

Additional physician services are reimbursable only when necessary and individually prescribed for the diagnosis and treatment of concurrent diseases. If such services are performed by a clinic physician and billed by a licensed clinic, bill the detoxification service as a one-line charge using code H0014, as appropriate, and bill the physician service on a separate line using the appropriate CPT® code.

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«Legend»

«Symbols used in the document above are explained in the following table.»

Symbol	Description
**	This is a change mark symbol. It is used to indicate where on the page the most recent change begins.
>>	This is a change mark symbol. It is used to indicate where on the page the most recent change ends.