DEPARTMENT OF HUMAN SERVICES

Accounting for breaks in substance use disorder (SUD) treatment documentation and billing

Substance Use Disorder (SUD) outpatient services billing changes from the Minnesota 2025 legislative session will be effective August 1, 2026. The changes for Minnesota Health Care Programs (MHCP) providers include:

- New billing procedure codes for counseling and psychoeducation, currently billed under procedure codes H2035 and H2035 HQ
- Discontinuation of procedure codes H2035 and H2035 HQ for services provided on and after August 1, 2026 (except possibly by CCBHC providers)
- A new procedure code for the new treatment service of recovery support
- 15-minute billing units for the new outpatient SUD procedure codes, including for services that are currently billed as 1-hour units under procedure codes H2035 and H2035 HQ

When discussing these changes, several questions about accounting for breaks in treatment documentation and billing have been raised by providers. These changes were passed as part of the Governor's program integrity package to create transparency and accurately reflect services being rendered. It is important for the state to be able to identify specific types and actual amounts of services that are provided to a client (not counting break time) to ensure that services are being provided appropriately. The changes also align with the American Society of Addiction Medicine (ASAM) 4th edition standards, specifically the differentiation between counseling and psychoeducation treatment services, which will now be billed separately using different procedure codes.

It is necessary for Electronic Health Record billing systems to allow providers to meet these state needs and requirements. Assistance for providers in making any billing system changes that are needed to align with treatment services documentation and billing requirements as quickly and easily as possible is appreciated.

Current guidance from the MHCP provider manual:

- Substance Use Disorder (SUD) Services, Billable Units and Time Requirements
  - "Follow HCPCS and CPT billing guidelines to determine the appropriate units of time to report in the case of time as part of the code definition."
  - "If a provider performs two or more of the same service code for the same member in the same day, the provider must bill based on the total combined number of minutes. Combined time must only account for direct service with members and does not include time for breaks."
- Billing Policy Overview, Coding Schemes
  - **CPT:** (HCPCS Level I: Physicians' Current Procedural Terminology) Contact the American Medical Association at 800-621-8335 or purchase from various medical book sources.
  - **HCPCS:** (Healthcare Common Procedural Coding System) Available on the Centers for Medicare & Medicaid Services Alpha-Numeric HCPCS webpage; may also be purchased from various medical book sources.