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MEDICAID BULLETIN

TO: Rehabilitative Behavioral Health Services Providers, Office of Substance Use Services-affiliated Organizations and Licensed Independent Practitioners

SUBJECT: Rehabilitative Behavioral Health and Substance Use Services Rate Increases

Effective for dates of service on or after Dec. 1, 2025, the South Carolina Department of Health and Human Services (SCDHHS) will update the reimbursement methodology and rates for Medicaid State Plan-covered services rendered by rehabilitative behavioral health services (RBHS) providers, Office of Substance Use Services-affiliated organizations and licensed independent practitioners (LIPs). Additionally, the Department of Alcohol and Other Drug Abuse Services Fee Schedule, which currently provides the reimbursement rates for substance use services, will be renamed to align with the Office of Substance Use Services.

Reimbursement Rate Increases

Updated reimbursement rates for services defined in the <u>RBHS Manual</u>, including substance use services, and the <u>LIP Rehabilitative Services Manual</u> are available in the rate tables listed below. For RBHS and substance use services, the reimbursement rates will be reflected in the corresponding fee schedules <u>available on SCDHHS' website</u> by Dec. 1, 2025. For services included in the LIP Rehabilitative Services Manual, reimbursement rates will be reflected in a LIP fee schedule that will be added to SCDHHS' website by Dec. 1, 2025. The reimbursement methodology and rate updates will not impact the evidence-based practices defined in the appendices of the RBHS Manual.

Updated Rates for the RBHS Fee Schedule					
Description	Procedure Code	Modifier	Current Rate per Unit	New Rate per Unit as of Dec. 1, 2025	
Behavioral Health Screening	H0002	AF HP AM SA AH HO HN	\$37.13 (unit = 15 min.) \$36.09 \$18.49 \$17.29 \$18.72 \$12.82 \$11.23	\$83.45 (encounter) \$81.11 \$41.56 \$38.86 \$42.07 \$28.81 \$25.24	
Psychiatric Diagnostic Evaluation without Medical Services – Comprehensive Diagnostic Assessment	90791	AH HO	\$235.86 \$161.55	\$236.92 \$162.27	
Psychiatric Diagnostic Assessment with Medical Services	90792	AF AM SA	\$445.60 \$221.82 \$201.74	\$500.74 \$248.64 \$233.10	
Mental Health Comprehensive Assessment – Follow-Up	H0031	AH HO	\$117.94 \$80.78	\$118.46 \$81.14	
Child and Adolescent Level of Care Utilization System (CALOCUS) Assessment	H2000	AH HO	\$224.63 \$153.94	\$252.43 \$172.99	
Service Plan Development Interdisciplinary Team with Client	99366	00	\$39.54	\$44.43	
Service Plan Development Interdisciplinary Team with Client	99367	00	\$39.54	\$44.43	
Service Plan Development by Non-Physician	H0032	AH HO HN	\$12.32 \$8.44 \$7.04	\$52.06 \$35.66 \$31.38	

Updated Rates for the RBHS Fee Schedule					
	-	AF	\$104.94	\$155.10	
Individual		AM	\$53.74	\$77.01	
Psychotherapy Face-	90832	SA	\$50.25	\$72.20	
to-Face – 30 minutes		AH	\$57.15	\$78.08	
		но	\$39.14	\$53.48	
		AF	\$209.88	\$310.22	
Individual		AM	\$107.48	\$154.04	
Psychotherapy Face-	90834	SA	\$100.50	\$144.41	
to-Face – 45 minutes		AH	\$114.30	\$156.18	
		но	\$78.29	\$106.97	
		AF	\$314.82	\$413.62	
Individual		AM	\$161.22	\$205.38	
Psychotherapy Face-	90837	SA	\$150.75	\$192.55	
to-Face – 60 minutes		AH	\$171.45	\$208.24	
		НО	\$117.43	\$142.63	
Family	00046 and	НР	\$301.17	\$432.83	
Psychotherapy, with	90846 and 90847	АН	\$163.99	\$224.09	
and without Patient		но	\$112.32	\$153.49	
Group	90853	AH	\$25.52	\$34.71	
Psychotherapy	90853	НО	\$17.48	\$23.78	
Multiple Family		AH	\$24.20	\$79.54	
Group	90849	HO	\$24.30 \$16.65	\$79.54	
Psychotherapy		ПО	\$10.05	\$54.46	
		AF	\$24.29	\$27.30	
Medication Management		HP	\$23.61	\$26.54	
	H0034	AM	\$12.09	\$13.55	
	пооз4	SA	\$11.30	\$12.71	
		TD	\$10.20	\$11.48	
		TE	\$6.68	\$7.53	
		U1	\$13.02	\$14.63	
		U2	\$9.93	\$14.65	
		U3	\$9.00	\$10.11	
		U4	\$10.85	\$10.11	
Psychosocial		U5	\$5.98	\$6.72	
Rehabilitation	H2017	U6	\$6.52	\$6.72	
Services – Individual	17201/	U7	\$4.96	\$5.57	
Services – individual		U8	\$4.50	\$5.06	
		U9	\$5.42	\$6.09	
		UA	\$3.00	\$3.37	
			33.00	ر 3.57	

Updated Rates for the RBHS Fee Schedule					
		AF	\$25.82	\$29.02	
		НР	\$25.10	\$28.21	
		AM	\$12.85	\$14.44	
		SA	\$12.02	\$13.51	
Behavioral	112014	AH	\$13.02	\$14.63	
Modification Service	H2014	НО	\$8.92	\$10.02	
		HN	\$7.81	\$8.78	
		TD	\$10.85	\$12.19	
		TE	\$7.11	\$7.99	
		НМ	\$5.98	\$6.72	
		AF	\$25.82	\$29.07	
		HP	\$25.10	\$28.27	
		AM	\$12.85	\$14.43	
	S9482	SA	\$12.02	\$13.53	
Family Support		AH	\$13.02	\$14.63	
railing Support		НО	\$8.92	\$10.02	
		HN	\$7.81	\$8.82	
		TD	\$10.85	\$12.23	
		TE	\$7.11	\$8.02	
		HM	\$5.98	\$6.72	
		U6	\$6.52	\$7.33	
Community	H2030	U7	\$4.96	\$5.57	
Integration Services	112030	U8	\$4.50	\$5.06	
		U9	\$5.42	\$6.09	
Peer Support	H0038	00	Individual: \$3.31	Individual: \$3.72	
Services		HQ	Group: \$2.32	Group: \$2.61	
		AF	\$56.12	\$110.29	
		HP	\$54.55	\$107.25	
Crisis Management		AM	\$27.94	\$54.77	
	H2011	SA	\$26.12	\$51.34	
		AH	\$29.70	\$55.53	
		НО	\$20.35	\$38.03	
		HN	\$16.97	\$33.47	

Updated Rates for the LIP Fee Schedule					
Description	Procedure Code	Modifier	Current Rate per Unit	New Rate per Unit as of Dec. 1, 2025	
Behavioral Health Screening	H0002	AH HO	\$17.41 (unit = 15 min.) \$11.92	\$42.07 (encounter) \$28.81	
Psychiatric Diagnostic Evaluation without Medical Services – Comprehensive Diagnostic Assessment	90791	AH HO	\$235.86 \$161.55	\$236.92 \$162.27	
Mental Health Comprehensive Assessment – Follow-Up	H0031	AH HO	\$117.94 \$80.78	\$118.46 \$81.14	
Child and Adolescent Level of Care Utilization System (CALOCUS) Assessment	H2000	AH HO	\$224.63 \$153.94	\$252.43 \$172.99	
Service Plan Development Interdisciplinary Team with Client	99366	00	\$39.54	\$44.43	
Service Plan Development Interdisciplinary Team without Client	99367	00	\$39.54	\$44.43	
Individual Psychotherapy Face- to-Face – 30 minutes	90832	AH HO	\$57.15 \$39.14	\$78.08 \$53.48	

	Updated Rates for the LIP Fee Schedule					
Individual Psychotherapy Faceto-Face – 45 minutes	90834	AH HO	\$114.30 \$78.29	\$156.18 \$106.97		
Individual Psychotherapy Faceto-Face – 60 minutes	90837	AH HO	\$171.45 \$117.43	\$208.24 \$142.63		
Family Psychotherapy, with and without Patient	90846 and 90847	AH HO	\$163.99 \$112.32	\$224.09 \$153.49		
Group Psychotherapy	90853	AH HO	\$25.52 \$17.48	\$34.71 \$23.78		
Crisis Management	H2011	AH HO	\$29.70 \$20.35	\$55.53 \$38.03		

Updated Rates for Substance Use-Specific Services					
Description	Procedure Code	Modifier	Current Rate per Unit	New Rate per Unit as of Dec. 1, 2025	
		AF	\$37.13 (unit = 15	\$83.45	
			min.)	(encounter)	
Behavioral Health		AM	\$18.49	\$41.56	
Screening	H0002	SA	\$17.29	\$38.86	
		AH	\$18.72	\$42.07	
		НО	\$12.82	\$28.81	
		HN	\$11.23	\$25.24	
		AH	\$177.03	\$198.94	
Alashal and Duus		НО	\$177.03	\$198.94	
Alcohol and Drug	H0001	U2	\$38.95	\$43.77	
Assessment		HN	\$155.01	\$174.19	
		TS	\$91.24	\$102.53	

Į į	Jpdated Rates fo	or Substance Use-S	pecific Services	
Alcohol and/or Substance Abuse Structured Screening and Brief Intervention Services	99408	AF AM SA AH HO HN TD	\$56.98 \$26.78 \$19.94 \$19.94 \$19.94 \$19.94 \$19.94 \$12.54	\$64.03 \$30.09 \$22.41 \$22.41 \$22.41 \$22.41 \$22.41 \$14.09
Psychiatric Diagnostic Assessment with Medical Services	90792	AF AM SA	\$174.63 \$116.90 \$116.90	\$500.74 \$248.64 \$233.10
Child and Adolescent Level of Care Utilization System (CALOCUS) Assessment	H2000	AH HO	\$224.63 \$153.94	\$252.43 \$172.99
Psychological/Neuro psychological Test Administration/Scori ng by Technician, Two or More Tests Any Method; First 30 Minutes - DAODAS Only	96138	AH HO	\$26.41	\$29.68
Psychological/Neuro psychological Test Administration/Scori ng by Technician, Two or More Tests Any Method; Additional 30 Minutes - DAODAS Only	96139	AH HO	\$26.41	\$29.68

l	Updated Rates for Substance Use-Specific Services				
Psychological/Neuro psychological Test Administration/Scori ng, Single Automated Instrument via Electronic Platform, Automated Result Only - DAODAS Only	96146	AH HO	\$26.41	\$29.68	
Service Plan Development by Non-Physician	H0032	00 HF	\$26.10 \$45.71	\$35.66 \$53.48	
Individual Psychotherapy Face- to-Face for 30 minutes with Medical Evaluation and Management Services	90833	AF AM SA AH HO	\$97.02 \$64.95 \$64.95 	\$109.03 \$72.99 \$72.99 \$74.00 \$50.68	
Individual Psychotherapy Faceto-Face for 45 minutes with Medical Evaluation and Management Services	90836	AF AM SA AH HO	\$174.30 \$116.90 \$116.90 	\$195.88 \$131.37 \$131.37 \$133.20 \$91.22	
Individual Alcohol and Drug Substance Abuse Counseling	H0004	00	\$22.31	\$25.07	
Group Alcohol and Drug Substance Abuse Counseling	H0005	00	\$48.48	\$54.48	
Individual Psychotherapy Face- to-Face - 30 minutes	90832	SA AH HO	\$63.07 \$49.66 \$49.66	\$72.20 \$78.08 \$53.48	
Individual Psychotherapy Face- to-Face – 45 minutes	90834	AF AM SA AH HO	\$286.50 \$134.66 \$94.55 \$74.49 \$74.49	\$310.22 \$154.04 \$144.41 \$156.18 \$106.97	

l	Jpdated Rates fo	or Substance Use-S	Specific Services	
Individual		AF	\$382.00	\$413.62
Psychotherapy Face-		AM	\$179.54	\$205.38
	90837	SA	\$126.06	\$192.55
to-Face – 60 minutes		AH	\$99.32	\$208.24
		НО	\$99.32	\$142.63
Family		AF	\$382.00	\$445.11
Family	90846 and	AM	\$179.54	\$221.02
Psychotherapy, with or without Patient	90847	SA	\$126.06	\$207.21
or without Patient	90847	AH	\$99.32	\$224.09
		НО	\$99.32	\$153.49
Psychosocial			\$7.81	\$8.78
Rehabilitation	H2017	00	(Individual and	(Individual and
Services – Individual	112017	HQ	group)	group)
			group	group)
Skills Training and Development Service – 0 – 6 Years of Age	H2014	00	\$7.81	\$8.78
		00	\$3.31	\$3.72
Peer Support Service	H0038	HQ	\$2.32	\$2.61
Crisis Management	H2011	00 HF	Face-to-Face: \$19.31 Telephonic: \$19.31	Face-to-Face: \$38.03 Telephonic: \$28.52
Alcohol and/or Drug				
Treatment - Day				
Treatment/Partial	H2035	00	\$27.84	\$53.64
Hospitalization Level				
II.5				
Alcohol and/or Drug				
Services SubAcute				
Detox Residential -				
Clinically Managed	H0010	00	\$96.92	\$108.91
Residential				
Detoxification Level				
III.2-D				

l	Jpdated Rates fo	r Substance Use-S	pecific Services	
Alcohol and/or Drug Services Acute Detox Residential - Medical Monitored Residential Detoxification Services Level III.7-D	H0011	00	\$332.14	\$373.24
Behavioral Health- Long-term Residential Treatment Program- Clinically Managed High-Intensity Residential Treatment Level III.5-R	H0019	00	\$193.82	\$217.81
Behavioral Health - Short-term Residential Treatment Program - Medically Monitored Intensive Level III.7-R	H0018	00 HA	\$266.23 \$321.52	\$299.18 \$361.31

Note: Only procedure codes and modifiers reflecting a rate change are included in these tables.

Providers should note that one procedure code, H0002, was converted from a 15-minute unit to an encounter in all fee schedules to reflect coding as per the National Correct Coding Initiative.

South Carolina's Medicaid managed care organizations (MCOs) are responsible for the authorizations, coverage and reimbursement related to the services described in this bulletin for members enrolled in an MCO.

Providers should direct any questions related to this bulletin to MedicaidStatePlan@scdhhs.gov or the Provider Service Center (PSC). PSC representatives can be reached at (888) 289-0709 from 7:30 a.m.-5 p.m. Monday-Thursday and 8:30 a.m.-5 p.m. Friday. Providers can also submit an online inquiry here.

Thank you for your continued support of the South Carolina Healthy Connections Medicaid program.

/s/ Eunice Medina