

Illinois Department of Healthcare and Family Services  
**Fee Schedule For Substance Use Prevention and Recovery Providers**

Effective: 01/01/2024

Updated: 02/08/2024

Please note that the appearance of a code on this fee schedule does not guarantee payment. Services for which medical necessity is not clearly established are not covered in the Department's Medical Programs. See Chapter 100, Topic 104 and Chapter A-200, Section 204 for additional exclusions.

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**Key**

\*Billable only by providers authorized to deliver services under one of the 1115 Behavioral Health Transformation Waiver pilot projects

Service Name	ASAM Level	Procedure Code	Modifier	Unit	FY 24 Rate
Admission and Discharge Assessment	All levels	H0002		1/4 hour	\$26.92
Psychiatric Evaluation	All levels	90791		Event	\$133.97
Medication Monitoring	All levels	H2010		1/4 hour	\$25.59
Medication Assisted Treatment (MAT)	All levels	H0020		Weekly	\$115.32
Individual - Therapy/Counseling, Substance Use	Level 1	H0004		1/4 hour	\$25.59
Group - Therapy/Counseling, Substance Use	Level 1	H0005		1/4 hour	\$9.70
Individual - Intensive Outpatient, Substance Use	Level 2	H0004		1/4 hour	\$25.59
Group - Intensive Outpatient, Substance Use	Level 2	H0005		1/4 hour	\$9.70
Peer Recovery Support	All levels	H2014		1/4 hour	\$19.82
Case Management - 1115 Waiver Pilot*	All levels	H0006		1/4 hour	\$19.82
Rehabilitation - Adult (age 21+)	Level 3.5	H0047		Daily	\$346.65
Rehabilitation - Child (age 20 or under)	Level 3.5	H0047	HA	Daily	\$499.77
Adolescent Residential (PRTF)	Level 3.5	H2036		Daily	\$499.77
Detoxification	Level 3.7	H0010		Daily	\$541.01