

REIMBURSEMENT POLICY	
Policy Name:	Opioid Treatment Programs (OTPs)
Policy Number:	PI-020
Original Effective Date:	01/01/2020
Annual Approval Date:	01/01/2026
Products:	All Medicare Products

Disclaimer

Highmark Wholecare medical claims reimbursement policy is intended to serve only as a general reference resource regarding payment and coverage for the services described. This policy does not constitute medical advice and is not intended to govern and/or otherwise influence medical decisions.

POLICY SCOPE

Highmark Wholecare provides coverage under the medical benefits of the Company's Medicare products for medically necessary episodes of care from Opioid Treatment Programs ("OTP") meeting certain accreditation requirements.

DEFINITIONS

Medication for Addiction Treatment ("MAT"): As defined by the Substance Abuse and Mental Health Services Administration ("SAMHSA"), the use of medications, often in combination with counseling and behavioral therapies. For Opioid Use Disorder ("OUD") treatment, these include formulations of methadone, buprenorphine, and naltrexone.

Opioid Treatment Programs ("OTP"): As defined by CMS, healthcare entities that focus on providing medication-assisted treatment for people diagnosed with OUD.

OUD Treatment Services: Items and services furnished by an OTP, as set forth in subparagraphs (A) through (F) of section 1861(jjj)(1) of the Social Security Act.

SAMHSA: Substance Abuse and Mental Health Services Administration

PROCEDURES

As per CMS guidelines, Highmark Wholecare shall allow reimbursement to Opioid Treatment Programs (“OTP”) for bundled payments of medically necessary Opioid Use Disorder (“OUD”) Treatment Services in an episode of care.

OTPs must meet the following requirements at the date of service to the member to bill for bundled payments of OUD Treatment Services:

1. Be enrolled in the Medicare program.
2. Have in effect a certification by the Substance Abuse and Mental Health Services Administration (SAMHSA) for the opioid treatment program.
3. Be accredited by an accrediting body approved by the SAMHSA.

Claims for bundled payment of OUD Treatment services should include Place of Service (POS) Code 58 (Non-residential Opioid Treatment Facility – a location that provides treatment for OUD on an ambulatory basis. Services include methadone and other forms of medication for addiction treatment (“MAT”)), including services furnished using audio-video or audio-only communication technology.

Per CMS guidelines, payment for medications or services delivered, administered or dispensed to a member as part of the OTP bundled payment are considered to be a duplicative payment if delivery, administration or dispensing of the same medications or services were also separately paid by Highmark Wholecare. Any duplicate payments will be recovered from the OTP.

Highmark Wholecare will reimburse providers meeting the conditions outlined above for the OTP services detailed in Appendix A.

POLICY SOURCES

CMS, *Final Rule Payment Rates for Opioid Treatment Programs, 2025 Payment Rates*, <https://www.cms.gov/medicare/payment/opioid-treatment-programs-otp/billing-payment/otp-payment-rates> (updated 11/20/2024)

CMS, *Opioid Treatment Programs*, <https://www.cms.gov/medicare/medicare-fee-for-service-payment/opioid-treatment-program> (last updated 11/20/2024)

SAMHSA, *Certification of Opioid Treatment Programs*, <https://www.samhsa.gov/medication-assisted-treatment/become-accredited-opioid-treatment-program> (last updated 06/11/2024)

Novitas Solutions, *Provider specialty: Opioid treatment program (OTP)*, <https://www.novitas-solutions.com/webcenter/portal/MedicareJL/pagebyid?contentId=00218102> (last updated 12/11/2024)

APPENDIX A

HCPCS	Description
G2067	Medication assisted treatment, methadone; weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing, if performed (provision of the services by a Medicare-enrolled Opioid Treatment Program)
G2068	Medication assisted treatment, buprenorphine (oral); weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a Medicare-enrolled Opioid Treatment Program)
G2069	Medication assisted treatment, buprenorphine (injectable) administered on a monthly basis; bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a Medicare-enrolled Opioid Treatment Program).
G2073	Medication assisted treatment, naltrexone; weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a Medicare-enrolled Opioid Treatment Program)
G2074	Medication assisted treatment, weekly bundle not including the drug, including substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a Medicare-enrolled Opioid Treatment Program)
G2075	Medication assisted treatment, medication not otherwise specified; weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing, if performed (provision of the services by a Medicare-enrolled Opioid Treatment Program)
G0533	Medication assisted treatment, buprenorphine (injectable) administered on a weekly basis; weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a Medicare-enrolled Opioid Treatment Program).

Intensity Add-On Codes

HCPCS	Description
G2076*	Intake activities, including initial medical examination that is conducted by an appropriately licensed practitioner and preparation of a care plan, which may be informed by administration of a standardized, evidence-based Social Determinants of Health Risk Assessment to identify unmet health-related social needs, and that includes the patient's goals and mutually agreed-upon

	actions for the patient to meet those goals, including harm reduction interventions; the patient's needs and goals in the areas of education, vocational training, and employment; and the medical and psychiatric, psychosocial, economic, legal, housing, and other recovery support services that a patient needs and wishes to pursue, conducted by an appropriately licensed/credentialed personnel (provision of the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to each primary code).
G2077*	Periodic assessment; assessing periodically by an OTP practitioner and includes a review of MOUD dosing, treatment response, other substance use disorder treatment needs, responses and patient-identified goals, and other relevant physical and psychiatric treatment needs and goals; assessment may be informed by administration of a standardized, evidence-based Social Determinants of Health Risk Assessment to identify unmet health-related social needs, or the need and interest for harm reduction interventions and recovery support services (provision of the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to each primary code.
G2078	Take-home supply of methadone; up to 7 additional day supply (provision of the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to code for primary procedure.
G2079	Take-home supply of buprenorphine (oral); up to 7 additional day supply (provision of the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to code for primary procedure.
G2080*	Each additional 30 minutes of counseling in a week of medication assisted treatment, (provision of the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to code for primary procedure.
G2215	Take-home supply of nasal naloxone (provision of the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to code for primary procedure.
G2216	Take-home supply of injectable naloxone (provision of the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to code for primary procedure.
G1028	Take-home supply of nasal naloxone; 2-pack of 8mg per 0.1 mL nasal spray (provision of the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to code for primary procedure.)
G0137	Intensive outpatient services; minimum of nine services over a 7-contiguous day period, which can include individual and group therapy with physicians or psychologists (or other mental health professionals to the extent authorized under State law); occupational therapy requiring the skills of a qualified occupational therapist; services of social workers, trained psychiatric nurses, and other staff trained to work with psychiatric patients; drugs and biologicals furnished for therapeutic purposes, excluding opioid agonist and

	antagonist medications that are FDA-approved for use in treatment of OUD or opioid antagonist medications for the emergency treatment of known or suspected opioid overdose; individualized activity therapies that are not primarily recreational or diversionary; family counseling (the primary purpose of which is treatment of the individual's condition); patient training and education (to the extent that training and educational activities are closely and clearly related to individual's care and treatment); diagnostic services (not including toxicology testing); (provision of the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to code for primary procedure, if applicable)
G0532	Take-home supply of nasal nalmeferene hydrochloride; one carton of two, 2.7 mg per 0.1 mL nasal sprays (provision of the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to each primary code.
G0534	Coordinated care and/or referral services, such as to adequate and accessible community resources to address unmet health-related social needs, including harm reduction interventions and recovery support services a patient needs and wishes to pursue, which significantly limit the ability to diagnose or treat an opioid use disorder; each additional 30 minutes of services (provision of the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to each primary code.
G0535	Patient navigational services, provided directly or by referral; including helping the patient to navigate health systems and identify care providers and supportive services, to build patient self-advocacy and communication skills with care providers, and to promote patient-driven action plans and goals; each additional 30 minutes of services (provision of the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to each primary code.
G0536	Peer recovery support services, provided directly or by referral; including leveraging knowledge of the condition or lived experience to provide support, mentorship, or inspiration to meet OUD treatment and recovery goals; conducting a person-centered interview to understand the patient's life story, strengths, needs, goals, preferences, and desired outcomes; developing and proposing strategies to help meet person-centered treatment goals; assisting the patient in locating or navigating recovery support services; each additional 30 minutes of services (provision of the services by a Medicare-enrolled Opioid Treatment Program); List separately in addition to each primary code.

*For dates of service on or after May 12, 2023, add the following modifiers on claims for HCPCS codes G2076, G2077, and G2080:

- **Modifier 95:** for counseling and therapy provided using audio-video telecommunications.
- **Modifier 93:** for counseling and therapy provided using audio-only telecommunications.

Policy History

Date	Activity
01/01/2019	Initial effective date
02/01/2021	Updated to include HCPCS G2215 and G2216
12/13/2021	Updated Policy Source weblinks
01/01/2022	Reviewed with no updates
10/06/2022	Rebrand; updated to include HCPCS G1028, modifiers for telehealth when using HCPCS G2080
03/10/2023	Updated Policy Source weblinks; removed HCPCS G2086-G2088 that are used for office-based settings rather than OTPs; clarified modifiers to be used for audiovisual/audio-only encounters to be used for HCPCS codes G2076/G2077/G2080 after the conclusion of the PHE.
02/15/2024	Added G0137 which is on the CY2024 fee schedule. Defined date after which specific audiovisual versus audio-only modifiers should be used for HCPCS codes G2076/G2077/G2080. Removed duplicative policy sources and updated last modified date for sources.
01/01/2025	Addition of G0533, G0532, G0534, G0535, and G0536, which are on the CY2025 fee schedule. Clarification for G2069 that it is for injectable buprenorphine that is administered on a monthly basis, per the CY2025 fee schedule descriptors. Updates to descriptions for G2076, G2077, G2215, G2216, G1028 to mirror the CY2025 fee schedule descriptors. Moved naloxone modifiers into additional intensity add-on codes to mirror the CY2025 Final Rule Payment Rates for OTPs documents. Removal of G2070, G2071, and G2072 per the CY2020 fee schedule and lack of availability of implantable buprenorphine. Updated policy sources and last modified date for sources.