

## Harmony/WellCare Covered Services and Authorization Guidelines Division of Alcoholism and Substance Abuse (DASA) Services

Nonparticipating providers, those who are not contracted with Harmony/WellCare, must have prior authorization for all services. All providers must have a State of Illinois Medicaid number.

Service Name	Billing Code(s)	Modifier(s)	Prior Authorization Required	Limits
SA Outpatient/Admission and Discharge Assessment	H0002		No	Limited to 8 unit (2 hours) per day
Individual – Therapy/Counseling, Substance Abuse Level I	H0004		No	Limited to 12 Units (3 hours) per day
Individual – Intensive Outpatient, Substance Abuse Level II	H0004	(TF)	No	Limited to 12 Units (3 hours) per day
Group – Therapy/Counseling, Substance Abuse Level I	H0005		No	Limited to 12 Units (3 hours) per day
Group – Intensive Outpatient, Substance Abuse Level II	H0005	(TF)	No	Limited to 12 Units (3 hours) per day
Medication Monitoring	H2010		No	Limited to 2 Units (30 minutes) per day
Psychiatric Evaluation	90791		No	Limited to 1 per day
Rehabilitation – Adult (age 21 and older)	H0047		Yes	Limited to 1 per day
Rehabilitation – Child (age 20 or younger)	H0047		Yes	Limited to 1 per day
Adolescent Residential	H2036		Yes	Limited to 1 per day
Detoxification	H0010		Yes	Limited to 1 per day

### DIAGNOSIS CODES

A primary diagnosis code is required on all DASA claims

#### Acceptable Primary Diagnosis Codes

ICD-9 (Services rendered prior to Oct.1, 2015)	ICD-10 (Services rendered on or after Oct. 1, 2015)
303-305.93	F10-F19.99

This material is for educational purposes only and is not intended to dictate what codes should be used in submitting claims. Health care providers are instructed to use the most appropriate codes based upon the medical record documentation and coding guidelines. Please note that the fact that a guideline is available and/or a service has been preauthorized/pre-certified is not a guarantee of payment.

Benefits will be determined once a claim is received and will be based upon, among other things, the member's eligibility and the terms of the member's certificate of coverage applicable on the date services were rendered. If you have questions, contact the number on the member's ID card for assistance.