

ASAM Criteria 4th Edition Service Updates and Rate Revisions

UnitedHealthcare Community Plan of Louisiana (UHC) is sharing IB 25-31: ASAM Criteria 4th Edition Service and Rate Revisions on behalf of the Louisiana Department of Health (LDH). Louisiana Legislature has allocated funding to support increased reimbursement rates for substance use disorder (SUD) service providers under Medicaid. LDH will implement this by either adopting new rates developed by third-party actuaries in accordance with the 4th Edition of the American Society of Addiction Medicine (ASAM) Criteria or by continuing the temporary 25% rate increase that began on October 1, 2024, whichever is higher.

These updates will take effect on January 1, 2026, for Medicaid beneficiaries aged 18 and older. LDH has revised the <u>Specialized Behavioral Health Services (SBHS) fee schedule</u> to reflect these changes.

Please note that room and board rates are no longer considered State Plan services and will now be reimbursed at the discretion of UHC.

The chart below reflects the upcoming changes. Red text indicates fields that have been changed, and strikethrough text indicates fields that will be removed.

					Master's	Bachelor's	Less than	Other
Code	Description	Modifier	Unit	Age	Level	Level	Bachelor's	Per
					(HO)	(HN)	(HM)	Diem
H0001	ALCOHOL AND/OR DRUG ASSESSMENT - Effective 1/1/2026		Visit	0-17	\$81.59	\$67.95	\$54.30	
H0001	ALCOHOL AND/OR DRUG ASSESSMENT - Effective 1/1/2026		Visit	18+	\$81.59	\$79.81	\$78.03	
H0004	ALCOHOL AND/OR DRUG SERVICES - INDIVIDUAL - Effective 1/1/2026		15 min	0-17	\$17.66	\$15.97	\$14.28	
H0004	ALCOHOL AND/OR DRUG SERVICES - INDIVIDUAL - Effective 1/1/2026		15 min	18+	\$18.57	\$16.80	\$15.02	
H0005	ALCOHOL AND/OR DRUG SERVICES - GROUP (PER PERSON) - Effective 1/1/2026	HQ	Visit	0-17	\$11.54	\$9.84	\$8.15	
H0005	ALCOHOL AND/OR DRUG SERVICES - GROUP (PER PERSON) - Effective 1/1/2026		Visit	18+	\$11.54	\$11.03	\$10.51	
H0005	ALCOHOL AND/OR DRUG SERVICES - FAMILY (PER FAMILY MEMBER) - Effective	HR, HS	Visit	0-17	\$26.91	\$22.98	\$19.04	
	1/1/2026							
H0005	ALCOHOL AND/OR DRUG SERVICES - FAMILY (PER FAMILY MEMBER) - Effective			18+	\$26.91	\$25.52	\$24.12	
	1/1/2026							
H0011	ALCOHOL AND/OR DRUG SERVICES - ACUTE DETOX 3.7-WM - Effective 1/1/2026	TG	Day	21+				\$425.61
H0011	ALCOHOL AND/OR DRUG SERVICES - ACUTE DETOX 3.7-WM ROOM AND BOARD	SE	Day	21+				\$43.50
H0012	ALCOHOL AND/OR DRUG SERVICES SUBACUTE DETOX 3.2 WM ROOM AND BOARD	SE	Day	21+				\$ 17.85
H0014	ALCOHOL AND/OR DRUG SERVICES - AMBULATORY DETOX 2.7 - Effective 1/1/2026		Day	0+				\$202.38
H0015	ALCOHOL AND/OR DRUG SERVICES - INTENSIVE OUTPATIENT 2.1 GROUP - Effective		Day	0+	\$180.00	\$150.00	\$120.00	
	1/1/2026							

Code	Description	Modifier	Unit	Age	Level		Bachelor's	
H0010	BEHAVIORAL HEALTH LONG TERM RESIDENTIAL 3.3 Effective 10/1/24	HE	Đay	21+	(HO)	(HN)	(HM)	Diem \$104.38
H0019	BEHAVIORAL HEALTH LONG TERM RESIDENTIAL - 3.3 ROOM AND ROARD			_				
110013		SE, HF	Day	21+				\$21.50
H2034	ALCOHOL AND/OR DRUG SERVICES - HALFWAY HOUSE 3.1 - Effective 10/1/2024		Day	0-17				\$75.19
H2034	ALCOHOL AND/OR DRUG SERVICES - HALFWAY HOUSE 3.1 - Effective 1/1/2026		Day	18+				\$120.26
H2034	ALCOHOL AND/OR DRUG SERVICES - HALFWAY HOUSE 3.1 (PRENATAL/POST PARTUM)	TH	Day	18-59				\$150.55
	- Effective 1/1/2026							
H2034	ALCOHOL AND/OR DRUG SERVICES - HALFWAY HOUSE 3.1 ROOM AND BOARD	SE	Day	21+				\$14. 70
H2036	ALCOHOL AND/OR DRUG TREATMENT PROGRAM - 3.5 - Effective 10/1/24		Day	0-17				\$265.59
H2036	ALCOHOL AND/OR DRUG TREATMENT PROGRAM - 3.5 - Effective 1/1/2026		Day	18+				\$303.67
H2036	ALCOHOL AND/OR DRUG TREATMENT PROGRAM 3.5 ROOM AND BOARD	SE	Day	21+				\$31.62
H2036	ALCOHOL AND/OR DRUG TREATMENT PROGRAM - 3.5 (PRENATAL/POST PARTUM) -	TH	Day	10-17				\$265.59
	Effective 10/1/24							
H2036	ALCOHOL AND/OR DRUG TREATMENT PROGRAM - 3.5 (PRENATAL/POST PARTUM) -	TH	Day	18-59				\$364.24
	Effective 1/1/2026							
H2036	ALCOHOL AND/OR DRUG TREATMENT PROGRAM - 3.7 - Effective 10/1/24	TG	Day	21+				\$404.13
H2036	ALCOHOL AND/OR DRUG TREATMENT PROGRAM 3.7 ROOM AND BOARD	SE, TG	Day	21+				\$56.26

UHC will update their claims processing systems within 90 days of the bulletin's release to ensure proper adjudication of ASAM services at the new rates and age brackets. UHC will reprocess any claims not paid correctly for services rendered on or after January 1, 2026, within 15 days of implementing system changes.

The chart excerpt from the Specialized Behavioral Health Services Fee Schedule is for informational purposes only. Please refer to the link above for the most current fee schedule on file.

General inquiries about the bulletin can be directed to Cindy Casarez at Cindy.Casarez2@la.gov.

LDH has published Informational Bulletin 25-31 for your reference IB25-31 revised-11.05.25.pdf.

For questions or concerns regarding any bulletin, contact UnitedHealthcare Community Plan at 1-866-675-1607.