

Supplemental Colorado Medicaid Fee Schedule January 1, 2012

These are the January 1, 2012 Colorado Medicaid reimbursement rates for Outpatient Substance Abuse Treatment, Special Connections, and Prenatal Plus services.

These procedure codes may only be billed by approved providers.

For information about the Outpatient Substance Abuse Treatment program, please see the [Outpatient Substance Abuse billing manual](#) or contact Sheeba Ibdunni at Sheeba.Ibdunni@state.co.us.

For information about the Special Connections and Prenatal Plus programs, please contact Kirstin Michel at Kirstin.Michel@state.co.us

Outpatient Substance Abuse Treatment

Procedure Code	Procedure Code Modifier(s)	Reimbursement Rate
H0001	HF	95.79
H0004	HF	13.14
H0005	HF	28.17
H0006	HF	15.97
S3005	HF	12.06
S9445	HF	12.03
T1007	HF	12.06
T1019	HF	12.06
T1023	HF	12.06

Special Connections

Procedure Code	Procedure Code Modifier(s)	Reimbursement Rate
H0004	HD + HQ	3.75
H0004	HD	14.00
H1000	HD	103.53
H1002	HD	8.63
H1003	HD	3.55
H2036	HD	156.31

Prenatal Plus

Procedure Code	Procedure Code Modifier(s)	Reimbursement Rate
H1005	TH + TF	375.60
H1005	TH + TG	798.15
H1005	TH + 52	140.86
H1005	TH	704.25