

Coverage Determination Protocol: Office-Based Opioid Treatment (Buprenorphine or Naltrexone)

**Protocol and Procedure Codes**

Phase	CPT Code	Service	Auth. Required	# of Units Per Protocol	# of Sessions	Rate
Assessment & Treatment Planning	90792	Diagnostic Interview	No	1 session	1 session	Rate on existing MD Fee Schedule
Induction	99245	O/P consultation for a new or established patient	No	Average 6 sessions	1-3 session(s); 1-2 weeks	Rate on existing MD Fee Schedule
Stabilization Phase (Choose 1 CPT Code per visit)	99213	Med. Mgmt.	No	Average 12 sessions	1-2 session(s) per week for 2 months	Rate on existing MD Fee Schedule
	99213+90833 99213+90836 May use when clinically indicated	Individual Therapy with Med. Mgmt.				
Maintenance	99213	Med. Mgmt.	No	Routine Med. Mgt.	1 session per month	Rate on existing MD Fee Schedule
	96372 Injectable Naltrexone when clinically indicated				1 session every 4 weeks	

This protocol is a companion to Optum’s guidelines on office-based treatment of opioid dependence. Please see Optum’s Coverage Determination Guideline (CDG), *Office-Based Opioid Treatment* [Office-Based Opioid Treatment CDG](#), as well as Optum’s Level of Care Guideline (LOC) for the same service [Opioid Treatment Services](#), [Office-Based Opioid Treatment LOC](#).