

This document is archived and is maintained for historical, research, or recordkeeping purposes only.



**ND Medicaid
Medication for Opioid Use Disorder (MOUD) Services Fee Schedule
as of 7/1/2024**

Inclusion or exclusion of a procedure code, supply, product, or service does not imply Medicaid coverage, reimbursement, or lack thereof.

Code	Modifier	Description	Medicaid Fee
H0016	U7	MOUD Intake	\$327.33
H0016		MOUD Established	\$97.94
H0020		Methadone & Administration at OTP Setting	\$3.50
H2010		Medication & Take-Home Packaging	\$3.50