NC-TOPPS Service Codes

Appendix A: Qualifying Services for Consumers Receiving Mental Health and Substance Abuse Services*

For Which NC-TOPPS is Required

Service Codes	Description of Services	Diagnosis	
		Mental Health	Substance Abuse*
Periodic Services			
9083290838 [†]	Psychotherapy		x
90846 [†]	Family Therapy without Patient		х
90847 [†]	Family Therapy with Patient		х
90849 [†]	Group Therapy (multiple family group)		x
90853 [†]	Group Therapy (non-multiple family group)		X
H0004 [†]	Behavioral Health Counseling - Individual Therapy		X
H0004 HQ [†]	Behavioral Health Counseling - Group Therapy		X
H0004 HR [†]	Behavioral Health Counseling - Family Therapy with Consumer		X
H0004 HS [†]	Behavioral Health Counseling - Family Therapy without Consumer		х
YP831	Behavioral Health Counseling (non-licensed provider)		x
YP832	Behavioral Health Counseling - Group Therapy (non-licensed provider)		х
YP833	Behavioral Health Counseling - Family Therapy with Consumer (non-licensed provider)		x
YP834	Behavioral Health Counseling - Family Therapy without Consumer (non-licensed provider)		х
H0005 [†]	Alcohol and/or Drug Group Counseling		х
YP835	Alcohol and/or Drug Group Counseling (non-licensed provider)		х
		l	
Community Based Ser		I	
H0015	Substance Abuse Intensive Outpatient Program (SAIOP)		X
H0040	Assertive Community Treatment Team (ACTT)	X	X
H2015 HT	Community Support Team (CST)	X	X
H2022	Intensive In-Home Services (IIH)	Х	Х
H2033	Multisystemic Therapy Services (MST)	Х	Х
H2035	Substance Abuse Comprehensive Outpatient Treatment (SACOT)		Х
YP630	Supported Employment - Individual	X	X
YM645	Long-term Vocational Support - Individual	Х	Х
H2023 U4	Supported Employment	Х	Х
H2026 U4	Ongoing Supported Employment	X	X
Facility Based Day Ser H0035	vices Mental Health - Partial Hospitalization	v	
H2012 HA	Child and Adolescent Day Treatment	X X	X
пити па	Clind and Adolescent Day Treatment	Α	, x
Opioid Services			
H0020	Opioid Treatment		Х
Residential Services			
H0012 HB	SA Non-Medical Community Residential Treatment - Adult		х
H0013	SA Medically Monitored Community Residential Treatment	х	х
H0019	Behavioral Health – Level III - Long Term Residential	х	х
110000	Residential Treatment - Level II - Program Type (Therapeutic Behavioral		
H2020	Services)	X	X
YA230	Psychiatric Residential Treatment Facility	X	X
YP780	Group Living - High	X	X
Therapeutic Foster Car		,	
05445	Residential Treatment - Level II - Family Type (Foster Care Therapeutic		
S5145	Child)	X	X

^{*} NOTE: All substance abuse consumers receiving the above services through State Funds must participate in NC-TOPPS in order to comply with federal block grant requirements.

^{**} NOTE: When a child or adolescent consumer begins mental health and/or substance abuse treatment, if they are enrolled in the CDW and involved in the juvenile justice system, they are required to be entered in NC-TOPPS.

[†] If the consumer has a Substance Abuse diagnosis and is only receiving outpatient services with these service codes funded through Medicaid Basic Benefits, the consumer is not expected to participate in NCTOPPS.