

Five County Mental Health Authority

Level of Care Standard Care Guidelines for Adult Substance Abuse

<b>Service</b>	<b>Level I ASAM: .5 or I</b>	<b>Level II ASAM: II.I</b>	<b>Level III ASAM: II.5</b>	<b>Level IV ASAM: &gt;II.5</b>
Peer Support	Initial authorization for 10 hours for 30 days and 5 hours each 30 days for an additional 60 days. Reauthorization of 5 hours per each 30 days for 90 day time period.	Initial authorization for 10 hours for 30 days and 5 hours each 30 days for an additional 60 days. Reauthorization of 5 hours per each 30 days for a 90 day time period.	Initial authorization for 10 hours for 30 days and 5 hours each 30 days for an additional 60 days. Reauthorization of 5 hours per each 30 days for a 90 day time period.	Initial authorization for 10 hours for 30 days and 5 hours each 30 days for an additional 60 days. Reauthorization of 5 hours per each 30 days for a 90 day time period.
Detoxification	X	Ambulatory – 7 day authorization	Medical Detoxification	ADATC
Diagnostic Assessment	1 event per year	1 event per year	1 event per year	1 event per year
Specialized SA assessment	Authorize 1 event per year	Authorize 1 event per year	Authorize 1 event per year	Authorize 1 event per year
Outpatient - Individual	8 sessions for the fiscal year.	8 sessions for the fiscal year. May reauthorize for additional 8 sessions with specialist review.	8 sessions for the fiscal year. May reauthorize for additional 8 sessions with specialist review.	8 sessions for the fiscal year. May reauthorize for additional 8 sessions. Additional sessions require Specialist Review.
Outpatient – Substance Abuse Group	72 units for six months.	72 units for six months. May reauthorize for additional 72 units with specialist review.	72 units for six months. May reauthorize for additional 72 units with specialist review.	72 units for six months. May reauthorize for additional 72 units. Additional units require Specialist Review.
SAIOP	X	Authorize one event a day, three days a week for 12 weeks. Can reauthorize for an additional two weeks with specialist review.	Authorize one event a day, three days a week for 12 weeks. Can reauthorize for an additional two weeks with specialist review.	Authorize one event a day, three days a week for 12 weeks. Can reauthorize for an additional two weeks with specialist review.
Community Support Team	X	X	Initial authorization for 30 days/16 hours. Reauthorize	Initial authorization for 30 days/16 hours. Reauthorize

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 Revised 7/1/2010

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			for 60 days 16 hours/month. Thereafter 8 hours/month. Maximum of 32 units in a 24 hr. period, unless specialist review. Provider must also submit step down plan (PCP) after the first 90 days. Can authorize up to 16 units while in a psychiatric inpatient facility with Specialist Review.	for 60 days 16 hours/month. Thereafter 8 hours/month. Maximum of 32 units in a 24 hour period, unless specialist review. Provider must also submit step down plan (PCP) after first 90 days. Can authorize up to 16 units while in a psychiatric inpatient facility with Specialist Review.
Community Support		4 hours per 30 days of case management only on a case by case basis. Authorization period of 60 days per authorization.	4 hours per 30 days of case management only on a case by case basis. Authorization period of 60 days per authorization.	4 hours per 30 days of case management only on a case by case basis. Authorization period of 60 days per authorization.
Inpatient	X	X	Initial 4 day authorization. Can reauthorize for 3 additional days. Days 8-10 can be authorized only by Clinical Director. No further authorization after day 10	Initial 4 day authorization. Can reauthorize for 3 additional days. Days 8-10 can be authorized only by Clinical director. No further authorizations after day 10.
Psychiatric Evaluation	Authorize 1 evaluation per year	Authorize 1 evaluation per year.	Authorize 1 evaluation per year.	Authorize 1 evaluation per year.
Medication Management	Up to 12 events a year - preauthorized	Up to 12 events a year - preauthorized	Up to 12 events a year - preauthorized	Up to 12 events a year – preauthorized
Psychological Evaluation	Specialist Review for 1 authorization per year.	Specialist Review for 1 authorization per year.	Specialist Review for 1 authorization per year.	Specialist Review for 1 authorization per year.
Mobile Crisis	Preauthorized	Preauthorized	Preauthorized	Preauthorized
Facility Based Crisis	Authorized by Crisis Provider for up to 3 days (if a	Authorized by Crisis Provider for up to 3 days (if a	Authorized by Crisis Provider for up to 3 days (if a	Authorized by Crisis Provider for up to 3 days (if a

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	weekend.) Initial authorization for 4 days. Utilization Review reauthorize for up to 7 total days.	weekend.). Initial authorization for 4 days. Utilization Review reauthorize for up to 7 total days.	weekend.) . Initial authorization for 4 days. Utilization Review reauthorize for up to 7 total days.	weekend.). Initial authorization for 4 days. Utilization Review reauthorize for up to 7 total days.
Halfway House	X	X	X	Initial authorization for 90 days. Reauthorization in 90 day periods.

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