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|  | <b>Addictive and Mental Disorders Division</b><br>Medicaid Services Provider Manual for Substance Use Disorder and Adult Mental Health |
|   | <b>Date effective:</b><br>July 1, 2020<br><br><b>Date revised:</b><br>July 1, 2020   |
| <b>Policy Number:</b><br>530  | <b>Subject:</b><br>SUD Partial Hospitalization (ASAM 2.5) Adult and Adolescent   |

### Definition

The purpose ASAM 2.5 therapeutic and behavioral interventions is to address the SUD in the structured setting and improve the member’s successful functioning in the home, school, and/or community setting. SUD Partial Hospitalization includes a minimum of 20 hours of skilled treatment services per week. ASAM 2.5 is provided in a setting that complies with licensure rule and has direct access to psychiatric, medical, and laboratory services on site.

### Medical Necessity Criteria

Member must meet the SUD criteria as described in this manual and meet the ASAM criteria for diagnostic and dimensional admission criteria for ASAM 2.5 level of care.

### Provider Requirements

ASAM 2.5 must be provided by a state-approved substance use disorder program.

### Service Requirements

- (1) Services must be provided in accordance with all state and federal regulations pertaining to the administration of the service.
- (2) The provider must adhere to the ASAM criteria service standards for service planning and level of care placement characteristic category standards. These categories include:
  - (a) therapies;
  - (b) support systems;
  - (c) assessment/ITP review;
  - (d) staff; and
  - (e) documentation.

- (3) ASAM 2.5 is billed as a bundled service and includes the following:
- (a) individual SUD therapy;
  - (b) group SUD therapy;
  - (d) family SUD therapy; and
  - (e) psychosocial rehabilitation.
- (4) It is not required that each member receiving the ASAM 2.5 bundle receive every service listed above. Medically necessary services must be provided and documented in the individualized treatment plan and the services received must be documented clearly in the member's treatment file.

### **Utilization Management**

- (1) Prior authorization is not required.
- (2) Continued stay review not required.
- (3) Member must continue to meet the SUD criteria as described in this manual and meet the ASAM criteria diagnostic and dimensional admission criteria SUD Partial Hospitalization (ASAM 2.5) Adult and Adolescent level of care.