

**MACOMB COUNTY OFFICE OF SUBSTANCE ABUSE
INITIAL AUTHORIZATION MATRIX**

SERVICE CATEGORY	ASAM DIMENSIONAL CRITERIA RELATED TO ANCILLARY REFERRALS OR SPECIAL AUTHORIZATION PROCEDURES	COVERED SERVICES	INITIAL AUTHORIZATION <i>(Note: Sessions may be adjusted up or down based on individual circumstances, diagnosis, ASAM placement and medical necessity criteria.)</i>
OUTPATIENT			
First Admission, readmission or aftercare from intensive services Requires substance use disorder diagnosis	Dimension 1 minimal to stable, Dimensions 2 & 3, minimal or stable. At least one of Dimensions 4 - 6 meet ASAM Level I criteria and none reach Levels II - IV.	Assessment, Individual, Group, Didactic, Case Management	For up to a 90 day period of time: One (1) <i>assessment per episode of care, 12 group and five (5) individual sessions</i> . Up to 24 didactic units (15 minute units) for individuals who have never been in treatment or have not received SUD education. Only one assessment is allowed within a six month period of time within the program. Reauthorization as clinically indicated by the AMS.
First Admission, readmission or aftercare from intensive services with Co-occurring psychiatric and/or rule out psychiatric disorder and/or physical disorder Requires substance use disorder diagnosis. Co-occurring services also requires mental health diagnosis and stage matched interventions	If Dimensions 2 and/or 3 are of at least moderate intensity, AMS and/or Treatment Provider should also refer the consumer to their primary care provider for ancillary psychiatric and/or medical services. Community grant clients may be eligible for psychiatric evaluation and short-term medication management at the program. At least one of Dimensions 4 - 6 meet ASAM Level I criteria and none reach Levels II – IV.	Assessment, Individual, Group, Didactic, Case Management, Psychiatric Evaluation, Medication (Med) Review	For up to a 90 day period of time: One (1) <i>assessment per episode of care, 12 group and five (5) individual sessions</i> . Up to 24 didactic units (15 minute units) for individuals who have never been in treatment or have not received SA education. Only one assessment is allowed within a six month period of time within the program. Reauthorization as clinically indicated by the AMS. Psychiatric Services: Community Grant funded eligible consumers can also receive one (1) psychiatric evaluation and up to two medication reviews when treatment for co-occurring mental health disorder is indicated. Medicaid/HMP recipients should be directed to their Health Plan or private psychiatrist for psychiatric services for mild to moderate disorders or to the AMS for MCCMH eligible services for severe mental health disorders. Reauthorization as clinically indicated by the AMS.
Admission or readmission with Co-occurring serious mental illness and	Dimension 3 must be high intensity, but not severe enough to interfere with or preclude receiving outpatient services. The consumer is served by specialty CMH system.	Services to be provided within the context of comprehensive treatment services through CMH	N/A

ADOLESCENT EARLY INTERVENTION OUTREACH PROGRAM (AOP)			
Admission or Readmission	<p>Request for authorization for AOP services in the schools must be submitted to the AMS through the data system.</p> <p>If adolescent is in need of continued treatment or is not appropriate for the AOP services in the school due to severity of problems and diagnosis on ASAM Dimensions 1 or 4 - 6, treatment provider must submit authorization request for adolescent at a clinic location or refer adolescent for a phone screen at AMS or covered health insurance provider.</p> <p>If Dimensions 2 and/or 3 are of at least moderate intensity, the treatment provider should also refer for ancillary psychiatric and/or medical services.</p>	Assessment, Individual, Group	<p>For up to a 90 day period of time: One (1) Assessment, five (5) early intervention or group sessions and up to four (4) care coordination sessions within 90 days to be completed in the school setting. Not eligible for continued stay. If issues cannot be addressed within the six sessions, referral to a MCOSA funded or covered healthcare provider is suggested.</p> <p>Not eligible for reauthorization.</p>

SIGNIFICANT OTHER ADULT, ADOLESCENT, CHILD			
Admission	<p>Adults, adolescents and children who are currently living with, or have lived with a substance abuser within the past six months, are eligible for outpatient treatment with a specific focus on co-dependency, enabling and self-help involvement. Individual not otherwise eligible for MH services.</p>	Assessment, Individual, Group	<p>Funding will cover one (1) assessment and up to 11 sessions in 90 days.</p> <p>Significant other admissions are not eligible for reauthorization for substance use services without a change in DSM diagnosis due to a substance use disorder.</p>

RELAPSE PREVENTION			
Admission	<p>Adult or adolescents with a previously diagnosed substance use disorder who are currently experiencing environmental, social, familial, legal or other stressors that are threatening their sobriety, are eligible for outpatient treatment with a specific focus on relapse prevention, improved coping skills and linkage to community supports and resources. Individual must not otherwise be eligible for Mental Health services.</p>	Assessment, Individual, Group	<p>For up to a 90 day period of time: One (1) <i>assessment per episode of care, twelve (12) group and five (5) individual</i> sessions. Psychiatric services are excluded.</p> <p>Relapse Prevention admissions are not eligible for reauthorization for substance use services.</p>

OUTPATIENT OPIOID TREATMENT SERVICES			
<p>First or readmission for Opioid Treatment Services (OTS) Admission Requires opioid substance use disorder diagnosis</p>	<p>Must meet ASAM criteria for OTS Dimensions 1 – 6. Must meet the Michigan Department of Community Health (MDCH) and Federal requirements for admission or readmission into OTS and be approved by program physician. AMS will determine eligibility for funding based on likelihood of successfully meeting the criteria and no other complicating factors that would indicate the need for a more intensive level of treatment. Must be screened by the AMS as meeting the above criteria and as being a good candidate for an outpatient level of treatment.</p>	<p>Assessment, Individual, Group, Didactic, case management, OTS medication, and related medical services</p>	<p>For up to a 90 day period of time: One (1) assessment per episode of care, 12 group and five (5) individual sessions. Up to 16 didactic units (15 minute units) for individuals who have never been involved with OTS or who have not received OTS didactics within the past 12 months. Only one assessment is allowed within a six month period of time within the program. One (1) Initial Medical Evaluation and two (2) medical reviews, or as medically indicated. Daily dosing. Six (6) drug screens. One (1) lab as allowed by contract. Reauthorization as clinically indicated by the AMS</p>
<p>OTS Admission with Co-occurring psychiatric or physical disorder - first or readmission Requires opioid substance use disorder diagnosis Co-occurring services also requires mental health diagnosis and stage matched interventions</p>	<p>Must meet ASAM criteria for OTS. Must meet the Michigan Department of Community Health (MDCH) and Federal requirements for admission or readmission into OMT and be approved by program physician. AMS will determine eligibility for funding based on likelihood of successfully meeting the criteria and no other complicating factors that would indicate the need for a more intensive level of treatment. Must be screened by the AMS as meeting the above criteria as being a good candidate for an outpatient level of treatment. If Dimensions 2 and/or 3 are of at least moderate intensity, AMS and/or Treatment Provider should refer consumer to Health Plan for ancillary psychiatric or medical services. If mental health issues are severe, services are typically provided conjointly by both CMH system and OMT treatment provider, with coordination of care among treating and prescribing physicians and clinical staff.</p>	<p>Assessment, Individual, Group, Didactic, Case Management, OTS medication, and related medical services</p>	<p>For up to a 90 day period of time: One (1) assessment per episode of care, 12 group and five (5) individual sessions. Up to 16 didactic units (15 minute units) for individuals who have never been involved with OTS or who have not received OTS didactics within the past 12 months. One (1) Initial Medical Evaluation and up two (2) medical reviews or as medically indicates. Daily dosing. Six (6) drug screens. One (1) lab as allowed by contract. Only one assessment is allowed within a six month period of time within the program. Reauthorization as clinically indicated by the AMS</p>

<p>Admission for Short Term (30-day) Methadone Detoxification</p> <p>-or-</p> <p>Readmission</p>	<p>Must meet the criteria for admission for Short Term (30-day) Opioid Detoxification as described in MDCH and Federal regulations.</p> <p>Must be screened by the AMS as having met the above criteria.</p> <p>See above regarding Dimensions 2 and/or 3 for moderate and severe level referrals.</p> <p>Dimension 4-6 do not indicate the need for a more intensive level of treatment.</p>	<p>Assessment, Individual, Methadone, and related medical services</p>	<p>One (1) assessment and one individual session per week during 30-day detoxification period.</p> <p>Reauthorization as clinically indicated by the AMS.</p>
<p>Admission for Long Term (90-day) Methadone Detoxification</p> <p>-or-</p> <p>Readmission</p>	<p>Must meet the criteria for admission for Long Term (90-day) Opioid Detoxification as described in MDCH and Federal regulations.</p> <p>Must be screened by the AMS as having met the above criteria.</p> <p>See above for Dimensions 2 and/or 3 for moderate or severe level referrals.</p> <p>Dimensions 4-6 do not indicate the need for a more intensive level of treatment.</p>	<p>Assessment, Individual, Group, Didactic, Methadone, and related medical services</p>	<p>For up to a 90 day period of time: One (1) assessment per episode of care, 12 group and five (5) individual sessions. Up to 16 didactic units (15 minute units) for individuals who have never been involved with OMT or who have not received OMT didactics within the past 12 months.</p> <p>One (1) Initial Medical Evaluation and up to two (2) medical reviews. Daily dosing. Six (6) drug screens. One (1) lab as allowed by contract.</p> <p>Only one assessment is allowed within a six month period of time within the program.</p> <p>Reauthorization as clinically indicated by the AMS.</p>

INTENSIVE OUTPATIENT (IOP)			
<p>First IOP Admission or transfer from existing outpatient program or previous intensive services attempted or completed <i>more than 12 months ago</i>. Requires substance use disorder diagnosis.</p> <p>Co-occurring services also requires mental health diagnosis and stage matched interventions.</p>	<p>Must be screened by the AMS and meet ASAM Placement Criteria for IOP services (Level II).</p> <p>Dimension 1 of minimal or no risk of withdrawal.</p> <p>If Dimensions 2 and/or 3 are of at least moderate intensity, AMS and/or Treatment Provider should also refer consumer to their Health Plan for ancillary psychiatric and/or medical services.</p> <p>Community grant consumers receive psychiatric evaluation and medication reviews as clinically indicated.</p> <p>Dimensions 4 - 6 do not indicate need for a more intensive level of treatment with 24 hour supervised care but at least one reaches moderate severity.</p>	<p>Chair Day, assessment, individual, psychiatric and med review</p>	<p>Chair days up to contracted full program, one (1) assessment per episode of care, two (2) individual sessions. Only one assessment is allowed within a six month period of time within the program.</p> <p>Community grant funded consumers with co-occurring mental health disorder may one (1) psychiatric evaluation and one (1) medication review per IOP episode.</p> <p>Reauthorization as clinically indicated by the AMS.</p>
<p>IOP admission with previous intensive treatment completed within the past 12 months.</p> <p>Requires substance use disorder diagnosis.</p> <p>Co-occurring services also requires mental health diagnosis and stage matched interventions</p>	<p>Must be screened by the AMS and meet ASAM Placement Criteria for IOP.</p> <p>Dimension 1 of minimal or no risk of withdrawal.</p> <p>See above for Dimensions 2 and/or 3 of a moderate intensity level.</p> <p>Dimensions 4 - 6 do not indicate need for a more intensive level of treatment with 24 hour supervised care supervised care but at least one reaches moderate severity.</p>	<p>Chair Day, assessment, individual, psychiatric and med review</p>	<p>Ten (10) Chair Days, one (1) assessment and two (2) individual sessions. Requests for additional days will be considered by AMS based on individual circumstances, diagnosis and medical/clinical necessity.</p> <p>Client may receive up to one (1) reassessment, one (1) individual session, one (1) psychiatric evaluation and one (1) medication review per IOP episode.</p> <p>Reauthorization as clinically indicated by the AMS.</p>

SUB-ACUTE DETOX			
First Admission -or- Readmission	<p>Must NOT meet Dimension 1 criteria for acute medical detoxification in a hospital setting. See NOTE below.</p> <p>If Dimensions 2 and/or 3 are of a seriously high intensity, clients must be considered an urgent referral to their Health Plan, CMH or to an emergency room for psychiatric and/or medical immediate treatment.</p>	<p>Residential, room and board</p> <p>(NOTE: Medicaid/HMP recipients have the room & board portion of the bed day paid for out of Community Grant funds)</p>	<p>Up to five (5) days of sub-acute detoxification based on medical need.</p> <p>Reauthorization as clinically indicated by the AMS.</p>

INTENSIVE RESIDENTIAL			
First Admission or transfer from existing outpatient or IOP program or previous intensive services attempted or completed more than 12 months ago. Requires substance use disorder diagnosis	<p>Must be screened by the AMS and meet the ASAM Placement Criteria for residential (Level 3.5 -3.7). Dimension 1 of minimal or no risk of withdrawal or must have already been completed for this episode of care. See Note below.</p> <p>If Dimensions 2 and/or 3 are of at least moderate intensity, AMS and/or treatment Provider should refer the consumer to their Health Plan for ancillary psychiatric and/or medical services after discharge.</p> <p>If Dimensions 2 and/or 3 are of a seriously high intensity, clients must be considered an urgent referral to their MHP, to CMH or to an emergency room for immediate treatment.</p> <p>*Meets criteria for residential treatment on any of Dimensions 4 - 6.</p>	<p>Residential, room and board</p> <p>(NOTE: Medicaid/MHP/MChild recipients have the room & board portion of the bed day paid for out of Community Grant funds)</p>	<p>Bed days up to contracted amount.</p> <p>Reauthorization as clinically indicated by the AMS.</p>

<p>Readmission if intensive services have been completed within the last 12 months.</p>	<p>Must be screened by the AMS and meet ASAM Placement criteria for residential 3.5-3.7).</p> <p>Dimension 1 of minimal or no risk of withdrawal or must have already been completed for this episode of care. See Note below.</p> <p>If Dimensions 2 and/or 3 are of at least moderate intensity, AMS and/or treatment Provider should refer the consumer to their Health Plan for ancillary psychiatric and/or medical services after discharge.</p> <p>If Dimensions 2 and/or 3 are of a seriously high intensity, clients must be considered an urgent referral to their MHP, to CMH or to an emergency room for immediate treatment.</p> <p>Must meet the criteria for Residential treatment in any one of Dimensions 4 - 6.</p>	<p>Residential, room and board</p>	<p>Ten (10) intensive residential days. Additional days may be approved by AMS based on individual circumstances, diagnosis and medical/clinical necessity.</p> <p>Reauthorization as clinically indicated by the AMS.</p>
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RESIDENTIAL-PROGRAM WOMEN'S SPECIALTY

<p><i>First Admission, admission from current outpatient program - or- Previous intensive treatment has been attempted or completed more than 12 months ago.</i></p>	<p>Must be screened by the AMS and meet the ASAM Placement Criteria and Women's Specialty program criteria for admission.</p> <p>Dimension 1 of minimal or no risk of withdrawal or must have already been completed for this episode of care. See NOTE below.</p> <p>If pregnant, Medicaid consumer should be referred to QHP for prenatal and/or other Dimension 2 physical concerns. Community grant clients should be referred to their MD/OB and/or to DHHS for referral for prenatal care and Medicaid eligibility.</p> <p>If Dimension 3 is at least of moderate intensity, AMS and/or Treatment Provider should also refer the consumer to their Health Plan for ancillary psychiatric services after discharge. Must meet the criteria for Residential treatment in any one of Dimensions 4 - 6.</p> <p>NOTE: Detox from opiates may not be recommended for pregnant opiate dependent clients due to related risks. Based on AMS determination of individual needs, pregnant clients can either be referred to outpatient treatment with methadone as an adjunct or, if not a good candidate for outpatient due to other drug use, can be started or maintained on methadone while in sub-acute detox and Women's Specialty Residential Treatment.</p>	<p>Residential, room and board</p>	<p>Bed days up to contracted amount.</p> <p>Reauthorization as clinically indicated by the AMS.</p>
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<p>Readmission if intensive services have been completed within the last 12 months. (Aborted intensive treatment attempts are not considered completed for these purposes.)</p>	<p>Must be screened and authorized by AMS.</p> <p>Dimension 1 of minimal or no risk of withdrawal or must have already been completed for this episode of care. See NOTE below.</p> <p>See above for Dimensions 2 and/or 3 moderate severity referral.</p> <p>Must meet criteria for residential on any of Dimensions 4 - 6.</p> <p>NOTE: Detox from opiates is may not be recommended for pregnant opiate dependent clients due to risks. Based on AMS determination of individual needs, pregnant clients can either be referred to outpatient treatment with methadone as an adjunct or, if not a good candidate for outpatient due to other drugs use, can be started or maintained on methadone while in sub-acute detox and transfer to Women's Specialty Residential Treatment.</p>	<p>Residential, room and board</p>	<p>Ten (10) residential days. Additional days may be approved by AMS based on individual circumstances, diagnosis and medical/clinical necessity.</p> <p>Reauthorization as clinically indicated by the AMS.</p>
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RESIDENTIAL (ASAM Level 3.1)			
<p>Transfer from existing outpatient/IOP/short-term residential program or previous intensive services attempted or completed more than 12 months ago. Requires substance use disorder diagnosis</p>	<p>Must be screened and authorized by AMS and meet the ASAM Placement Criteria for residential treatment (3.1-3.3)</p> <p>If Dimensions 2 and/or 3 are of at least moderate intensity, AMS and/or treatment Provider should refer the consumer to their Health Plan for ancillary psychiatric and/or medical services after discharge.</p> <p>If Dimensions 2 and/or 3 are of a seriously high intensity, clients must be considered an urgent referral to their MHP, to CMH or to an emergency room for immediate treatment.</p> <p>Must meet criteria for long-term residential on any of Dimensions 4 - 6.</p>	<p>Residential, room and board</p>	<p>Bed days up to contracted amount.</p> <p>Reauthorization as clinically indicated by the AMS.</p>

<p>Readmission if intensive services have been completed within the last 12 months. (Aborted treatment attempts are not considered completed for these purposes.) Requires substance use disorder diagnosis</p>	<p>Must be screened and authorized by AMS.</p> <p>If Dimensions 2 and/or 3 are of at least moderate intensity, AMS and/or treatment Provider should refer the consumer to their Health Plan for ancillary psychiatric and/or medical services after discharge.</p> <p>If Dimensions 2 and/or 3 are of a seriously high intensity, clients must be considered an urgent referral to CMH or to an emergency room for immediate treatment.</p> <p>Must meet criteria for long-term residential on any of Dimensions 4 - 6.</p>	<p>Residential, room and board</p>	<p>Bed days up to contracted amount.</p> <p>Reauthorization as clinically indicated by the AMS.</p>
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For intensive services (Intensive Outpatient, Opioid Treatment, Residential, Sub-Acute Detoxification services) consumers must be screened and services prior-authorized by the Access Management Services (AMS). Screening may take place via phone or completion of a Change in Level of Treatment form.