

MACOMB COUNTY COMMUNITY MENTAL HEALTH SUBSTANCE USE SERVICES RECOVERY HOME SERVICES GUIDELINES

The intent of these guidelines is to provide providers with information on individuals eligible for Macomb County Community Mental Health Substance Use Services Department (MCCMH-SUD) funding for recovery housing services. The goal of providing recovery housing services is to provide a supportive recovery environment in order to help reduce the incidence of drug and alcohol use disorders, prevent relapse, and support individuals in their recovery.

A. Eligibility Screening Guidelines

1. Individual meets the criteria for MCCMH-SUD funding (income, residency, and substance use disorder diagnosis).
2. Individual is actively engaged in MCCMH-SUD funded treatment services.
3. Individual is in need of a highly structured and monitored living environment where recovery support is available.
4. Individual has experienced a history of unsuccessful recovery attempts, which have resulted in a return to chronic use.
5. Individual has significant negative factors in the areas of family, social, work, or environment that place him/her at risk for relapse without a structured living environment.
6. Individual is in the action stage of change and motivated to continue treatment and work with other community resources as needed (ie: peer recovery coach, MRS, DHHS, etc).
7. Individual is able and willing to actively seek employment and/or other means to become financially able to support themselves.
8. Individual has completed an intake and two other clinical services (group therapy, didactic, and/or individual therapy) with staff at your agency during this treatment episode.

B. Admission Guidelines

The following admission criteria pertain to recovery homes:

1. Individual has completed or does not need medical or sub-acute detoxification.
2. Individual has successfully completed residential treatment, as applicable.
3. Individual does not present with a severe medical or psychiatric condition that would interfere in his/her ability to function in a recovery home environment.
4. Individual adheres to the requirement of attending an appropriate MCCMH-SUD funded treatment service while residing in the Recovery Home.
5. If referred by an outpatient treatment provider, the individual has completed an intake appointment as well as two clinical sessions

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(group therapy, didactic, and/or individual session) with staff at your agency during this treatment episode.

6. Individual demonstrates active motivation for recovery and a desire to work towards self-sufficiency.
7. Individual is able to independently care of daily living needs.
8. Individual is able and willing to actively seek employment and/or other means to become financially able to support themselves.

C. Recovery Housing Placement

1. Treatment Provider will submit a Change of Level of Care Request Form for recovery housing with a signed release to the Managed Care Operations (MCO) via the FOCUS system.
2. An MCO staff member will review the request and make a recommendation for recovery house placement based on the admission requirements and availability.
3. An MCO staff member will communicate the placement decision to the referring Treatment Provider, who will assist the client in arranging admission to the approved recovery home.
4. Recovery Home Provider will inform MCO on a regular basis (at least weekly) of bed availability.
5. Recovery Home denials will be sent to the Treatment Provider indicating why the individual is not eligible for funded recovery housing.

D. Recovery House Admission Procedure

1. Recovery Home Provider will complete the MCCMH-SUD admission packet with the client
2. Recovery Home Provider will complete the FOCUS Registry and Authorization request within three days of client entering services.
3. Recovery Home Provider will ensure a signed Release of Information (MDHHS 5515) is completed for each client and submit copy to MCO within FOCUS with the Registry request.
4. Recovery Home Provider will assist the client in developing an individualized recovery plan, or if currently receiving Peer Services, obtain a copy of the plan.

E. Recovery Home Authorizations

1. Individuals referred for recovery housing by an MCCMH-SUD contracted treatment provider may be eligible for up to 60 days of funded recovery housing at a MCCMH-SUD contracted recovery home in Macomb County.

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2. Individuals are only eligible for one 60-day authorization every six months. Individuals who have already received one approved authorization and intake at a MCCMH-SUD funded recovery home within a six-month period, will have recovery home requests denied.
3. Once the six-month period has passed, they may be eligible for another 60-day authorization for recovery housing at an MCCMH-SUD contracted recovery home provider, should they meet all required eligibility criteria and meet medical necessity.
4. Should an individual who is approved for recovery housing desire a move to another recovery home, they must contact their therapist at the MCCMH-SUD contracted treatment agency to request a new recovery home referral. If approved, a referral will be made to a different MCCMH-SUD funded recovery home and the days remaining in their initial 60-day authorization will be authorized. (E.g., if the individual spent 30 days at the first recovery home, they would be approved for 30 days at the second recovery home).
5. If the individual received initial approval from MCO for recovery housing but did not complete an intake at an MCCMH-SUD contracted recovery home, they may still be eligible for 60 days of funded recovery housing.

E. Continued Stay Requests

1. If a client is still in need of recovery home services after sixty days and not able to independently secure financial resources to pay for housing due to extraordinary circumstances, the Recovery Home Provider may request a reauthorization for continued stay through MCO, seven (7) days prior to the expiration date of the initial authorization, via the FOCUS system.
2. Eligibility for continued stay requires demonstration that client is making progress towards recovery goals, is participating in a MCCMH-SUD treatment program and is actively involved in the recovery process, as well as an explanation of the need for additional length of stay.
3. Recovery home completes the FOCUS Authorization request form, attaches the completed MCCMH-SUD Recovery Home Continued Stay Criteria form, and submits request in FOCUS.
4. If the criteria for continued authorization is met, the MCO will approve up to an additional thirty (30) days of service, with a client copay rate of 50% of the contracted rate. The Recovery Home Provider will complete the MCCMH-SUD Recovery Home Fee Agreement Form, obtain the client signature acknowledging agreement of the fee, retain the agreement as part of the client file and provide the client with a copy of the agreement.

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5. If continued stay is approved by MCO and the Recovery Home Provider deems that the client is not able to pay the copay amount, then documentation by the Recovery Home Provider to request a fee waiver must be submitted to MCCMH-SUD for approval and kept on file, prior to the reauthorization/continued stay date. If approved by MCCMH-SUD, the Provider must then enter a new FOCUS SUD Self Pay policy to reflect 0% copay for the additional 30 days.
6. If the continued stay is not approved by MCO, the Recovery Home provider must assist the individual in moving to a self-pay plan at the home or assist them in finding other housing options via their Treatment Provider.

F. Recovery Home Discharge Procedures

1. After the client's last day of MCCMH-SUD funded service, complete the FOCUS Discharge record. The information entered should reflect the client's status on the last day of MCCMH-SUD funded services.
2. Discharge information needs to be entered into the FOCUS system as soon as possible after the last day of service, but no later than 7 days after discharge from the program/MCCMH-SUD funding.

G. Reporting Requirements

1. Recovery Home Provider shall submit their bill to MCCMH-SUD by the 10th of every month via the FOCUS system.
2. Recovery Home Providers shall submit incident reports as required by MCO Policy 8-003 utilizing the MCCMH-SUD Incident Report form.
3. Monthly reporting as required by grant funding, as applicable.

H. MCCMH-SUD Reviews

1. Recovery Home Provider will receive regular on-site Quality Assurance Reviews.
2. The Recovery Home Provider agrees to maintain Quality audit scores above 85% or be subject to a corrective action, up to and including termination of contract.
3. Provider will receive on-site Environmental Inspection at least annually.
4. Recovery Home Providers will receive a MCCMH-SUD Billing Verification Audit at least annually.

I. Records

The Recovery Home Provider will maintain adequate program and fiscal records and files, including source documentation, to support program activities and all expenditures made under the terms of this agreement, as required.

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1. A sign-in registry for each billable date of service will be kept separately for each client served.
2. MCCMH-SUD Admission and Discharge forms will be completed within 24 hours of action in the FOCUS system.
3. MCCMH-SUD Fee Agreement form will be kept on file for requests for authorization extensions/reauthorizations.
4. All client specific information will be kept in a secure location and the Recovery Home Provider will adhere to confidentiality requirements.
5. Consent forms will be obtained before sharing client information with outside entities.

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