

**Macomb County Community Mental Health
Substance Use Services Department
(MCCMH-SUD)**

**Recovery Home Guidelines
Updated October 2026**



It is the intent of these guidelines to provide information for providers regarding persons served who are eligible for MCCMH-SUD funding to receive 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 relapses, and support persons served in their recovery.

A. Eligibility Screening Guidelines

1. Person served meets the criteria for MCCMH-SUD funding (income, residency, and substance use disorder diagnosis).
2. Person served is actively engaged in MCCMH-SUD funded treatment services.
3. Person served is in need of a highly structured and monitored living environment where recovery support is available.
4. Person served has experienced a history of unsuccessful recovery attempts, which have resulted in a return to chronic use.
5. Person served has significant negative factors in the areas of family, social, work, or environment that places him/her at-risk for relapse without a structured living environment.
6. Person served 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. Person served is able and willing to actively seek employment and/or other means to become financially able to support self.
8. Person served has participated in the required clinical services for substance use disorder.
 - a For residential providers, the person has successfully completed treatment and has agreed to participate in aftercare treatment. Aftercare must be scheduled prior to discharge from residential. Information regarding aftercare appointments and agencies must be included in the Change in Level of Care (CLOC) form submitted to MCO.
 - b For outpatient providers, including OTPs, the person has completed their intake and two additional clinical services (any combination of individual therapy sessions, group therapy, or didactics).

B. Admission Guidelines

The following admission criteria pertain to recovery homes:

1. Person served has completed or does not need medical or sub-acute detoxification.
2. Person served has successfully completed residential treatment, as applicable.
3. Person served does not present with severe medical or psychiatric condition that would interfere in his/her ability to function in a recovery home environment.
4. Person served 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 person has completed an intake appointment as well as two clinical sessions (group therapy, didactic, and/or individual session) with staff at your agency during this treatment episode.
6. Person served demonstrates active motivation for recovery and a desire to work towards self-sufficiency.
7. Person served is able to independently care of daily living needs.
8. Person served is able and willing to actively seek employment and/or other means to become financially able to support self.

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 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 person served 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 person served 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 person served.
 - a. Recovery home provider will review house rules with person served at time of intake. Persons served should be provided a copy of the house rules.
2. Recovery home provider will complete the FOCUS Registry and Authorization request within three (3) days of person served entering services.
3. Recovery home provider will ensure a signed Release of Information (MDHHS-5515) is completed for each person served and submit copy to MCO via FOCUS with the Registry request.
4. Recovery home provider will assist the person served in developing an individualized recovery plan, or if currently receiving Peer Services, obtain a copy of the plan.

E. Recovery Home Authorizations

1. Person served 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.
2. Persons served 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 a person served 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

person served spent 30 days at the first recovery home, they would be approved for 30 days at the second recovery home).

5. If the person served 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.

F. Continued Stay Requests

1. If a person served is still in need of recovery home services after sixty days and are not able to independently secure financial resources to pay for housing due to extraordinary circumstances, the recovery home provider may request 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 person served 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 criterion for continued authorization is met, MCO will approve up to an additional thirty (30) days of service, with a person served copay rate of 50% of the contracted rate. The recovery home provider will complete the MCCMH-SUD Recovery Home Fee Agreement Form, obtain the person served signature acknowledging agreement of the fee, retain the agreement as part of the person served file and provide the person served with a copy of the agreement.
5. If continued stay is approved by MCO and the recovery home provider deems that the person served 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 person served in moving to a self-pay plan at the home or assist them in finding other housing options via their treatment provider.

G. Overnight Absence Extensions

1. If a person served must be absent from the recovery home overnight due to an approved extenuating circumstance, the recovery home provider may request an extension of the persons served authorization to allow completion of the full 60-day program.
2. Extenuating circumstances eligible for an overnight absence extension include medical or emergency situations, such as emergency department visits, hospitalization, or urgent medical appointments requiring an overnight stay.
3. Overnight absence extensions may only be requested when a person served is away from the home for 48 hours or less. If a person served is absent for more than two (2) consecutive nights, the person served must be discharged. They may contact their therapist to request a new referral for recovery home funding.
4. The recovery home provider must document the following:
 - a. The reason for the overnight absence should include a clear explanation of the circumstances.
 - b. Dates of departure and return, and the total duration of the absence.
 - c. Verification that the person served is currently attending MCCMHSUD funded treatment.
5. Requests for an overnight absence extension must include a proposed revised end date reflecting the completion of the full 60-day funding period.
6. The recovery home provider must submit the extension request via the FOCUS EMR following standard MCCMH-SUD authorization procedures.
7. All extension requests must be submitted within seven (7) calendar days before the persons served authorization ends.

H. Verification of Outpatient Treatment

Recovery Home providers are responsible for verifying that an individual is actively engaged in outpatient treatment with an MCCMH-SUD provider for the duration of their stay under MCCMH-SUD funding.

1. Recovery Home providers must confirm the person served has a scheduled outpatient appointment at the time of intake.
2. Person served is responsible for attending appointments as scheduled.
 - a. Recovery Home providers should provide the person served with a copy of the Verification of Treatment Attendance form. The person served should take this form to all appointments (individual therapy, group therapy, didactics) to be completed by the treatment provider. The person served should provide a copy to the recovery home provider for proof of attendance.
3. Recovery Home providers should send the Verification of Treatment Form to the outpatient treatment provider. Recovery Home providers are responsible for completing the top half of the form and including all four pages of a valid and signed release of information.
4. Recovery Home providers will be provided with a copy of an Outpatient Treatment Verification Contact List.
 - a. The Outpatient Treatment Verification Contact List will help Recovery Home providers identify a designated contact person for each agency.
 - b. Recovery home providers should contact the designated contact person and utilize their preferred method of communication (e.g., phone, email, fax).
 - c. Recovery Home providers should allow up to three (3) business days for a response.
 - i. If no response is received within the three (3) business days, Recovery Home providers must follow up with the MCCMH Priority Populations Care Coordinator by phone or email.
 - ii. Recovery Home providers should maintain a record of all contact attempts for auditing purposes.

I. Recovery Home Discharge Procedures

1. After the persons served last day of MCCMH-SUD funded service, complete the FOCUS Discharge record. The information entered should reflect the persons served 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.

J. Reporting Requirements

1. Recovery home providers shall submit their claims 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.

K. MCCMH-SUD Reviews

1. Recovery home providers will receive regular on-site Quality Assurance reviews.
2. The Recovery home provider agrees to maintain Quality review scores above 85% or be subject to corrective action, up to and including termination of contract.
3. Recovery home providers will receive onsite environmental inspection at least annually.
4. Recovery home providers will receive an MCCMH-SUD Billing Verification Audit at least annually.

L. 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.

1. A sign-in registry for each billable date of service will be kept separately for each person 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 persons served 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 person served information with outside entities.