

## **Summary of Designated Service Definitions**

*(To be utilized in complement to presentation by Jim Jarrard)*

### **Ambulatory Detoxification:**

#### **Level I-D Ambulatory Detoxification without Extended On-Site Monitoring**

Ambulatory Detoxification Without Extended On Site Monitoring (Outpatient Detox) is an organized outpatient service delivered by trained clinicians who provide medically supervised evaluation, detoxification and referral services according to a predetermined schedule. Such services are provided in regularly scheduled sessions. The services are designed to treat the patient's level of clinical severity and to achieve safe and comfortable withdrawal from mood-altering drugs (including alcohol) and to effectively facilitate the patient's transition into ongoing treatment and recovery. A service order for Ambulatory Detoxification Without Extended On Site Monitoring must be completed by a physician, licensed psychologist, physician's assistant or nurse practitioner according to their scope of practice prior to or on the day that the services are to be provided.

### **Assertive Community Treatment Team (ACTT):**

The Assertive Community Treatment Team is a service provided by an interdisciplinary team that ensures service availability 24 hours a day, 7 days per week and is prepared to carry out a full range of treatment functions wherever and whenever needed. A service recipient is referred to the Assertive Community Treatment Team service when it has been determined that his/her needs are so pervasive and/or unpredictable that they cannot be met effectively by any other combination of available community services. Typically this service should be targeted to the 10% of MH/DD/SA service recipients who have serious and persistent mental illness or co-occurring disorders, dual and triply diagnosed and the most complex and expensive treatment needs. The service objectives are addressed by activities designed to: promote symptom stability and appropriate use of medication; restore personal, community living and social skills; promote and maintain physical health; establish access to entitlements, housing, work and social opportunities; and promote and maintain the highest possible level of functioning in the community. ACT Teams should make every effort to meet critical standards contained in the most current edition of the National Program Standards for ACT Teams as established by the National Alliance for the Mentally Ill or US Department of Health and Human Services, Center for Mental Health Services.

### **Adult Developmental Vocational Program (ADVP)**

An Adult Developmental Vocational Program (ADVP) is a day/night service which provides organized developmental activities for individuals with mental retardation or other developmental disabilities, or to individuals with physical disabilities, to prepare the individual to live and work as independently as possible. The activities and services of ADVP are designed to adhere to the principles of normalization and community integration.

### **Case Management**

The service includes service coordination activities provided by qualified area program staff, with or on behalf of a recipient of MH/DD/SA services. The service is designed to meet the educational, vocational, residential, mental health treatment, financial, social and other non-treatment needs of the recipient. The service includes the arrangement, linkage or integration of multiple services as they are needed or being received by the recipient, either between programs within the area program or from other outside agencies. It includes assessment and reassessment of the recipient's need for case management services; informing the recipient about benefits, community resources, and services; assisting the recipient in accessing benefits and services; arranging for the recipient to receive benefits and services; and monitoring the provision of services.

**Child and Adolescent Day Treatment (MH/SA):**

Day Treatment is a structured treatment service in a licensed facility for children or adolescents and their families that builds on strengths and addresses identified needs. This medically necessary service directly addresses the child's diagnostic and clinical needs, which are evidenced by the presence of a diagnosable mental, behavioral, and/or emotional disturbance (as defined by the DSM-IV-TR and its successors), with symptoms and effects documented in a comprehensive clinical assessment and the Person Centered Plan.

**Community Support Team (CST) (MH/SA):**

Community Support Team (CST) services consist of community-based mental health and substance abuse rehabilitation services and necessary supports provided through a team approach to assist adults in achieving rehabilitative and recovery goals. It is intended for individuals with mental illness, substance abuse disorders, or both who have complex and extensive treatment needs. The individual's clinical needs are evidenced by the presence of a diagnosable mental illness, substance-related disorder (as defined by the DSM-IV-TR and its successors), or both, with symptoms and effects documented in the comprehensive clinical assessment and the Person Centered Plan.

**Day/Evening Activity**

Day/Evening activity is a day/night service, which provides supervision and an organized program during a substantial part of the day in a group setting. Participation may be on a routine or occasional basis. The service is designed to support the individual's personal independence and promote social, physical and emotional well-being. A Day/Evening activity program is distinguished from a "Drop In Center" in that the clients who participate in the program are usually referred to the program as a part of their treatment plan.

**Developmental Day**

Developmental Day is a day/night service which provides individual habilitative programming for children with mental retardation, with or at risk for developmental disabilities, or atypical development in special licensed child care center. It is designed to meet the developmental needs of the children in an inclusive setting to promote skill acquisition in areas such as self-help, fine and gross motor skills, language and communication, cognitive and social skills in order to facilitate their functioning in a less restrictive environment. This service is also designed to meet child care needs of families and to provide family training and support.

**Diagnostic/Assessment (MH/DD/SA):**

A Diagnostic/Assessment is an intensive clinical and functional face to face evaluation of a recipient's mental health, developmental disability, or substance abuse condition that results in the issuance of a Diagnostic/Assessment report with a recommendation regarding whether the recipient meets target population criteria, and includes an order for Enhanced Benefit services that provides the basis for the development of an initial Person Centered Plan. For substance abuse-focused Diagnostic/Assessment, the designated Diagnostic Tool specified by DMH (e.g., SUDDS IV, ASI, SASSI) for specific substance abuse target populations (i.e., Work First, DWI, etc.) must be used. In addition, any elements included in this service definition that are not covered by the tool must be completed.

**Inpatient Hospital:**

Inpatient Hospital is a 24-Hour service which provides intensive treatment in a hospital setting.

Supportive nursing and medical care are provided under the supervision of a psychiatrist or physician. This service is designed to provide continuous treatment for individuals with acute psychiatric or substance abuse problems.

### **Intensive In-Home Services:**

Intensive In-Home (IIH) service is a team approach designed to address the identified needs of children and adolescents, who due to serious and chronic symptoms of an emotional, behavioral, and/or substance use disorders, are unable to remain stable in the community without intensive interventions. This service may only be provided to individuals through age 20. This medically necessary service directly addresses the recipient's mental health and/or substance-related diagnostic and clinical needs. The needs are evidenced by the presence of a diagnosable mental, behavioral, or emotional disturbance (as defined by DSM-IV-TR and its successors), with documentation of symptoms and effects reflected in the comprehensive clinical assessment and the Person Centered Plan. This team provides a variety of clinical rehabilitative interventions available 24 hours a day, 7 days a week, 365 days a year.

### **Mobile Crisis Management (MH/DD/SA):**

Mobile Crisis Management involves all support, services and treatments necessary to provide integrated crisis response, crisis stabilization interventions, and crisis prevention activities. Mobile Crisis Management services are available at all times, 24/7/365. Crisis response provides an immediate evaluation, triage and access to acute mental health, developmental disabilities, and/or substance abuse services, treatment, and supports to effect symptom reduction, harm reduction, and/or to safely transition persons in acute crises to appropriate crisis stabilization and detoxification supports/services. These services include immediate telephonic response to assess the crisis and determine the risk, mental status, medical stability, and appropriate response.

Mobile Crisis Management also includes crisis prevention and supports that are designed to reduce the incidence of recurring crises. These supports and services should be specified in a recipient's Crisis Plan, which is a component of all Person Centered Plans.

### **Multisystemic Therapy (MST):**

Multisystemic Therapy (MST) is a program designed for youth generally between the ages 7 through 17 who have antisocial, aggressive/violent behaviors, are at risk of out-of-home placement due to delinquency and/or; adjudicated youth returning from out-of-home placement and/or; chronic or violent juvenile offenders, and/or youth with serious emotional disturbances or abusing substances and their families. MST provides an intensive model of treatment based on empirical data and evidence-based interventions that target specific behaviors with individualized behavioral interventions. The purpose of this program is to keep youth in the home by delivering an intensive therapy to the family within the home. Services are provided through a team approach to youth and their families. Services include: an initial assessment to identify the focus of the MST intervention; individual therapeutic interventions with the youth and family; peer intervention; case management; and crisis stabilization. Specialized therapeutic and rehabilitative interventions are available to address special areas such as substance abuse, sexual abuse, sex offending, and domestic violence. Services are available in-home, at school, and in other community settings. The duration of MST intervention is 3 to 5 months. MST involves families and other systems such as the school, probation officers, extended families, and community connections.

### **Non-Hospital Medical Detoxification:**

#### **Level III.7-D Medically Monitored Inpatient Detoxification**

Medically Monitored Detoxification is an organized service delivered by medical and nursing professionals, that provides for 24-hour medically supervised evaluation and withdrawal management in a

permanent facility affiliated with a hospital or in a freestanding facility of 16 beds or less. Services are delivered under a defined set of physician-approved policies and physician-monitored procedures and clinical protocols.

### **Outpatient Opioid Treatment**

Outpatient Opioid Treatment is a service designed to offer the individual an opportunity to effect constructive changes in his lifestyle by using methadone or other drug approved by the Food and Drug Administration (FDA) for the treatment of opiate addiction in conjunction with the provision of rehabilitation and medical services. It is a tool in the detoxification and rehabilitation process of an opiate-dependent individual.

### **Outpatient Treatment**

Outpatient Treatment is a service designed to meet the clinically significant behavioral or psychological symptoms or patterns that have been identified as treatment needs of the recipient. This service is provided through scheduled therapeutic treatment sessions. The service may be provided to an individual, families, or groups. This service includes: counseling, psychotherapy, medication therapy, and other special therapy\* and collateral work with family (or substitute family) members of a service recipient.

### **Partial Hospitalization**

Partial Hospitalization is a short-term service for acutely mentally ill children or adults, which provides a broad range of intensive therapeutic approaches which may include: group activities/therapy, individual therapy, recreational therapy, community living skills/training, increases the individual's ability to relate to others and to function appropriately, coping skills, medical services. This service is designed to prevent hospitalization or to serve as an interim step for those leaving an inpatient facility. A physician shall participate in diagnosis, treatment planning, and admission/discharge decisions. Physician involvement shall be one factor that distinguishes Partial Hospitalization from Day Treatment Services.

### **Professional Treatment Services in Facility-Based Crisis Program**

This service provides an alternative to hospitalization for adults who have a mental illness or substance abuse disorder. This is a 24-hour residential facility with 16 beds or less that provides support and crisis services in a community setting. This can be provided in a non-hospital setting for recipients in crisis who need short-term intensive evaluation, treatment intervention or behavioral management to stabilize acute or crisis situations.

### **Psychiatric Residential Treatment Facility (PRTF)**

Psychiatric Residential Treatment Facility (PRTF) provides care for children who have mental illness or substance abuse/dependency and who are in need of services in a non-acute inpatient facility. This service may be provided when an individual does not require acute care, but requires supervision and specialized interventions on a 24-hour basis to attain a level of functioning that allows subsequent treatment in a less restrictive setting. This service is available for recipients under 21 years of age or who are in treatment at age 21. Continued treatment may be provided until the 22<sup>nd</sup> birthday as long as it is medically necessary. Discharge planning starts on the day of admission.

### **Psychosocial Rehabilitation:**

A Psychosocial Rehabilitation (PSR) service is designed to help adults with psychiatric disabilities increase their functioning so that they can be successful and satisfied in the environments of their choice with the least amount of ongoing professional intervention. PSR focuses on skill and resource

development related to life in the community and to increasing the participant's ability to live as independently as possible, to manage their illness and their lives with as little professional intervention as possible, and to participate in community opportunities related to functional, social, educational and vocational goals.

## **Residential Supports**

Residential Supports is a service definition that allows for all habilitation/support services provided on behalf of an individual in a residential setting to be delivered under one service heading and reported in an aggregate daily record.

## **Social Setting Detoxification:**

### **Level III.2-D Clinically Managed Residential Detoxification**

Clinically Managed Residential Detoxification is an organized service that is delivered by appropriately trained staff, who provide 24-hour supervision, observation and support for patients who are intoxicated or experiencing withdrawal symptoms sufficiently severe to require 24-hour structure and support. The service is characterized by its emphasis on peer and social support. Established clinical protocols are followed by staff to identify patients who are in need of medical services beyond the capacity of the facility and to transfer such patients to the appropriate levels of care.

## **Substance Abuse Comprehensive Outpatient Treatment Program:**

### **Level II.5 Partial Hospitalization ASAM Patient Placement Criteria**

SA Comprehensive Outpatient Treatment (SACOT) Program means a periodic service that is a time limited, multi-faceted approach treatment service for adults who require structure and support to achieve and sustain recovery. SACOT Program is a service emphasizing reduction in use and abuse of substances and/or continued abstinence, the negative consequences of substance abuse, development of social support network and necessary lifestyle changes, educational skills, vocational skills leading to work activity by reducing substance abuse as a barrier to employment, social and interpersonal skills, improved family functioning, the understanding of addictive disease, and the continued commitment to a recovery and maintenance program. These services are provided during day and evening hours to enable individuals to maintain residence in their community, continue to work or go to school, and to be a part of their family life.

## **Substance Abuse Halfway House:**

### **Level III.1 Clinically Managed Low-Intensity Residential Treatment**

Clinically managed low intensity residential services are provided in a 24 hour facility where the primary purpose of these services is the rehabilitation of individuals who have a substance abuse disorder and who require supervision when in the residence. The consumers attend work, school, and SA treatment services.

## **Substance Abuse Intensive Outpatient Program:**

### **Level II.1 Intensive Outpatient Services ASAM Patient Placement Criteria**

SA Intensive Outpatient Program (SAIOP) means structured individual and group addiction activities and services that are provided at an outpatient program designed to assist adult and adolescent consumers to begin recovery and learn skills for recovery maintenance. The program is offered at least 3 hours a day, at least 3 days a week, with no more than 2 consecutive days between offered services, and distinguishes between those individuals needing no more than 19 hours of structured services per week (ASAM Level II.1). The recipient must be in attendance for a minimum of 3 hours a day in order to bill this service.

## **HCPCS Codes**

### **Mobile Crisis Management**

H2011 Crisis intervention service, per 15 minutes; 1 unit =15 minutes

### **Diagnostic/Assessment**

T1023 Screening to determine the appropriateness of consideration of an individual for participation in a specified program, project or treatment protocol, per encounter; 1 unit =1 event

### **Intensive In-Home Services**

H2022 Community-based wrap-around services, per diem (intensive in-home services); 1 unit =1 day

### **Multisystemic Therapy**

H2033 Multisystemic therapy for juveniles, per 15 minutes; 1 unit =15 minutes

### **Community Support Team—Adults**

H2015 Comprehensive community support services, per 15 minutes

HT – denotes individual; 1 unit =15 minutes

### **Assertive Community Treatment Team**

H0040 Assertive community treatment program, per diem; 1 unit =1 event

### **Psychosocial Rehabilitation**

H2017 Psychosocial rehabilitation services, per 15 minutes; 1 unit =15 minutes

### **Child and Adolescent Day Treatment**

H2012 Behavioral health day treatment, per hour HA; 1 unit =1 hour

### **Partial Hospitalization**

H0035 Mental health partial hospitalization, treatment, less than 24 hours; 1 unit =1 event

### **Professional Treatment Services in Facility-Based Programs – Adult**

S9484 Crisis intervention mental health services, per hour (facility based crisis services); 1 unit = 1 hour

### **Substance Abuse Intensive Outpatient Program**

H0015 Alcohol and/or drug services; intensive outpatient (treatment program that operates at least 3 hours/day and at least 3 days/week and is based on an individualized treatment plan), including assessment, counseling; crisis intervention, and activity therapies or education; 1 unit = 1 event per day (3 hours minimum)

### **Substance Abuse Comprehensive Outpatient Treatment**

H2035 Alcohol and/or other drug treatment program, per hour (substance abuse comprehensive outpatient treatment); 1 unit =1 hour

### **Substance Abuse Non-Medical Community Residential Treatment—Adult**

H0012 Alcohol and/or drug services; subacute detoxification (residential addiction program outpatient) (substance abuse non-medical community)

HB 1 unit = 1 day not to exceed more than 30 days in a 12-month period

### **Substance Abuse Medically Monitored Community Residential Treatment**

H0013 Alcohol and/or drug services; acute detoxification (residential addiction program outpatient) (substance abuse medically monitored community); 1 unit = 1 day not to exceed more than 30 days in a 12-month period

**Ambulatory Detoxification**

H0014 Alcohol and/or drug services; ambulatory detoxification; 1 unit = 15 minutes

**Non-Hospital Medical Detoxification**

H0010 Alcohol and/or drug services; subacute detoxification (residential addiction program inpatient)(non-hospital medical detox); 1 unit = 1 day not to exceed more than 30 days in a 12-month period

**Medically Supervised Detoxification/Crisis Stabilization**

H2036 Alcohol and/or other drug treatment program, per diem (medically supervised detox/crisis stabilization); 1 unit = 1 day not to exceed more than 30 days in a 12-month period

**Opioid Treatment**

H0020 Alcohol and/or drug services; methadone administration and/or service (provision of the drug by a licensed program); 1 unit = 1 event