



Substance Use Disorder Service Utilization Policy

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Policy It is the policy of the Department of Behavioral Health (DBH) to monitor service utilization trends throughout the DBH continuum of care to ensure clients have access to the care and the system interaction needed in order to achieve sustainable recovery.

Purpose The purpose of this policy is to provide DBH staff guidance regarding service utilization requirements of all clients receiving substance use disorder (SUD) treatment services.

Definition(s) **American Society of Addiction Medicine (ASAM) Criteria:** A single, common standard for assessing client needs, optimizing placement, determining medical necessity, and documenting the appropriateness of care.

Continuum of Care: System that guides and tracks clients over time through a comprehensive array of health care services spanning all levels and intensity of care.

Medication-Assisted Treatment (MAT): Use of prescription approved medications in combination with counseling and behavioral therapies to provide a “whole-person” approach to the treatment of substance use disorders.

Service Utilization: Refers to the extent to which people are making use of services that are available in the community or at the organization.

Continuum of Care Services Provided Requirements DBH provides a continuum of care system that guides and tracks clients over time through a comprehensive array of health services for all eligible clients. DBH has adopted a continuum of care modeled after the American Society of Addiction Medicine (ASAM) Criteria for SUD treatment services.

The ASAM Criteria provides a matrix for matching severity and level of function with type and intensity of treatment needs. ASAM is intended to move the client from a program-driven system to an assessment-driven methodology in the treatment and placement of clients. DBH includes the following health services in its service delivery.

- Early Intervention

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Substance Use Disorder Substance Use Disorder Service Utilization Policy, Continued

Continuum of Care Services Provided Requirements, continued

- Outpatient services
- Intensive outpatient services
- Case Management
- Residential Services
- Withdrawal Management
- Narcotic Treatment Program services
- Recovery support services
- Care Coordination
- Physician Consultation
- Medication Assisted Treatment

In addition to these requirements, the SUD continuum of care includes expansion in access to Medication-Assisted Treatment (MAT), an effective treatment for individuals with opioid use disorder and/or alcohol use disorder.

The DBH SUD continuum of care includes at least two (2) evidence-based treatment practices per service.

Examples of required evidence-based treatment practices:

- Motivational interviewing;
- Cognitive behavioral therapy;
- Relapse prevention;
- Trauma-informed treatment; and
- Psycho-educational groups.

Quality Management Requirements

DBH has a Quality Improvement Plan (QIP) and Quality Management Action Committee (QMAC) to evaluate outcomes related to access, quality, cost, integration and coordination of care.

Health care data elements are reviewed by QMAC on a quarterly basis:

- Number of days of first service/follow-up appointments at appropriate level of care after referral and assessment;
- Existence of a 24/7 telephone access line with threshold language accessibility;
- Access to services including translation services in threshold languages; and
- Number, percentage of denials, and time period of authorization request approval or denial.

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Substance Use Disorder Substance Use Disorder Service Utilization Policy, Continued

Access and Utilization Management Requirements

DBH has established a toll free access line to provide prior-authorization for Residential services, as well as a Utilization Management Program to ensure:

- Timely access to services.
 - Medical necessity has been established and the client is at the appropriate level of care.
 - Identified Interventions are appropriate for the diagnosis and level of care.
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Service Utilization Report

QMAC will measure service utilization using a monthly report developed by DBH Research and Evaluation (R&E).

Service utilization reports contain the following information:

- Number of unduplicated clients receiving services in all modalities.
- Number of duplicated clients receiving services in more than one modality.
- Individual client progression through SUD treatment services.

Utilizing these reports, the Quality Improvement (QI) SUD subcommittee and QMAC Committee members will have the ability to examine how clients are moving through the continuum of care and identify any barriers causing underutilization or overutilization of services .

- As these service utilizations are identified, immediate action will be taken to rectify and correct under/overutilization of services by SUD administrative staff working directly with SUD service providers.
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Related Policy or Procedure

DBH Standard Practice Manual:

- Quality Management Committee Membership/Participation (QM6009)
 - Research and Evaluation Functions (QM6004)
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Reference(s)

- Department of Health Care Services, The American Society of Addiction Medicine (ASAM) Criteria Fact Sheet
 - Department of Health Care Services, Drug Medi-Cal Organized Delivery System Waiver Fact Sheet
 - San Bernardino County Behavioral Health, Drug Medi-Cal Organized Delivery System, County Implementation Plan
 - Substance Abuse and Mental Health Services Administration, Medication-Assisted Treatment (MAT)
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