Provider Services Guide

NOTE: This document is subject to ongoing review and revision at the discretion of the County of San Diego HHSA Behavioral Health Services.
# TABLE OF CONTENTS

## A. INTRODUCTION

- Introduction

## B. NOTE TYPES

- Description Of Sanwits Encounter Note Types

## C. SERVICES

- Residential Bed Day
- Residential Withdrawal Management
- Case Management
- Individual Counseling
- Group Counseling
- Intensive Outpatient Services (IOS)
- Assessed Not Admitted
- Physician Consultation
- Methadone Dosing
- Medication Services (MAT) Generic Drug
- Medication Services (MAT) Brand Name Drug

## D. Definitions

- Definitions
A. INTRODUCTION

The goal of this guide is to provide an understanding of the various services that are provided in SUD programs as part of the DMC-ODS. This understanding will assist when claiming for DMC-ODS services.

This guide identifies, lists, and defines the following:

- DMC-ODS services and related visit types
- SanWITS Note Types associated with each DMC-ODS service
- Provider types based on ASAM Level of Care eligible to provide each DMC-ODS service
- Staff eligible to provide each DMC-ODS service
- Contact Type allowed for each DMC-ODS service
B. DESCRIPTION OF SANWITS ENCOUNTER NOTE TYPES

In SanWITS, a Note Type must be selected for each service encounter entry to indicate if the service was DMC Billable, County Billable, or Non-Billable.

- **DMC Billable:**
  An individual client service that has been delivered and documented as being medically necessary within a treatment episode billable to DMC-ODS, such as OS, IOS, OTP, Residential Services, WM, CM, Recovery Services, etc.

- **County Billable:**
  An individual client service that has been delivered and documented within a treatment episode that is not billable to DMC, such as, clients not Medi-Cal eligible, justice over-ride clients, or medically necessary and authorized residential treatment days that exceed DMC-ODS benefits.

- **Non-Billable:**
  An individual client service that has been delivered and documented within a treatment episode that is not DMC or County billable, such as, clinical group with more than 12 clients, self-help groups, UA’s. Non-billable encounters may be used as part of the billing corrections or payment recovery process. See the BHS Drug Medi-Cal Organizational Providers Billing Manual for more details.
## C. SERVICES

<table>
<thead>
<tr>
<th>SERVICE NAME</th>
<th>Residential Bed Day</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEFINITION</td>
<td>Residential Treatment Services are non-institutional, 24-hour non-medical, short-term services to support clients in their efforts to restore, maintain, and apply interpersonal and independent living skills, and access community support systems. The components of Residential Treatment Services shall include intake/admission, treatment planning, individual and group counseling, family therapy, patient education, safeguarding medications, collateral services, crisis intervention services, transportation services, and discharge services. Note: perinatal residential programs offer additional enhanced services, as described in the DHCS Perinatal Practice Guidelines. Physical examinations, laboratory tests, medical direction, body specimen screens, medication services may also be included when a residential program has Incidental Medical Services (IMS) designation. Services are provided with available trained personnel, per the specifics of the program’s Statement of Work (SOW). Note: Residential Treatment Services must be authorized by Optum.</td>
</tr>
</tbody>
</table>
| PROVIDER TYPE             | • ASAM Level 3.1: Residential  
                           | • ASAM Level 3.3: Residential  
                           | • ASAM Level 3.5: Residential |
| STAFF                     | • LPHA  
                           | • Counselor  
                           | VISIT TYPE                | • Bed Day - Residential |
| CONTACT TYPE              | • Face-to-Face |

<table>
<thead>
<tr>
<th>SERVICE NAME</th>
<th>Residential Withdrawal Management 3.2-WM</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEFINITION</td>
<td>Detoxification services provided in a residential setting consistent with the ASAM level of care criteria to DMC ODS beneficiaries. The components of Withdrawal Management services include intake, observation, medication services, care coordination, and discharge services.</td>
</tr>
<tr>
<td>PROVIDER TYPE</td>
<td>• ASAM Level 3.2-WM: Withdrawal Management</td>
</tr>
</tbody>
</table>
| STAFF                     | • LPHA  
                           | • LVN  
                           | • Counselor  
<pre><code>                       | VISIT TYPE                | • Bed Day – Residential |
</code></pre>
<p>| CONTACT TYPE              | • Face-to-Face |</p>
<table>
<thead>
<tr>
<th>SERVICE NAME</th>
<th>Case Management</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEFINITION</td>
<td>A service to assist a client to access needed medical, educational, social, prevocational, vocational, rehabilitative, or other community services. Case management services should focus on coordination of SUD care, integration around primary care especially for clients with a chronic substance use disorder, and interaction with the criminal justice system, if needed. Such services may be provided face-to-face, by telephone, or by telehealth with or without the client present anywhere in the community.</td>
</tr>
</tbody>
</table>

*Case management is billed separately from a residential bed-day service.*

| PROVIDER TYPE | • ASAM Level 1: Outpatient Services (OS)  
• ASAM Level 2.1: Intensive Outpatient Services (IOS)  
• ASAM Level 1-OTP: Opioid Treatment Programs (OTP)*  
• ASAM Level 3.2-WM: Withdrawal Management  
• ASAM Level 3.1: Residential  
• ASAM Level 3.3: Residential  
• ASAM Level 3.5: Residential  
• Recovery Services OS  
• Recovery Services IOS  
• Recovery Services OTP  
• Recovery Services 3.1 Residential  
• Recovery Services 3.3 Residential  
• Recovery Services 3.5 Residential |

*Dual certification required*  

| STAFF | • LPHA  
• Counselor  
• CONTACT TYPE | • Face-to-Face  
• Telephone  
• Telehealth |

| VISIT TYPE | • Case Management |
## SERVICES

<table>
<thead>
<tr>
<th>SERVICE NAME</th>
<th>Individual Counseling</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEFINITION</td>
<td>Contact between a client and a therapist or counselor and provided in-person, by telephone or by telehealth qualify as reimbursable units of service. Individual counseling limitations that existed prior to implementation of the DMC-ODS on July 1, 2018 are no longer in effect, and Individual Counseling may be provided as medically necessary (and claimed when consistent with the DHCS Same Day Billing Matrix).</td>
</tr>
</tbody>
</table>

### PROVIDER TYPE
- ASAM Level 1: Outpatient Services (OS)
- ASAM Level 1-OTP: Opioid Treatment Programs (OTP)
- Recovery Services OS
- Recovery Services IOS
- Recovery Services OTP
- Recovery Services 3.1 Residential
- Recovery Services 3.3 Residential
- Recovery Services 3.5 Residential

### STAFF
- LPHA
- Counselor

### CONTACT TYPE
- Face-to-Face
- Telephone
- Telehealth

### VISIT TYPE
- Assessment
- Crisis Intervention
- Collateral Services
- Treatment Planning
- Discharge Planning
- Family Therapy
- Other Individual
- Patient Education**

**Not available for Recovery Services
<table>
<thead>
<tr>
<th>SERVICE NAME</th>
<th>Group Counseling</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEFINITION</td>
<td>Face-to-face contact between therapist or counselor and two to twelve clients. Groups focus on short-term personal, family, job/school, and other problems and their relationship to substance abuse. Clients 17 years of age or younger shall not participate in group counseling with participants 18 years of age or older except when counseling is at a provider certified school site. Group Counseling and Patient education done in a group setting are different services.</td>
</tr>
</tbody>
</table>
| PROVIDER TYPE | • ASAM Level 1: Outpatient Services (OS)  
• ASAM Level 1-OTP: Opioid Treatment Programs (OTP)  
• Recovery Services OS  
• Recovery Services IOS  
• Recovery Services OTP  
• Recovery Services 3.1 Residential  
• Recovery Services 3.3 Residential  
• Recovery Services 3.5 Residential |
| STAFF        | • LPHA  
• Counselor |
| CONTACT TYPE | • Face-to-Face |
| TYPE OF SERVICE | • Group  
• Patient Education** |

**Not available for Recovery Services**
## Intensive Outpatient Services (IOS)

**Definition**
Structured programming services consisting primarily of counseling and education about addiction-related problems a minimum of nine (9) hours with a maximum of 19 hours per week for adults, and a minimum of six (6) hours with a maximum of 19 hours per week for adolescents. Intensive outpatient services shall include: assessment, treatment planning, individual and/or group counseling, patient education, family therapy, medication services, collateral services, crisis intervention services, treatment planning, and discharge planning and coordination. Services may be provided in-person, by telephone, by telehealth, and in any appropriate setting in the community where confidentiality can be maintained.

<table>
<thead>
<tr>
<th>Service Name</th>
<th>Intensive Outpatient Services (IOS)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Definition</strong></td>
<td>Structured programming services consisting primarily of counseling and education about addiction-related problems a minimum of nine (9) hours with a maximum of 19 hours per week for adults, and a minimum of six (6) hours with a maximum of 19 hours per week for adolescents. Intensive outpatient services shall include: assessment, treatment planning, individual and/or group counseling, patient education, family therapy, medication services, collateral services, crisis intervention services, treatment planning, and discharge planning and coordination. Services may be provided in-person, by telephone, by telehealth, and in any appropriate setting in the community where confidentiality can be maintained.</td>
</tr>
<tr>
<td><strong>Provider Type</strong></td>
<td>• ASAM Level 2.1: Intensive Outpatient Services (IOS)</td>
</tr>
</tbody>
</table>
| **Staff** | • LPHA  
• Counselor  
| **Visit Type** | • Individual  
• Group Counseling  
• Assessment  
• Family Therapy  
• Collateral Services  
• Crisis Intervention Service  
• Treatment Planning  
• Discharge Planning  
• Patient Education  
| **Contact Type** | • Face-to-Face  
• Telephone  
• Telehealth  
<p>|</p>
<table>
<thead>
<tr>
<th>SERVICE NAME</th>
<th>Physician Consultation – County Billable</th>
</tr>
</thead>
</table>
| DEFINITION       | Services support for DMC physicians with complex cases and may include medication selection, dosing, side effect management, adherence, drug-drug interactions, or level of care considerations. Note: When medication services are provided at residential level of care, the program must have an Incidental Medical Services (IMS) designation.  
Physician consultation is not billable to Drug Medi-Cal, but is a County billable service. Please refer to SUDPOH Section A: County of San Diego DMC-ODS, for more information on Physician Consultation. |
| SANWITS          | • ASAM Level 1: Outpatient Services (OS)  
• ASAM Level 1-OTP: Opioid Treatment Programs (OTP)  
• ASAM Level 2.1: Intensive Outpatient Services (IOS)  
• ASAM Level 3.2-WM: Withdrawal Management  
• ASAM Level 3.1: Residential  
• ASAM Level 3.3: Residential  
• ASAM Level 3.5: Residential |
| STAFF            | • Physician  
| VISIT TYPE       | • Physician consultation  
| CONTACT TYPE     | • Telephone  
• Telehealth
### SERVICES

<table>
<thead>
<tr>
<th>SERVICE NAME</th>
<th>Assessed Not Admitted – County Billable</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEFINITION</td>
<td>Information collection process performed by telephone or face-to-face to assess appropriateness of a client for substance use disorder services. Note: Screening that leads to program admission is entered into an encounter as assessment. Screening that does not lead to a program admission (but linkage to another appropriate level of care) is invoiced to the county and is county billable.</td>
</tr>
</tbody>
</table>
| PROVIDER TYPES | • ASAM Level 1: Outpatient Services (OS)  
      • ASAM Level 1-OTP: Opioid Treatment Programs (OTP)  
      • ASAM Level 2.1: Intensive Outpatient Services (IOS)  
      • ASAM Level 3.2-WM: Withdrawal Management  
      • ASAM Level 3.1: Residential  
      • ASAM Level 3.3: Residential  
      • ASAM Level 3.5: Residential |
| STAFF | • LPHA  
      • Counselor |
| CONTACT TYPE | • Face-to-Face  
      • Telephone  
      • Telehealth |
| VISIT TYPE | • Screening/referral |

<table>
<thead>
<tr>
<th>SERVICE NAME</th>
<th>Methadone Dosing</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEFINITION</td>
<td>A two phase physician-managed process that includes induction phase to attenuate withdrawal symptoms as quickly as medically appropriate and stabilization phase to establish a daily dose that is efficacious, safe and time appropriate.</td>
</tr>
<tr>
<td>PROVIDER TYPE</td>
<td>ASAM 1-OTP: Opioid Treatment Programs</td>
</tr>
</tbody>
</table>
| STAFF | • Physician  
      • NP  
      • RN |
| VISIT TYPE | • Methadone ***  
      ***DMC Requirement |
| CONTACT TYPE | • Face-to-Face  
      NATIONAL DRUG CODE (NDC)  
      • Not required  
      • Not required |
### Medication Services (MAT) Generic Drug

**DEFINITION**
Medication Services including MAT discussed and offered as a concurrent treatment option for alcohol- and/or opioid-related SUD condition. The prescription or administration of MAT, and the assessment of side effects and/or impact of these medications, conducted by staff lawfully authorized to provide such services within their scope of practice and licensure.

**SANWITS**
ASAM 1-OTP: Opioid Treatment Programs

**STAFF**
- Physician
- NP
- RN

**VISIT TYPE**
- Generic
- Buprenorphine***
- Naltrexone
- Acamprosate
- Disulfiram***
- Naloxone***

***DMC Requirement

**CONTACT TYPE**
- Face-to-Face

**NATIONAL DRUG CODE (NDC)**
- Required

---

### Medication Services (MAT) Brand Name Drug

**DEFINITION**
Medication Services including MAT discussed and offered as a concurrent treatment option for alcohol- and/or opioid-related SUD condition. The prescription or administration of MAT, and the assessment of side effects and/or impact of these medications, conducted by staff lawfully authorized to provide such services within their scope of practice and licensure.

**SANWITS**
ASAM 1-OTP: Opioid Treatment Programs

**STAFF**
- Physician
- NP
- RN

**VISIT TYPE**
- Brand Name Drug
- Suboxone/Subutex
- Vivitrol/ReVia
- Campral
- Antabuse
- Narcan

**CONTACT TYPE**
- Face-to-Face

**NATIONAL DRUG CODE (NDC)**
- Required
D. DEFINITIONS

- **Assessment:** Process of gathering information to determine whether a client meets the medical necessity criteria for substance use disorder treatment. Tools to obtain baseline information include American Society of Addiction Medicine Patient Placement Criteria (ASAM) level of care, Addiction Severity Index (ASI), and the Youth Assessment Index (YAI).

- **Collateral:** Face-to-face session with therapist or counselor and significant persons in the client’s life that focus on the treatment needs of the client in terms of supporting the achievement of treatment goals. Significant persons are individuals who have a personal, not official or professional relationship with the client.

- **Crisis:** Contact between a therapist or counselor and a client after an actual relapse or an unforeseen event or circumstance presenting an imminent threat of relapse. Crisis intervention services focus on alleviating crisis problems and are limited to stabilizing the client’s emergency situation.

- **Discharge Planning:** The process to prepare the client for referral into another level of care, post treatment return or re-entry into the community, and/or the linkage of the individual to essential community treatment, housing and human services.

- **Family Therapy:** Inclusion of a client’s family members and loved ones in the treatment process to provide education about factors that are important to the client’s recovery as well as their own, social support to beneficiaries, motivate their loved one to remain in treatment, and receive help and support for their own family recovery as well.

- **Group:** Face-to-face contact between one therapist or counselor and two to twelve clients. Groups focus on short-term personal, family, job/school, and other problems and their relationship to substance abuse. Clients 17 years of age or younger shall not participate in group counseling with participants 18 years of age or older except when counseling is at a provider certified school site.

- **Licensed Practitioner Healing Arts (LPHA):** Includes: Physicians, Nurse Practitioners, Physician Assistants, Registered Nurses, Registered Pharmacists, Licensed Clinical Psychologist (LCP), Licensed Clinical Social Worker (LCSW), Licensed Professional Clinical Counselor (LPCC), and Licensed Marriage and Family Therapist (LMFT) and licensed-eligible practitioners working under the supervision of licensed clinicians includes: Physicians, Nurse Practitioners, Physician Assistants, Registered Nurses, Registered Pharmacists, Licensed Clinical Psychologist (LCP), Licensed Clinical Social Worker (LCSW), Licensed Professional Clinical Counselor (LPCC), and Licensed Marriage and Family Therapist (LMFT) and licensed-eligible practitioners working under the supervision of licensed clinicians.

- **MAT-Dosing:** The prescription or administration of medications related to substance use disorder treatment services, or the assessment of the side effects or results of that medication, conducted by staff lawfully authorized to provide such services within their scope of practice or licensure.

- **Other Individual:** Individual contacts between a client and a therapist or counselor that do not meet the definition of the other service types.
• **Patient Education:** Providing research based education on addiction, treatment, recovery and associated health risks.

• **Treatment Planning:** An individualized written plan prepared by a SUD counselor or LPHA, and based upon information obtained during the admission assessment process. The development and update timeframes of treatment plans will depend on the treatment level of care.