Current DMC	DMC- ODS (7/1/18)
 Diagnosis Determination Note: DSM-5 diagnosis and basis of the diagnosis documented by Medical Director (MD) or therapist within 30 days. 	 Diagnosis Determination Note: Completed by MD or LPHA within first 30 days for OS/IOT and within 10 days for Residential. DHCS direction not to have SUD Counselor document any kind of "provisional" diagnosis or "diagnostic impression".
Determination of Medical Necessity: Intake Assessment DSM Criteria Reviewed by Medical Director	Determination of Medical Necessity: Assessments and review of ASAM dimensions DSM-5 Criteria (approved SUD diagnoses) Meets ASAM Dimension Criteria for specific level of care Reviewed and signed off by Medical Director or LPHA
 Same Day & 2nd Service Billing: Use Multiple Billing Override Certification (DHCS 6700). ODF – document in progress note an unavoidable visit - collateral or crisis service only IOT – crisis service only 	Same Day & 2 nd Service Billing: • Most services allowed on same day • See DHCS billing DMC-ODS Same Day matrix • Eliminates Form DHCS 6700
 Treatment Planning: Initial Treatment Plan due within 30 days Updated Treatment Plan due within 90 days of last plan or earlier if significant changes Must be signed by MD within 15 days 	 Treatment Planning: Initial Treatment plan timeframes for OS & IOT unchanged Timeframe change for Residential due within 10 days for initial and every 30 days for updated plans (with all signatures) All plans must be individualized Include updated ASAM Level of Care Recommendation with updated treatment plans Completed by SUD counselor or LPHA Signed by MD or LPHA, if completed by SUD counselor
Progress Note: • Progress toward treatment goals, action steps and referrals • Requirements: • date of service • topic • Completed and signed within 7 days • IOT and Residential notes weekly	 Progress Note: Progress toward treatment goals, action steps and referrals Document use of Evidenced Based Practices (e.g., Motivational Interviewing and Relapse Prevention) Same requirements for date, topic, signature, and timeframes IOT – no weekly notes require a note for every service Residential – option of weekly progress note or individual notes for each service (if using weekly note, must always have a separate individual note for case management services) Weekly notes due within 7 days
 Stay Review: No earlier than months 5 and no later than 6 months; subsequent stays signed every 5-6 months until d/c Reviewed by therapist/counselor, signed by Medical Director 	 Stay Review: Timeframes the same ASAM LOC Recommendation included in documentation Completed by SUD counselor or LPHA and reviewed or signed by Medical Director or LPHA, if completed by SUD Counselor
Discharge: D/C Plan 30 days prior to last face-to-face treatment contact D/C Summary within 30 days of last face to face treatment contact	Discharge: • No Changes





DMC-ODS

DOCUMENTATION CHANGES

This document is a training tool and is subject to change. Please refer to the SUDPOH for current processes, rates, and expanded details.

Documentation Changes in DMC-ODS continued...

Current DMC	DMC- ODS (7/1/18)
Individual Counseling:Limited to intake, treatment planning, crisis intervention, collateral services & DC planning	Individual Counseling: No restrictions on types of counseling services
 Units of Service: Face-to-face contact on a calendar day ODF Counseling – 50 minutes for Individual, 90 minutes for Group with at least 2 sessions in 30 days. IOT Bundled services – 3 consecutive hours/day and minimum 3 days/week 	Units of Service: Contact with client Most services billed in 15 minute increments OS Total Individual/Group Services per week: Adult: up to 9 hours/week Adolescents: up to 6 hours/week IOS - No 3 hour/ day and 3 day/week minimum Adults - 9-19 hours/week Youth - 6-19 hours/week Residential - 20 hours/week of structured services with minimum 1 hour/day ASAM Level 3.1 - 5 clinical hours Level 3.5 - 10 clinical hours Case Management not included in the 20 hours
 Group Sessions: Clinical group size 2-12 clients Education group size may be > 12 Break time is NOT included in total group time 	 Group Sessions: No changes to sizes Sign-In Sheets must include typed or legibly printed name and signature of LPHA or SUD counselor, date, start/stop times, topic, typed or legibly printed name and signature of client, and clear indications of out/in times for any breaks
Provision of Services: • Must be provided at program site.	 Provision of Services: May be provided throughout community and via Telehealth, phone, or face-to-face Services in community must not be regularly scheduled or on-going Progress Note must document the community setting and how confidentiality was maintained.
Case Management: • Not DMC billable	Case Management: Billable Documented in Individual Progress Note with same requirements for signature and completion date as other progress notes Case Management: Replication of the progress of the progress notes of the progress notes.
After care: • Not DMC billable	 Recovery Services: Billable Provided after client has completed treatment (and no transition to another level of care is indicated) Must have a treatment plan and progress notes for individual recovery services provided Includes outpatient individual or group counseling for relapse prevention, recovery monitoring/coaching, care coordination to services, and marriage/family counseling