Outpatient Programs

- **Primary** mechanism by which to access supplemental Recovery Residence funds

- Client must be actively receiving Outpatient Treatment or Recovery Services under BHS SUD contract
- Up to 9 months maximum supplemental funding
- County funds a maximum of $40/day or $1,200/month (Months 1 through 3)
- County funds a maximum of $20/day or $600/month (Months 4 through 9)
- Maximum benefit is $7,200/client
- Client must contribute a minimum of 30% of net (take home) monthly income, including state/federal benefits
- Client employment not required
- Contract allocation: Separate cost center with dedicated funding

Residential Programs

- Every effort should be made to connect clients to an Outpatient Program to access Recovery Residence funds

**Recovery Residences**

- Program’s tracking of supplemental funding to include adherence to maximum time parameters, daily allocations, overall benefit per client as well as total spending of cost center/line item.
- Program’s written policy and procedure(s) (P&P) outlines coordination of care & RR payment (no direct payment to clients).
- Program’s written P&P to guide RR selection. Programs may utilize BHS RR oversight contract upon establishment.
- Supplemental funding coverage limits may be adjusted through COR authorization. Submitting RR P&P to the COR is required for additional funding requests.
- No treatment groups in Recovery Residences.
- Utilization of RRs should be case-by-case, depending on client need when other safe housing options are not readily available.
- Inform COR when using other types of immediate short-term/time limited housing (e.g., motel).

To obtain Recovery Residence through the Residential Program:

- Client does not meet ASAM criteria for Residential or Outpatient Services, or
- Client meets Outpatient service criteria but declines