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State/Territory Name: New Hampshire

State Plan Amendment (SPA) #:18-0005

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

1. TRANSMITTAL NUMBER:
18-0005

2. STATE
NH

FOR: HEALTH CARE FINANCING ADMINISTRATION

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE
SOCIAL SECURITY ACT (MEDICAID)

TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
July 1, 2018

5. TYPE OF PLAN MATERIAL (*Check One*):

NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (*Separate Transmittal for each amendment*)

6. FEDERAL STATUTE/REGULATION CITATION:
42 CFR 440.50, 440.60, 440.130

7. FEDERAL BUDGET IMPACT:
Remainder of FFY 2018: \$0
FFY 2019: \$0

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Atch 3.1-A, page 6 pre-a 3
Atch 3.1-B, page 5-a 3
Atch 3.1-A, pages 6 pre-a 1-3, Supplement Pages 1-12
Atch 3.1-B, pages 5-a 1-3, Supplement Pages 1-12
(no changes are being made to reimbursement)

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (*If Applicable*):
Atch 3.1-A, page 6 pre-a 3, TN 16-0012
Atch 3.1-B, page 5-a 3, TN 16-0012
Atch 3.1-A, none/new pages
Atch 3.1-B, none/new pages

10. SUBJECT OF AMENDMENT:

Substance Use Disorder (SUD) Treatment and Recovery Support Services, State owned, License Exempt Rehabilitative Services

11. GOVERNOR'S REVIEW (*Check One*):

GOVERNOR'S OFFICE REPORTED NO COMMENT

OTHER, AS SPECIFIED: comments, if any,
will follow

COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNA

/s/

IL:

13. TYPED NAME:

Jeffrey A. Meyers

14. TITLE:

Commissioner

15. DATE SUBMITTED:

4/26/2018

16. RETURN TO:

Dawn Landry
Office of Medicaid Business and Policy/Brown Building
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: 04/26/2018

18. DATE APPROVED: 05/16/2018

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:
07/01/2018

20. SIGNATURE OF REGIONAL OFFICIAL: /s/

21. TYPED NAME:

Richard R. McGreal

22. TITLE: Associate Regional Administrator
Division of Medicaid & Children's Health Operations, Boston MA

23. REMARKS:

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
JFK Federal Building, Government Center
Room 2275
Boston, Massachusetts 02203



Division of Medicaid and Children's Health Operations / Boston Regional Office

May 16, 2018

Jeffrey A. Meyers, Commissioner
Department of Health and Human Services
State of New Hampshire
129 Pleasant Street
Concord, NH 03301

Dear Commissioner Meyers,

Enclosed is an approved copy of New Hampshire's (NH) State Plan Amendment (SPA) 18-0005, received on April 26, 2018 and entitled "*Substance Use Disorder (SUD) Treatment and Recovery Support Services, State Owned, License Exempt Rehabilitative Services,*" which transmitted language for the purpose of adding licensure exemption to existing rehabilitative services.

Transmittal # 18-0005 -- Substance Use Disorder (SUD) Treatment and Recovery Support Services, State Owned, License Exempt Rehabilitative Services
--Effective July 1, 2018

If there are questions, please contact Joyce Butterworth at (617) 565-1220 or by e-mail at Joyce.Butterworth@cms.hhs.gov.

Sincerely,

/s/

Richard R. McGreal
Associate Regional Administrator

Enclosure/s

cc: Henry Lipman, State Medicaid Director
Diane Peterson, Medicaid Business and Policy

OFFICIAL

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

Title XIX – NH
Attachment 3.1-A
Page 6 pre-a 3

13d. Other Diagnostic, Screening, Preventive and Rehabilitative Services (continued)

Substance Use Disorder (SUD) Treatment and Recovery Support Services (continued)***

j. Evaluations to determine the existence and severity of the SUD and appropriate level of care for the recipient. This service must be provided by a licensed psychotherapist, a licensed MLADC, or a LADC engaged in independent practice in accordance with NH statutes.

k. Medically monitored residential withdrawal management consistent with Level 3.7-WM, ASAM Criteria 2013, meaning that such services are organized and delivered by behavioral health personnel and other health care providers who provide a planned regimen of care in a 24-hour live-in setting for the purpose of stabilizing situations of severe withdrawal. This residential setting is not an Institute for Mental Disease (IMD). Services must be delivered by licensed psychotherapists, licensed MLADC’s, licensed physicians, or licensed APRN’s.

l. Rehabilitative services, consistent with Level 3.1 and Level 3.5, ASAM Criteria 2013, as summarized at <https://www.medicaid.gov/state-resource-center/innovation-accelerator-program/iap-downloads/reducing-substance-use-disorders/asam-resource-guide.pdf>, or other services as described in a, h, and i above, in a facility licensed as a residential treatment and rehabilitation facility, or in a state-owned SUD residential treatment and rehabilitation facility which is exempt from licensure in accordance with RSA 151:2, II, i. This residential setting is not an Institute for Mental Diseases (IMD). Recipients being treated at an ASAM 3.5 level of care must be present in the facility at least 22 hours per day. For recipients age 21 and over, this is a clinically managed, high-intensity residential service that includes a planned program of professionally directed evaluation, care and treatment for the restoration of functioning. For recipients under age 21, this service is a clinically managed, medium intensity, residential service that includes a planned program of professionally directed evaluation, care and treatment for the restoration of functioning.

Recipients treated at an ASAM 3.1 level of care receive a level of service that is a clinically managed, low intensity residential service that includes a planned program of professionally directed evaluation, care and treatment for the restoration of functioning. Services must be delivered by licensed psychotherapists, licensed MLADC’s, licensed physicians, or licensed APRN’s.

***Note: Additional coverage details regarding services a through l above are contained in the immediately following Supplement to this Page 6 Section related to SUD Treatment and Recovery Support Services

TN No: 18-0005
Supersedes
TN No: 16-0012

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AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

Title XIX – NH
Attachment 3.1-B
Page 5-a.3

13d. Other Diagnostic, Screening, Preventive and Rehabilitative Services (continued)

Substance Use Disorder (SUD) Treatment and Recovery Support Services (continued)***

j. Evaluations to determine the existence and severity of the SUD and appropriate level of care for the recipient. This service must be provided by a licensed psychotherapist, a licensed MLADC, or a LADC engaged in independent practice in accordance with NH statutes.

k. Medically monitored residential withdrawal management consistent with Level 3.7-WM, ASAM Criteria 2013, meaning that such services are organized and delivered by behavioral health personnel and other health care providers who provide a planned regimen of care in a 24-hour live-in setting for the purpose of stabilizing situations of severe withdrawal. This residential setting is not an Institute for Mental Disease (IMD). Services must be delivered by licensed psychotherapists, licensed MLADC’s, licensed physicians, or licensed APRN’s.

l. Rehabilitative services, consistent with Level 3.1 and Level 3.5, ASAM Criteria 2013, as summarized at <https://www.medicaid.gov/state-resource-center/innovation-accelerator-program/iap-downloads/reducing-substance-use-disorders/asam-resource-guide.pdf>, or other services as described in a, h, and i above, in a facility licensed as a residential treatment and rehabilitation facility, or in a state-owned SUD residential treatment and rehabilitation facility which is exempt from licensure in accordance with RSA 151:2, II, i. This residential setting is not an Institute for Mental Diseases (IMD). Recipients being treated at an ASAM 3.5 level of care must be present in the facility at least 22 hours per day. For recipients age 21 and over, this is a clinically managed, high-intensity residential service that includes a planned program of professionally directed evaluation, care and treatment for the restoration of functioning. For recipients under age 21, this service is a clinically managed, medium intensity, residential service that includes a planned program of professionally directed evaluation, care and treatment for the restoration of functioning.

Recipients treated at an ASAM 3.1 level of care receive a level of service that is a clinically managed, low intensity residential service that includes a planned program of professionally directed evaluation, care and treatment for the restoration of functioning. Services must be delivered by licensed psychotherapists, licensed MLADC’s, licensed physicians, or licensed APRN’s.

***Note: Additional coverage details regarding services a through l above are contained in the immediately following Supplement to this Page 5 Section related to SUD Treatment and Recovery Support Services

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AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

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Attachment 3.1-A
Page 6 pre-a 1-3
Supplement, page 1

13d. Other Diagnostic, Screening, Preventive and Rehabilitative Services

SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

Additional Details and Descriptions of ASAM Levels Associated with SUD Services and/or More Detailed Service Descriptions (by service entry as described on pages 6 pre a 1 - pre a 3)

a. Screenings: No additional description.

b. Individual, group, or family treatment consistent with Level 1, ASAM (Outpatient):

Support Systems

In Level 1 services, necessary support systems include:

- Continued treatment planning individualized to the patients' needs
- Medical, psychiatric, psychological, laboratory, and toxicology services, which are available on-site or through consultation or referral. Medical and psychiatric consultation is available within 24 hours by telephone or, if in person, within a time frame appropriate to the severity and urgency of the consultation requested.
- Direct affiliation with (or close coordination through referral to) more intensive levels of care and medication management.
- Emergency services available by telephone 24 hours a day, 7 days a week.

Therapies

Therapies offered in Level 1 involve skilled treatment services, which may include evaluation, individual and group counseling, motivational enhancement, family therapy with patient present, psychoeducational groups, psychotherapy, addiction pharmacotherapy, or other skilled therapies. Skill restoration therapy which is defined as services intended to reduce or remove barriers to clients who are achieving and maintaining recovery is also included. Such services are provided in an amount, frequency, and intensity appropriate to the objectives of the treatment plan. Motivational enhancement and engagement strategies are used in preference to confrontational approaches. For patients with mental health conditions, the issues of psychotropic medication, mental health treatment, and their relationship to substance use and addictive disorders are addressed as the need arises. Therapies must be recommended by a physician or other licensed practitioner of the healing arts and furnished in accordance with page 6 pre-a 1.

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AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

Title XIX – NH
Attachment 3.1-A
Page 6 pre-a 1-3
Supplement, page 2

13d. Other Diagnostic, Screening, Preventive and Rehabilitative Services

SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

Additional Details and Descriptions of ASAM Levels Associated with SUD Services and/or More Detailed Service Descriptions (by service entry as described on pages 6 pre a 1-pre a 3)

(Continued)

c. Intensive outpatient SUD services consistent with Level 2.1 ASAM:

Support Systems

In Level 2.1 programs, necessary support systems include:

- Continued treatment planning individualized to the patients' needs
- Medical, psychological, psychiatric, laboratory, and toxicology services, which are available through consultation or referral. Psychiatric and other medical consultation is available within 24 hours by telephone and within 72 hours in person.
- Emergency services, which are available by telephone 24 hours a day, 7 days a week when the treatment program is not in session.
- Direct affiliation with (or close coordination through referral to) more and less intensive levels of care and supportive housing services.

Therapies

Therapies offered by Level 2.1 programs include:

- A minimum of 3 hours per day, 3 days per week for adults (age 21 and over) and 2 hours per day, 3 days per week for adolescents (under age 21) of skilled treatment services. Such services may include evaluation, individual and group counseling, medication management, family therapy with patient present, psychoeducational groups, and other skilled therapies. Skill restoration therapy which is defined as services intended to reduce or remove barriers to clients who are achieving and maintaining recovery is also included. Services are provided in amounts, frequencies, and intensities appropriate to the objectives of the treatment plan. In cases in which the patient is not yet fully stable to safely transfer to a Level 1 program that is not associated with the treatment agency, the patient's treatment for Level 1 services may be continued within the current Level 2.1 program. Therapies must be recommended by a physician or other licensed practitioner of the healing arts and furnished in accordance with page 6 pre-a 1.
- Family therapy for the family members, guardians, or significant others and which is for the direct benefit of the patient in accordance with the patient's needs and treatment goals identified in the patient's treatment plan, and for the purpose of assisting in the patient's recovery.
- A planned format of therapies delivered on an individual and group basis and adapted to the patient's developmental stage and comprehension level.
- Motivational interviewing, enhancement, and engagement strategies, which are used in preference to confrontational approaches.

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13d. Other Diagnostic, Screening, Preventive and Rehabilitative Services

SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

Additional Details and Descriptions of ASAM Levels Associated with SUD Services and/or More Detailed Service Descriptions (by service entry as described on pages 6 pre a 1-pre a 3)

(Continued)

d. Partial hospitalization consistent with Level 2.5 ASAM:

Support Systems

In Level 2.5 programs, necessary support systems include:

- Continued treatment planning individualized to the patients' needs
- Medical, psychological, psychiatric, laboratory, and toxicology services, which are available through consultation or referral. Psychiatric and other medical consultation is available within 8 hours by telephone and within 48 hours in person.
- Emergency services, which are available by telephone 24 hours a day, 7 days a week when the treatment program is not in session.
- Direct affiliation with (or close coordination through referral to) more and less intensive levels of care and supportive housing services.

Therapies

Therapies offered by Level 2.5 programs include:

- A minimum of 20 hours per week of skilled treatment services. Services may include evaluation, individual and group counseling, medication management, family therapy with patient present, psychoeducational groups, and other skilled therapies. Skill restoration therapy which is defined as services intended to reduce or remove barriers to clients who are achieving and maintaining recovery is also included. These are provided in the amounts, frequencies, and intensities appropriate to the objectives of the treatment plan. Therapies must be recommended by a physician or other licensed practitioner of the healing arts and furnished in accordance with page 6 pre-a 1.
- Family therapy for the family members, guardians, or significant others and which is for the direct benefit of the patient in accordance with the patient's needs and treatment goals identified in the patient's treatment plan, and for the purpose of assisting in the patient's recovery.
- A planned format of therapies delivered on an individual and group basis and adapted to the patient's developmental stage and comprehension level.
- Motivational enhancement and engagement strategies, which are preferred over confrontational approaches.

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13d. Other Diagnostic, Screening, Preventive and Rehabilitative Services

SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

Additional Details and Descriptions of ASAM Levels Associated with SUD Services and/or More Detailed Service Descriptions (by service entry as described on pages 6 pre a 1-pre a 3)

(Continued)

e. Medically monitored outpatient withdrawal management consistent with Level 1-WM ASAM:

Support Systems

In Level 1-WM withdrawal management, support systems feature the following:

- Continued treatment planning individualized to the patients' needs
- Availability of specialized psychological and psychiatric consultation and supervision for biomedical, emotional, behavioral, and cognitive problems as indicated.
- Ability to obtain a comprehensive medical history and physical examination of the patient at admission.
- Affiliation with other levels of care, including other levels of specialty addiction treatment, for additional problems identified through a comprehensive biophysical assessment.
- Ability to conduct and/or arrange for appropriate laboratory and toxicology tests, which can be point-of-care testing.
- 24-hour access to emergency medical consultation services should such services become indicated.
- Assist in accessing transportation services for patients who lack safe transportation.
- Coordinating discharge or transfer planning and referrals for counseling and community recovery support groups.

Therapies

Therapies offered by Level 1-WM withdrawal services, which must be recommended by a physician or other licensed practitioner of the healing arts and furnished in accordance with page 6 pre-a 2, include individual assessment, medication or non-medication methods of withdrawal management, patient education, non-pharmacological clinical support, involvement of family members or significant others in the withdrawal management process with the patient present,. Family involvement in the withdrawal management process is for the direct benefit of the patient in accordance with the patient's needs and treatment goals identified in the patient's treatment plan and for the purpose of assisting in the patient's recovery.

Therapies also include physician and/or nurse monitoring, assessment and management of signs and symptoms of intoxication and withdrawal.

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13d. Other Diagnostic, Screening, Preventive and Rehabilitative Services

SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

Additional Details and Descriptions of ASAM Levels Associated with SUD Services and/or More Detailed Service Descriptions (by service entry as described on pages 6 pre a 1-pre a 3)

(Continued)

f. Crisis Intervention: No additional description

g. Peer Recovery Support: Services include:

- Alcohol and/or substance abuse services delivered by a peer with lived experience in recovery
- Preventive services to include individual skills development and restoration to prevent continuation or recurrence of substance misuse
- Psychoeducation interventions to support patients' recovery
- Development (and periodic revision) of a specific recovery plan that is based on the information collected through the assessment that specifies the goals and actions to address the recovery goals and other services needed by the individual
- Ensuring the active participation of the patient, and working with the patient to develop and refine recovery goals
- Assuring the coordination of services and service planning within a provider agency, with other providers, and with other human service agencies and systems, such as local health and social services departments.

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SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

Additional Details and Descriptions of ASAM Levels Associated with SUD Services and/or More Detailed Service Descriptions (by service entry as described on pages 6 pre a 1-pre a 3)

(Continued)

h. Non-peer recovery support: Services include:

- Alcohol and/or substance abuse services delivered by a licensed or certified practitioner
- Preventive services to include individual skills development and restoration to prevent continuation or recurrence of substance misuse
- Psychoeducational interventions to support patients' recovery
- Development (and periodic revision) of a specific recovery plan that is based on the information collected through the assessment that specifies the goals and actions to address the recovery goals and other services needed by the individual
- Ensuring the active participation of the patient, and working with the patient to develop and refine recovery goals
- Assuring the coordination of services and service planning within a provider agency, with other providers, and with other human service agencies and systems, such as local health and social services departments

i. Continuous recovery monitoring: No additional description.

j. Evaluation: No additional description.

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13d. Other Diagnostic, Screening, Preventive and Rehabilitative Services

SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

Additional Details and Descriptions of ASAM Levels Associated with SUD Services and/or More Detailed Service Descriptions (by service entry as described on pages 6 pre a 1-pre a 3)

(Continued)

k. Medically monitored residential withdrawal management consistent with Level 3.7-WM ASAM:

Support Systems

In Level 3.7-WM residential withdrawal management, support systems feature the following:

- Availability of specialized clinical consultation for biomedical, emotional, behavioral and cognitive problems for the purposes of care and treatment planning for the client
- Available of medical nursing care and observation, based on clinical judgement
- Direct affiliation with other levels of care
- Ability to conduct or arrange for appropriate laboratory or toxicology tests

Therapies

Therapies offered by Level 3.7-WM residential withdrawal management programs include daily clinical services to assess and address the needs of each patient. Such clinical services may include appropriate medical services, individual and group therapies, and withdrawal support. Hourly nurse monitoring of the patient's progress and medication administration are available, if needed. The following therapies are provided as clinically necessary, depending on the patient's progress through withdrawal management and the assessed needs in ASAM Dimensions 2 through 6:

- A range of cognitive, behavioral, medical, mental health and other skilled therapies are administered to the patient on an individual or group basis. These are designed to enhance the patient's understanding of addiction, the completion of the withdrawal management process, and referral to an appropriate level of care for continuing treatment.
- Multidisciplinary individualized assessment and treatment.
- Health education services.
- Services to families and significant others with the patient present and which is for the direct benefit of the patient in accordance with the patient's needs and treatment goals identified in the patient's treatment plan and for the purpose of assisting in the patient's recovery.

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13d. Other Diagnostic, Screening, Preventive and Rehabilitative Services

SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

Additional Details and Descriptions of ASAM Levels Associated with SUD Services and/or More Detailed Service Descriptions (by service entry as described on pages 6 pre a 1-pre a 3)

(Continued)

1. Rehabilitative services in a residential treatment and rehabilitation facility consistent with Level 3.1 and Level 3.5 ASAM:

Level 3.1: Clinically Managed Low-Intensity Residential Services

Support Systems

In Level 3.1 programs, necessary support systems include:

- Continued treatment planning individualized to the patients' needs.
- Telephone or in-person consultation with a physician and emergency services, available 24 hours a day, 7 days a week.
- Assuring the coordination of services and service planning within a provider agency, with other providers, and with other human service agencies and systems, such as local health and social services departments.

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13d. Other Diagnostic, Screening, Preventive and Rehabilitative Services

SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

Additional Details and Descriptions of ASAM Levels Associated with SUD Services and/or More Detailed Service Descriptions (by service entry as described on pages 6 pre a 1-pre a 3)

(Continued)

I. Rehabilitative services in a residential treatment and rehabilitation facility consistent with Level 3.1 and Level 3.5 ASAM:

Level 3.1: Clinically Managed Low-Intensity Residential Services (continued)

Therapies

Therapies offered by Level 3.1 programs include:

- Daily clinical services to improve the patient’s ability to structure and organize the tasks of daily living and recovery to include preventive services to include individual skills development and restoration to prevent continuation or recurrence of substance misuse.
- Planned clinical program activities (constituting at least 5 hours per week of professionally directed treatment) to stabilize and maintain the stability of the patient’s substance use disorder symptoms, and to help him or her develop and apply recovery skills. Activities may include relapse prevention, exploring interpersonal choices, and development of a social network supportive of recovery.
- Addiction pharmacotherapy.
- Random drug screening to monitor and reinforce treatment gains, as appropriate to the patient’s individual treatment plan.
- Motivational enhancement and engagement strategies appropriate to the patient’s stage of readiness to change, which are used in preference to confrontational approaches.
- Counseling and clinical monitoring to support successful initial involvement or reinvolved in regular, productive daily activity (such as work or school) and, as indicated, successful reintegration into family living. Health education services are also provided.
- Regular monitoring of the patient’s medication adherence.
- Recovery support services.
- Opportunities for the patient to be introduced to the potential benefits of addiction pharmacotherapies as a tool to manage his or her addictive disorder.

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13d. Other Diagnostic, Screening, Preventive and Rehabilitative Services

SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

Additional Details and Descriptions of ASAM Levels Associated with SUD Services and/or More Detailed Service Descriptions (by service entry as described on pages 6 pre a 1-pre a 3)
(Continued)

I. Rehabilitative services in a residential treatment and rehabilitation facility consistent with Level 3.1 and Level 3.5 ASAM (continued):

Level 3.5: Clinically Managed High-Intensity Residential Services (Adult Criteria)

Support Systems

In Level 3.5 programs, necessary support systems include:

- Continued treatment planning individualized to the patients' needs
- Telephone or in-person consultation with a physician, or a physician assistant or nurse practitioner in states where they are licensed as physician extenders and may perform the duties designated her for a physician; emergency services, available 24 hours a day, 7 days a week.
- Assuring the coordination of services and service planning within a provider agency, with other providers, and with other human service agencies and systems, such as local health and social services departments.
- Stabilization of imminent risk as defined by ASAM.

Therapies

Therapies offered by Level 3.5 programs include:

- Daily clinical services to improve the patient's ability to structure and organize the tasks of daily living and recovery to include preventive services to include individual skills development and restoration to prevent continuation or recurrence of substance misuse.
- Planned clinical program activities to stabilize and maintain stabilization of the patient's addiction symptoms, and to help him or her develop and apply recovery skills. Activities may include relapse prevention, exploring interpersonal choices, and development of a social network supportive of recovery.
- Counseling and clinical monitoring to promote successful initial involvement or reinvolved in regular, productive daily activity, such as work or school and, as indicated, successful reintegration into family living.

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13d. Other Diagnostic, Screening, Preventive and Rehabilitative Services

SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

Additional Details and Descriptions of ASAM Levels Associated with SUD Services and/or More Detailed Service Descriptions (by service entry as described on pages 6 pre a 1-pre a 3)

(Continued)

I. Rehabilitative services in a residential treatment and rehabilitation facility consistent with Level 3.1 and Level 3.5 ASAM (continued):

Level 3.5: Clinically Managed High-Intensity Residential Services (Adult Criteria) (continued) Therapies (continued)

Therapies offered by Level 3.5 programs include:

- Random drug screening to shape behavior and reinforce treatment gains, as appropriate to the patient’s individual treatment plan.
- A range of evidence-based cognitive, behavioral, and other skilled therapies administered on an individual and group basis, medication education and management, addiction pharmacotherapy, psychoeducational groups, and skill development services to prevent continuation and recurrence of substance misuse, adapted to the patient’s developmental stage and level of comprehension, understanding, and physical abilities, as well as skill restoration therapy which is defined as services intended to reduce or remove barriers to clients who are achieving and maintaining recovery.
- Motivational enhancement and engagement strategies appropriate to the patient’s stage of readiness and desire to change. Motivational therapies and other evidence-based practices are used in preference to the confrontational strategies.
- Counseling and clinical interventions to develop or restore the patient’s skills needed for productive daily activities and integration into family living in order to prevent the continuation or recurrence of substance misuse.
- Monitoring of the patient’s adherence in taking any prescribed medications and/or any permitted over-the-counter (OTC) medications or supplements.
- Planned clinical activities to enhance the patient’s understanding of his or her substance use and/or mental disorders.

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13d. Other Diagnostic, Screening, Preventive and Rehabilitative Services

SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

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(Continued)

I. Rehabilitative services in a residential treatment and rehabilitation facility consistent with Level 3.1 and Level 3.5 ASAM (continued):

Level 3.5: Clinically Managed High-Intensity Residential Services (Adult Criteria) (continued) Therapies (continued)

Therapies offered by Level 3.5 programs include (continued from page 11):

- Daily scheduled professional services, including interdisciplinary assessments and treatment, designed to develop and apply recovery skills. Such services may include relapse prevention, exploring interpersonal choices, and development of a social network supportive of recovery. Such services may also include medical services, nursing services, individual and group counseling, psychotherapy, family therapy with patient present, psychoeducational groups, and physical therapy as well as skill restoration therapy which is defined as services intended to reduce or remove barriers to clients who are achieving and maintaining recovery.
- Planned community reinforcement designed to foster prosocial values and milieu or community living skills such as attending recovery support groups and engaging in pro-social activities.
- Services for the patient’s family and significant others with the patient present which is for the direct benefit of the patient, in accordance with the patient’s needs and treatment goals identified in the patient’s treatment plan, and for the purpose of assisting in the patient’s recovery.

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a. Screenings: No additional description.

b. Individual, group, or family treatment consistent with Level 1, ASAM (Outpatient):

Support Systems

In Level 1 services, necessary support systems include:

- Continued treatment planning individualized to the patients' needs
- Medical, psychiatric, psychological, laboratory, and toxicology services, which are available on-site or through consultation or referral. Medical and psychiatric consultation is available within 24 hours by telephone or, if in person, within a time frame appropriate to the severity and urgency of the consultation requested.
- Direct affiliation with (or close coordination through referral to) more intensive levels of care and medication management.
- Emergency services available by telephone 24 hours a day, 7 days a week.

Therapies

Therapies offered in Level 1 involve skilled treatment services, which may include evaluation, individual and group counseling, motivational enhancement, family therapy with patient present, psychoeducational groups, psychotherapy, addiction pharmacotherapy, or other skilled therapies. Skill restoration therapy which is defined as services intended to reduce or remove barriers to clients who are achieving and maintaining recovery is also included. Such services are provided in an amount, frequency, and intensity appropriate to the objectives of the treatment plan. Motivational enhancement and engagement strategies are used in preference to confrontational approaches. For patients with mental health conditions, the issues of psychotropic medication, mental health treatment, and their relationship to substance use and addictive disorders are addressed as the need arises. Therapies must be recommended by a physician or other licensed practitioner of the healing arts and furnished in accordance with page 5-a 1.

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SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

Additional Details and Descriptions of ASAM Levels Associated with SUD Services and/or More Detailed Service Descriptions (by service entry as described on pages 5-a 1 - 5-a 3)

(Continued)

c. Intensive outpatient SUD services consistent with Level 2.1 ASAM:

Support Systems

In Level 2.1 programs, necessary support systems include:

- Continued treatment planning individualized to the patients' needs
- Medical, psychological, psychiatric, laboratory, and toxicology services, which are available through consultation or referral. Psychiatric and other medical consultation is available within 24 hours by telephone and within 72 hours in person.
- Emergency services, which are available by telephone 24 hours a day, 7 days a week when the treatment program is not in session.
- Direct affiliation with (or close coordination through referral to) more and less intensive levels of care and supportive housing services.

Therapies

Therapies offered by Level 2.1 programs include:

- A minimum of 3 hours per day, 3 days per week for adults (age 21 and over) and 2 hours per day, 3 days per week for adolescents (under age 21) of skilled treatment services. Such services may include evaluation, individual and group counseling, medication management, family therapy with patient present, psychoeducational groups, and other skilled therapies. Skill restoration therapy which is defined as services intended to reduce or remove barriers to clients who are achieving and maintaining recovery is also included. Services are provided in amounts, frequencies, and intensities appropriate to the objectives of the treatment plan. In cases in which the patient is not yet fully stable to safely transfer to a Level 1 program that is not associated with the treatment agency, the patient's treatment for Level 1 services may be continued within the current Level 2.1 program. Therapies must be recommended by a physician or other licensed practitioner of the healing arts and furnished in accordance with page 5-a 1.
- Family therapy for the family members, guardians, or significant others and which is for the direct benefit of the patient in accordance with the patient's needs and treatment goals identified in the patient's treatment plan, and for the purpose of assisting in the patient's recovery.
- A planned format of therapies delivered on an individual and group basis and adapted to the patient's developmental stage and comprehension level.
- Motivational interviewing, enhancement, and engagement strategies, which are used in preference to confrontational approaches.

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SUPPLEMENT TO: Substance Use Disorder (SUD) Treatment and Recovery Support Services

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(Continued)

d. Partial hospitalization consistent with Level 2.5 ASAM:

Support Systems

In Level 2.5 programs, necessary support systems include:

- Continued treatment planning individualized to the patients' needs
- Medical, psychological, psychiatric, laboratory, and toxicology services, which are available through consultation or referral. Psychiatric and other medical consultation is available within 8 hours by telephone and within 48 hours in person.
- Emergency services, which are available by telephone 24 hours a day, 7 days a week when the treatment program is not in session.
- Direct affiliation with (or close coordination through referral to) more and less intensive levels of care and supportive housing services.

Therapies

Therapies offered by Level 2.5 programs include:

- A minimum of 20 hours per week of skilled treatment services. Services may include evaluation, individual and group counseling, medication management, family therapy with patient present, psychoeducational groups, and other skilled therapies. Skill restoration therapy which is defined as services intended to reduce or remove barriers to clients who are achieving and maintaining recovery is also included. These are provided in the amounts, frequencies, and intensities appropriate to the objectives of the treatment plan. Therapies must be recommended by a physician or other licensed practitioner of the healing arts and furnished in accordance with page 5-a 1.
- Family therapy for the family members, guardians, or significant others and which is for the direct benefit of the patient in accordance with the patient's needs and treatment goals identified in the patient's treatment plan, and for the purpose of assisting in the patient's recovery.
- A planned format of therapies delivered on an individual and group basis and adapted to the patient's developmental stage and comprehension level.
- Motivational enhancement and engagement strategies, which are preferred over confrontational approaches.

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(Continued)

e. Medically monitored outpatient withdrawal management consistent with Level 1-WM ASAM:

Support Systems

In Level 1-WM withdrawal management, support systems feature the following:

- Continued treatment planning individualized to the patients' needs
- Availability of specialized psychological and psychiatric consultation and supervision for biomedical, emotional, behavioral, and cognitive problems as indicated.
- Ability to obtain a comprehensive medical history and physical examination of the patient at admission.
- Affiliation with other levels of care, including other levels of specialty addiction treatment, for additional problems identified through a comprehensive biophysical assessment.
- Ability to conduct and/or arrange for appropriate laboratory and toxicology tests, which can be point-of-care testing.
- 24-hour access to emergency medical consultation services should such services become indicated.
- Assist in accessing transportation services for patients who lack safe transportation.
- Coordinating discharge or transfer planning and referrals for counseling and community recovery support groups.

Therapies

Therapies offered by Level 1-WM withdrawal services, which must be recommended by a physician or other licensed practitioner of the healing arts and furnished in accordance with page 5-a 2, include individual assessment, medication or non-medication methods of withdrawal management, patient education, non-pharmacological clinical support, involvement of family members or significant others in the withdrawal management process with the patient present,. Family involvement in the withdrawal management process is for the direct benefit of the patient in accordance with the patient's needs and treatment goals identified in the patient's treatment plan and for the purpose of assisting in the patient's recovery.

Therapies also include physician and/or nurse monitoring, assessment and management of signs and symptoms of intoxication and withdrawal.

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(Continued)

f. Crisis Intervention: No additional description

g. Peer Recovery Support: Services include:

- Alcohol and/or substance abuse services delivered by a peer with lived experience in recovery
- Preventive services to include individual skills development and restoration to prevent continuation or recurrence of substance misuse
- Psychoeducation interventions to support patients' recovery
- Development (and periodic revision) of a specific recovery plan that is based on the information collected through the assessment that specifies the goals and actions to address the recovery goals and other services needed by the individual
- Ensuring the active participation of the patient, and working with the patient to develop and refine recovery goals
- Assuring the coordination of services and service planning within a provider agency, with other providers, and with other human service agencies and systems, such as local health and social services departments.

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(Continued)

h. Non-peer recovery support: Services include:

- Alcohol and/or substance abuse services delivered by a licensed or certified practitioner
- Preventive services to include individual skills development and restoration to prevent continuation or recurrence of substance misuse
- Psychoeducational interventions to support patients' recovery
- Development (and periodic revision) of a specific recovery plan that is based on the information collected through the assessment that specifies the goals and actions to address the recovery goals and other services needed by the individual
- Ensuring the active participation of the patient, and working with the patient to develop and refine recovery goals
- Assuring the coordination of services and service planning within a provider agency, with other providers, and with other human service agencies and systems, such as local health and social services departments

i. Continuous recovery monitoring: No additional description.

j. Evaluation: No additional description.

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(Continued)

k. Medically monitored residential withdrawal management consistent with Level 3.7-WM ASAM:

Support Systems

In Level 3.7-WM residential withdrawal management, support systems feature the following:

- Availability of specialized clinical consultation for biomedical, emotional, behavioral and cognitive problems for the purposes of care and treatment planning for the client
- Available of medical nursing care and observation, based on clinical judgement
- Direct affiliation with other levels of care
- Ability to conduct or arrange for appropriate laboratory or toxicology tests

Therapies

Therapies offered by Level 3.7-WM residential withdrawal management programs include daily clinical services to assess and address the needs of each patient. Such clinical services may include appropriate medical services, individual and group therapies, and withdrawal support. Hourly nurse monitoring of the patient's progress and medication administration are available, if needed. The following therapies are provided as clinically necessary, depending on the patient's progress through withdrawal management and the assessed needs in ASAM Dimensions 2 through 6:

- A range of cognitive, behavioral, medical, mental health and other skilled therapies are administered to the patient on an individual or group basis. These are designed to enhance the patient's understanding of addiction, the completion of the withdrawal management process, and referral to an appropriate level of care for continuing treatment.
- Multidisciplinary individualized assessment and treatment.
- Health education services.
- Services to families and significant others with the patient present and which is for the direct benefit of the patient in accordance with the patient's needs and treatment goals identified in the patient's treatment plan and for the purpose of assisting in the patient's recovery.

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(Continued)

1. Rehabilitative services in a residential treatment and rehabilitation facility consistent with Level 3.1 and Level 3.5 ASAM:

Level 3.1: Clinically Managed Low-Intensity Residential Services

Support Systems

In Level 3.1 programs, necessary support systems include:

- Continued treatment planning individualized to the patients' needs.
- Telephone or in-person consultation with a physician and emergency services, available 24 hours a day, 7 days a week.
- Assuring the coordination of services and service planning within a provider agency, with other providers, and with other human service agencies and systems, such as local health and social services departments.

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(Continued)

I. Rehabilitative services in a residential treatment and rehabilitation facility consistent with Level 3.1 and Level 3.5 ASAM:

Level 3.1: Clinically Managed Low-Intensity Residential Services (continued)

Therapies

Therapies offered by Level 3.1 programs include:

- Daily clinical services to improve the patient’s ability to structure and organize the tasks of daily living and recovery to include preventive services to include individual skills development and restoration to prevent continuation or recurrence of substance misuse.
- Planned clinical program activities (constituting at least 5 hours per week of professionally directed treatment) to stabilize and maintain the stability of the patient’s substance use disorder symptoms, and to help him or her develop and apply recovery skills. Activities may include relapse prevention, exploring interpersonal choices, and development of a social network supportive of recovery.
- Addiction pharmacotherapy.
- Random drug screening to monitor and reinforce treatment gains, as appropriate to the patient’s individual treatment plan.
- Motivational enhancement and engagement strategies appropriate to the patient’s stage of readiness to change, which are used in preference to confrontational approaches.
- Counseling and clinical monitoring to support successful initial involvement or reinvolvement in regular, productive daily activity (such as work or school) and, as indicated, successful reintegration into family living. Health education services are also provided.
- Regular monitoring of the patient’s medication adherence.
- Recovery support services.
- Opportunities for the patient to be introduced to the potential benefits of addiction pharmacotherapies as a tool to manage his or her addictive disorder.

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(Continued)

I. Rehabilitative services in a residential treatment and rehabilitation facility consistent with Level 3.1 and Level 3.5 ASAM (continued):

Level 3.5: Clinically Managed High-Intensity Residential Services (Adult Criteria)

Support Systems

In Level 3.5 programs, necessary support systems include:

- Continued treatment planning individualized to the patients' needs
- Telephone or in-person consultation with a physician, or a physician assistant or nurse practitioner in states where they are licensed as physician extenders and may perform the duties designated her for a physician; emergency services, available 24 hours a day, 7 days a week.
- Assuring the coordination of services and service planning within a provider agency, with other providers, and with other human service agencies and systems, such as local health and social services departments.
- Stabilization of imminent risk as defined by ASAM.

Therapies

Therapies offered by Level 3.5 programs include:

- Daily clinical services to improve the patient's ability to structure and organize the tasks of daily living and recovery to include preventive services to include individual skills development and restoration to prevent continuation or recurrence of substance misuse.
- Planned clinical program activities to stabilize and maintain stabilization of the patient's addiction symptoms, and to help him or her develop and apply recovery skills. Activities may include relapse prevention, exploring interpersonal choices, and development of a social network supportive of recovery.
- Counseling and clinical monitoring to promote successful initial involvement or reinvolverment in regular, productive daily activity, such as work or school and, as indicated, successful reintegration into family living.

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(Continued)

I. Rehabilitative services in a residential treatment and rehabilitation facility consistent with Level 3.1 and Level 3.5 ASAM (continued):

Level 3.5: Clinically Managed High-Intensity Residential Services (Adult Criteria) (continued) Therapies (continued)

Therapies offered by Level 3.5 programs include:

- Random drug screening to shape behavior and reinforce treatment gains, as appropriate to the patient’s individual treatment plan.
- A range of evidence-based cognitive, behavioral, and other skilled therapies administered on an individual and group basis, medication education and management, addiction pharmacotherapy, psychoeducational groups, and skill development services to prevent continuation and recurrence of substance misuse, adapted to the patient’s developmental stage and level of comprehension, understanding, and physical abilities, as well as skill restoration therapy which is defined as services intended to reduce or remove barriers to clients who are achieving and maintaining recovery.
- Motivational enhancement and engagement strategies appropriate to the patient’s stage of readiness and desire to change. Motivational therapies and other evidence-based practices are used in preference to the confrontational strategies.
- Counseling and clinical interventions to develop or restore the patient’s skills needed for productive daily activities and integration into family living in order to prevent the continuation or recurrence of substance misuse.
- Monitoring of the patient’s adherence in taking any prescribed medications and/or any permitted over-the-counter (OTC) medications or supplements.
- Planned clinical activities to enhance the patient’s understanding of his or her substance use and/or mental disorders.

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(Continued)

I. Rehabilitative services in a residential treatment and rehabilitation facility consistent with Level 3.1 and Level 3.5 ASAM (continued):

Level 3.5: Clinically Managed High-Intensity Residential Services (Adult Criteria) (continued) Therapies (continued)

Therapies offered by Level 3.5 programs include (continued from page 11):

- Daily scheduled professional services, including interdisciplinary assessments and treatment, designed to develop and apply recovery skills. Such services may include relapse prevention, exploring interpersonal choices, and development of a social network supportive of recovery. Such services may also include medical services, nursing services, individual and group counseling, psychotherapy, family therapy with patient present, psychoeducational groups, and physical therapy as well as skill restoration therapy which is defined as services intended to reduce or remove barriers to clients who are achieving and maintaining recovery.
- Planned community reinforcement designed to foster prosocial values and milieu or community living skills such as attending recovery support groups and engaging in pro-social activities.
- Services for the patient’s family and significant others with the patient present which is for the direct benefit of the patient, in accordance with the patient’s needs and treatment goals identified in the patient’s treatment plan, and for the purpose of assisting in the patient’s recovery.

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