

SUD Residential Treatment Providers (3.1, 3.3, & 3.5) – Daily and Weekly Minimum Required Service Activities

<p style="text-align: center;"><i>DMC-ODS Daily Service Requirement ²</i></p> <p style="text-align: center;"><i>Note: Client must be at the program the night of claiming</i></p>	<p style="text-align: center;"><i>DMC-ODS Weekly Minimum Service Activity Hours ¹</i></p>	<p style="text-align: center;"><i>AOD Certification Standards Residential Weekly Minimum ¹</i></p>
<p style="text-align: center;">At least one of the following services must be provided each day of residential claiming:</p> <ul style="list-style-type: none"> Assessment Counseling (individual/group) Family Therapy SUD Crisis Intervention Services Patient Education (individual/group) ³ 	<p style="text-align: center;">A minimum of 5 hours of services required per calendar week</p>	<p style="text-align: center;">A residential client shall be provided a minimum of five (5) hours per week of counseling services (individual or group).</p>

¹ Weekly minimum hour requirements may be pro-rated based on the number of days of service claimed in a seven (7) day calendar week period (Saturday to Sunday).

² All residential services, with some exceptions for coordinating care, must be provided exclusively on-site at the certified facility where the day claim will be made.

³ Patient Education means providing research-based education on addiction, treatment, recovery and associated health risks.

ACBH Monitoring:

ACBH will monitor to ensure that minimum service activity requirements are met.

Providers must notify ACBH of clients who do not reach minimum service requirements. In the clinical record providers must clearly document the reason(s) for not meeting minimum requirements. No claiming may occur when DMC-ODS daily and weekly minimum service requirements are not met. Re-assessment to other level of care may be requested.

For notification and questions please contact gata@acgov.org, SUDSystemOfCare@acgov.org, or utilizationmanagment@acgov.org.

ACBH Residential Procedure Code Types:

- **Residential Bed Day:** When a client is occupying a bed & has completed daily minimum required service activities.
- **Residential Admin Day:** When a beneficiary is occupying a bed but does not meet medical necessity criteria to claim for that day.
- **Residential Bed Hold Day:** When a spot is being held for an ACBH beneficiary, but the beneficiary is not currently using the bed.
- **Residential Child's Bed Day:** When a beneficiary has children who are living with them at the residential program.

Additional Services:

Care Coordination, Recovery Services, Medication-Assisted Treatment (MAT), Peer Support Services, and Clinician Consultation must be documented and claimed separate from the day rate using the Clinician's Gateway progress note single service template and the applicable procedure code. These activities do not meet daily service requirements, nor count towards any minimum service hours. See [BHIN 24-001](#) for service definitions.

Residential programs providing MAT and Medication Services must have an [Incidental Medical Services \(IMS\) Certification](#). Regardless, all SUD residential programs must have robust MAT policies, procedures, and referral mechanisms (Refer to [BHIN 23-054](#) for full MAT requirements). Clinician Consultation is available at all SUD LOCs. Upon implementation and contracting, Peer Support Services can only be provided by Certified Peer Specialists.

[DHCS BHINs](#): 24-001, 23-054 (MAT), 21-001, 21-001 Exhibit A, 18-031 (IMS); [DHCS AOD Certification Standards](#); [DHCS DMC-ODS payment reform billing manual](#)