

	Behavioral Health and Developmental Disabilities (BHDD) Division
	Medicaid Services Provider Manual for Substance Use Disorder and Adult Mental Health Date effective: October 1, 2022 Date revised: New
Policy Number: 536	Subject: SUD Clinically Managed Residential Withdrawal Management (ASAM 3.2-WM) Adult

Definition

ASAM 3.2-WM is clinically managed residential withdrawal programs providing 24-hour structure and support. Members are provided a 24-hour supervision, observation, and support in addition to daily clinical services. These services are provided to a member diagnosed with a moderate or severe SUD and whose intoxication/withdrawal signs and symptoms are significant enough to require 24-hour structure and support. Services focus on social support to safely assist a member through withdrawal without the need for medical and nursing services.

Medical Necessity Criteria

Member must meet the moderate or severe SUD criteria as described in this manual and meet the ASAM criteria for diagnostic and dimensional admission criteria for ASAM 3.2-WM level of care.

Provider Requirements

- (1) ASAM 3.2-WM must be provided by a state-approved substance use disorder program licensed to provide this level of care.
- (2) Providers offering ASAM 3.2-WM must have an interdisciplinary team

Service Requirements

- (1) Services must be provided in accordance with all state and federal regulations pertaining to the administration of the service.
- (2) The provider must adhere to the ASAM criteria service standards for service planning and level of care placement characteristic category standards. These categories include:

- (a) therapies;
 - (b) support systems;
 - (c) assessment/ITP review;
 - (d) staff; and
 - (e) documentation.
- (3) ASAM 3.2-WM is a bundled service that includes the availability of the following service components:
- (a) individual SUD therapy;
 - (b) group SUD therapy;
 - (c) family SUD therapy;
 - (d) care management;
 - (e) educational groups; and
 - (f) community based psychiatric rehabilitation support services (CBPRS).
- (4) It is not required that each member receiving the ASAM 3.2-WM bundle receive every service component listed above. Medically necessary services must be provided and documented in the individualized treatment plan and the services received must be documented clearly in the member's treatment file.
- (5) In order for the provider to bill the bundled service, the member must receive daily clinical services. Clinical services must be provided by licensed or credentialed clinical staff.

Utilization Management

- (1) Prior authorization is required. The department or the UR Contractor may issue the authorization for as many days as deemed medically necessary up to four (4) days.
- (2) Continued Stay Review is required for up to three (3) days.
- (3) Member must continue to meet the SUD criteria as described in this manual with a severity specifier of moderate or severe and meet the ASAM criteria diagnostic and dimensional admission criteria for SUD Clinically Managed Residential Withdrawal Management (ASAM 3.2-WM) level of care.