## ASAM UPDATE – 2/22/19 LEVEL OF CARE DESIGNATION PROCESS FOR RESIDENTIAL/INPATIENT PROVIDERS

Note: This information was sent out in a memorandum from Deputy Secretaries Ellen DiDomenico (DDAP) and Lynn Kovich (DHS/OMHSAS) on 2/21/19 to residential/inpatient providers and other stakeholders.

- 1. Pennsylvania is in the process of fully transitioning to the ASAM Criteria, 2013. The use of the ASAM Criteria as a level of care (LOC) placement was initiated on July 1, 2018, with full transition as an admission criterion on January 1, 2019.
- 2. In addition to providing LOC placement guidance, the ASAM Criteria provides evidence-based program criteria and a recovery oriented, person-centered approach to care. Transitioning our system to full use of the Criteria for these purposes will occur over time.
- 3. There are some LOCs in the ASAM Criteria that have not been previously identified in PA's system of care or that have existed but have not been clearly defined, e.g., the ASAM Criteria's 3.3 and 3.7 LOCs. Additionally, while some previous work regarding the delivery of co-occurring services was initiated, this effort was never brought to completion.
- 4. Historically, PCPC has defined residential treatment as "medically monitored" or "medically managed". The ASAM Criteria includes "clinically managed". DDAP and DHS are currently in the process of aligning our understanding and required provision of services and staffing qualifications that determine each of these designations.
- 5. In September 2018, an email went out to licensed inpatient providers (except those only doing withdrawal management) requesting submission of information via a survey monkey to assist the departments in making these preliminary designations.
- 6. From this information, DDAP/DHS is in the process of sending out letters to each facility, by license, identifying LOCs that have been initially determined to deliver a type of service/LOC.
  - This determination does not dictate a service that the provider MUST offer; rather, it indicates what it MAY offer.
  - Receipt of this designation does not mean that the payor should, at this time, offer a
    differential rate or that a provider should currently expect such a differential rate as we are not
    at that stage in the transition process. Moving forward, impacts to rate setting will be
    determined as a system, with guidance from the departments to ensure consistency with
    expectations in process across the state.
- 7. DDAP has been working with a Rate Setting Committee as it relates to residential rates payable to providers by SCAs. This same committee will be considering how the transition to ASAM could impact this process. BH-MCOs establish rates independently; however, communications will remain fluid between DHS to the BH-MCOs and contractors to inform the BH-MCOs of the rate process implemented for SCA contracting. The rate setting process will remain between the BH-MCO and the provider. *Until a formal announcement has been made regarding fee structures and*

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rate setting, providers and payers should maintain the provision of and payment for non-hospital residential services as they have been.

- 8. Providers who never completed the survey necessary for designation should do so at the following link: <a href="https://arcg.is/yqC5C">https://arcg.is/yqC5C</a> as soon as possible, but no later than April 30, 2019. This will allow DDAP/DHS to complete a designation for those providers that have not yet received one. All designations will be confirmed by both departments through the regular onsite licensing visit.
- 9. Direct questions pertaining to the ASAM Criteria transition to RA-DAASAM@pa.gov.
- 10. To receive the latest updates, all stakeholders are encouraged to sign up for DDAP's listserv by emailing
  - <u>RA-DAPressOffice@pa.gov</u> with your name(s), organization, and email address(es). Please include "Listserv" the subject line.