



SBH-ASO POLICIES AND PROCEDURES

Policy Name: ACCESS TO WITHDRAWAL
MANAGEMENT SUBSTANCE USE
DISORDER SERVICES

Policy Number: UM804

Effective Date: 1/01/2020

Revision Dates: 5/11/2020

Reviewed Date: 7/26/2019; 3/4/2020; 4/8/2024

Executive Board Approval Dates: 11/1/2019; 1/15/2021

PURPOSE

To provide direction for appropriate utilization of residential Withdrawal Management (WM) (American Society of Addiction Medicine level (ASAM) 3.7 WM and 3.2 WM) in accordance with medical necessity, financial eligibility, and within available resources.

POLICY

The Salish Behavioral Health Administrative Services Organization (SBH-ASO) supports both youth and adult individuals in accessing medically necessary (per WAC 182-500-0070) residential WM services (ASAM Level 3.2 WM and 3.7 WM) as assistance in the process of withdrawal from psychoactive substances in a safe and effective manner. SBH-ASO supports WM services that include three (3) necessary components: evaluation, stabilization, and motivating individual readiness to engage in SUD treatment services.

The SBH-ASO maintains a network of contracted Washington (WA) State licensed and certified WM SUD Behavioral Health Agencies (BHA), available to assess and accept individuals 24-hours a day, 7 days per week. Services are provided to Individuals who meet medical necessity according to current ASAM criteria for placement at the designated level of care, and within available resources.

Secure Withdrawal Management Facilities provide involuntary treatment to individuals detained under the Involuntary Treatment Act (ITA) at ASAM Level 3.7. These services provide evaluation, assessment and WM services to individuals detained by a Designated Crisis Responder (DCR), as well as facilitation of transitions to appropriate voluntary or involuntary inpatient services or to Less Restrictive Alternative (LRA) in accordance with WAC 246-341-1104.

PROCEDURE

1. For individuals attempting to access voluntary WM services they may:
 - a. Be referred by an SBH-ASO contracted BHA that provides SUD services; and/or
 - b. Call a WM SUD facility directly to arrange admission to services.

I. Emergent Admission

1. No prior authorization is required from SBH-ASO for WM in Emergent Admissions; however, individuals must meet financial and medical necessity eligibility. Notification is required within 24 hours of admission.
2. Emergent admissions are those instances where the individual is referred for WM services by one of the following:
 - i. Hospital Emergency Department Physician
 - ii. Law Enforcement
 - iii. DCR in consultation with a Substance Use Disorder Professional (SUDP)
3. Secure Withdrawal Management ASAM 3.7 is considered emergent.
 - i. For Secure WM under the ITA, legal status is accepted in lieu of an eligibility review and medical necessity until their legal status changes.
 - ii. For Secure WM, when a parent or legal guardian brings their child with or without the consent of the child and the facility meets RCW 71.34.600 and 660, notification is required within 24 hours.
4. Concurrent view will occur within one business day of receipt of Notification.

II. Planned Admission

- a. If admission is planned, Prior Authorization is required. The provider shall submit a Notification and Authorization Request Form to SBH-ASO.
- b. Prospective reviews will be completed within 72 hours from the date of request.
2. Each SUD WM facility must have policies and procedures implemented regarding criteria for admittance, length-of-stay, transfer, and discharge.
3. A facility that provides WM services must provide documentation in an individual's clinical record of the following:
 - a. An SUD screening before admission into services;
 - b. The use of ASAM criteria for admission, continued services, discharge planning and discharge decisions;
 - c. A voluntary consent to treatment form signed by the individual or legal guardian;

- d. All release of information (ROI) forms signed and dated by the individual or legal guardian for treatment providers, medical providers, other continuing care providers and family members (family as defined by the individual).
- e. The individual was informed of federal confidentiality requirements and received a copy of the notice required per 42 CFR, Part 2;
- f. The individual received a Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (HIV/AIDS) brief risk intervention;
- g. The individual received a tuberculosis (TB) screening and assistance to access medical treatment as necessary;
- h. Individualized progress notes in a timely manner from each shift and as events occur, such as periodic monitoring of vitals and other withdrawal symptoms or documentation as to why this did not occur;
- i. A discharge summary, including a continuing care recommendation and a description of the individual's physical condition, completed within seven (7) business days of discharge; and
- j. An attempt to assist the individual in arranging either an SUD assessment while in the WM facility, or if the individual has completed an SUD assessment, then admittance into the recommended ASAM level of care based on the ASAM placement criteria and medical necessity.
- k. The WM facility must submit a SUD Notification and Authorization Request form for the identified ASAM level of care for an individual to be admitted to a residential facility (ASAM level 3.3 or 3.5) directly from the WM facility.
 - i. The WM facility submits an electronic authorization request to SBH-ASO, including supporting documentation if the individual meets financial and medical necessity criteria according to current ASAM criteria.
 - ii. The WM facility arranges facility admission date and transportation based on agreement with the individual and/or legal guardian.
 - iii. The WM facility provides other referrals and linkages to specific SUD outpatient and mental health outpatient providers, housing, shelter, food and clothing based on the individualized needs of each individual admitted.