



# Department of Medicaid

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**TO:** Contracted Medicaid Managed Care Plans  
Contracted MyCare Ohio Plans

**FROM:** Roxanne Richardson, Deputy Director  
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**SUBJECT:** Documentation Requirements for Community Behavioral Health Substance Use Disorder Treatment Authorizations

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## Background

The Ohio Medicaid program recognizes The American Society of Addiction Medicine (ASAM) Criteria<sup>®i</sup> as the clinical guide for assessing and treating individuals with substance use disorders (SUDs) in community behavioral health centers (CBHCs). Ohio Administrative Code (OAC) rule 5160-27-09 establishes Medicaid coverage for SUD services provided by CBHCs in accordance with the ASAM Criteria<sup>®</sup>. Appendix G of the Medicaid Managed Care Provider Agreement and the MyCare Ohio Provider Agreement requires managed care plans to use the ASAM Criteria<sup>®</sup> when reviewing level of care for SUD treatment provided in community behavioral health centers.

The ASAM Criteria<sup>®</sup> was selected to bring an objective strengths-based multi-dimensional assessment and level of care placement methodology into practice to address individual patient needs, strengths, and supports. The purpose of this guidance is to provide direction regarding managed care plan (MCP) and MyCare Ohio plan (MCOP) utilization management processes to operationalize ASAM Criteria<sup>®</sup> to ensure alignment with OAC provider documentation standards for community behavioral health providers.

## Overview of Community Behavioral Health Provider Documentation Requirements

Community behavioral health providers certified by the Ohio Department of Mental Health and Addiction Services (OhioMHAS) are required to use the ASAM Criteria<sup>®</sup> for level of care placement for individuals with SUDs. CBHCs are required to maintain patient-specific documentation supporting the ASAM multi-dimensional assessment. This assessment is used to inform clinically, and outcome-based treatment as reflected in the individualized treatment plan (ITP). Practitioners providing SUD treatment services to enrolled members are expected to evaluate each member's progress and treatment needs in the natural course of providing care, rather than as a separate and distinct activity. Specific documentation requirements for CBHCs are described in OAC Chapter 5122-27 and OAC rule 5160-8-05.

Progress notes and/or program-specific forms with content detailing progress made on patient treatment goals identified in the ITP and reflective of ongoing multidimensional assessment are expected documentation. Together, these documents should provide a clear indication of treatment progress (or lack thereof), ongoing justification for the ASAM level of care being provided, and a basis for seeking authorization for additional treatment services at either the current or a new level of care.

Guidance to Managed Care Plans and MyCare Ohio Plans

In conducting utilization management activities, MCPs and MCOPs may request clinical documentation needed to evaluate authorization requests for SUD services or level of care. This may include individualized treatment plans, progress notes, and/or other clinical documentation to determine if the SUD service or level of care authorization request is consistent with ASAM Criteria® based on the initial and ongoing multidimensional assessment of patient needs.

MCPs and MCOPs may not require providers to collect documentation beyond what is required to be documented by providers in accordance with OAC Chapter 5122-27 and OAC rule 5160-8-05. However, MCPs and MCOPs may use face sheets or summary sheets for CBHCs to transmit information from the existing clinical documentation to support streamlined and efficient evaluation of treatment authorization requests.

Likewise, MCPs and MCOPs may not require providers to update individualized treatment plans more frequently than as required by OAC. However, if a provider is submitting a treatment authorization request that does not correspond with an OAC-required ITP update MCPs and MCOPs may request progress notes, group notes, or other documentation from the clinical record to support medical necessity for the requested SUD treatment.

**Effective immediately, please review and update CBHC utilization management policies and procedures as necessary to ensure adherence to this guidance.**

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<sup>i</sup> Mee-Lee D, Shulman GD, Fishman MJ, Gastfriend DR, Miller, eds. *The ASAM Criteria: Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions*. 3rd ed. Carson City, NV: The Change Companies; 2013. Copyright 2013 by the American Society of Addiction Medicine.