



Recovery Services
Frequently Asked Questions
February 2016

The following answers to frequently asked questions intend to provide stakeholders with a better understanding about recovery services under the Drug Medi-Cal Organized Delivery System (DMC-ODS).

This document will be updated as necessary.

For Additional Information Regarding the DMC-ODS

- Visit <http://www.dhcs.ca.gov/provgovpart/Pages/Drug-Medi-Cal-Organized-Delivery-System.aspx>
- Contact us at DMCODSWAIVER@dhcs.ca.gov

What are recovery services?

Recovery services are important to beneficiaries in the recovery and wellness process. As part of the assessment and treatment needs of Dimension 6, Recovery Environment of the ASAM Criteria and during the transfer/transition planning process, beneficiaries will be linked to applicable recovery services.

Treatment is designed to emphasize the beneficiary's central role in managing their health, promote the use of effective self-management support strategies, and provide internal and community resources to support ongoing self-management.

What are the components of recovery services?

The components of recovery services include the following:

- **Outpatient counseling services** in the form of individual or group counseling to stabilize the beneficiary and reassess if further care is needed;
- **Recovery Monitoring**, including recovery coaching and monitoring via telephone/telehealth;
- **Substance Abuse Assistance**, including peer-to-peer services and relapse prevention;
- **Support for Education and Job Skills**, such as linkages to life skills, employment services, job training, and education services;

- **Family Support**, such as linkages to childcare, parent education, child development support services, and family/marriage education;
- **Support Groups**, including linkages to self-help and faith-based support; and,
- **Ancillary Services**, such as linkages to housing assistance, transportation, and case management.

Are recovery services a required benefit in counties that opt-in to the DMC-ODS?

Yes. Recovery services are required in all counties that opt-in to the DMC-ODS.

When can beneficiaries access recovery services?

Beneficiaries may access medically necessary recovery services after completing their course of treatment. Services are available to beneficiaries whether they are triggered, have relapsed, or as a preventative measure to prevent relapse.

How can recovery services be delivered to a beneficiary?

Recovery services can be provided to a beneficiary in the following ways:

- Face-to-face;
- By telephone;
- By telehealth; or,
- In the community – However, if recovery services are provided in the community, the provider delivering the service must be linked with a physical site/facility which is DMC certified.

Who can provide recovery services?

Services may be provided by a Licensed Practitioner of the Healing Arts (LHPA), Certified Counselor, or Peers (for substance abuse assistance).

Are services delivered by peers reimbursable?

Peer-to-peer services are eligible for reimbursement under the DMC-ODS pilot as a component of recovery services. All reimbursement requirements outlined above apply.

What are the certification requirements to offer recovery services?

A site / facility offering recovery services must be a certified DMC provider. However, this does not mean that services must be provided at the certified site / facility. Alternatively, services may be provided in the community.

What requirements must be met for recovery services to be eligible for reimbursement?

- The beneficiary is Medi-Cal eligible.
- The beneficiary resides in the pilot county.

- The beneficiary meets established medical necessity criteria. The initial medical necessity determination must be performed by a medical director, licensed physician, or Licensed Practitioner of the Healing Arts (LPHA).
- Services are delivered by a qualified provider and linked to a DMC-certified site / facility.