



## **Withdrawal Management (Detox) Services**

*Frequently Asked Questions*  
*February 2016*

The following answers to frequently asked questions intend to provide stakeholders with a better understanding about withdrawal management (detox) 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 Pilot Program:

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

### **1. What are withdrawal management (WM) services?**

WM services are provided as part of a continuum of five WM levels in the American Society of Addiction Medicine (ASAM) Criteria when determined medically necessary by a Medical Director or Licensed Practitioner of the Healing Arts (LPHA), and in accordance with an individualized client plan. Medically necessary habilitative and rehabilitative services are provided in accordance with the individualized treatment plan prescribed by a licensed physician or licensed prescriber, and approved and authorized according to the state of California requirements. Each beneficiary shall reside at the facility if receiving a residential service and will be monitored during the detoxification process. WM services delivered in a residential setting can be provided in facilities with no bed capacity limit in pilot counties only.

### **2. What are the components of WM services?**

The components of WM services include:

- **Intake:** The process of admitting a beneficiary into a substance use disorder (SUD) treatment program. Intake includes the evaluation or analysis of SUD, the diagnosis of SUD, the assessment of treatment needs, and may include a physical examination and laboratory testing necessary for SUD treatment.

- **Observation:** The process of monitoring the beneficiary's course of withdrawal as frequently as deemed appropriate for the beneficiary. This may include, but is not limited to, observation of the beneficiary's health status.
- **Medication Services:** The prescription or administration related to SUD treatment services, and/or the assessment of the side effects and results of that medication.
- **Discharge Services:** Preparing the beneficiary for referral into another level of care, post treatment return, re-entry into the community, and/or the linkage of the individual to community treatment, housing, and human services.

**3. Are counties participating in the DMC-ODS pilot program required to provide WM services?**

Yes. WM services are available to beneficiaries in pilot counties based on medical necessity. Pilot counties are required to provide at least one level of WM services. Pilot counties may offer additional levels.

The three levels of WM services that pilot counties may provide are:

- 1-WM: ambulatory withdrawal management without extended on-site monitoring
- 2-WM: ambulatory withdrawal management with extended on-site monitoring
- 3.2-WM: clinically managed residential withdrawal management

Additionally, counties are required to have a process for referring beneficiaries to higher levels of care (3.7-WM and 4-WM), such as those offered through general acute care, chemical dependency, and free-standing psychiatric hospitals, if determined to be medically necessary.

**4. What are the licensing and certification requirements for WM services?**

In order to provide withdrawal management / detoxification services for the DMC-ODS, providers must obtain the following licensing and certification requirements according to the level of service provided:

<b>ASAM Level</b>	<b>Description</b>	<b>Provider</b>	<b>Certification/License Required</b>
1 – WM Ambulatory Withdrawal Management without extended on-site monitoring	Mild withdrawal with daily or less than daily outpatient supervision.	DHCS Certified Outpatient Facility	<ul style="list-style-type: none"> <li>• AOD Certification with a non-residential detox service authorization</li> <li>• DMC Outpatient Certification</li> </ul>
2 – WM Ambulatory Withdrawal Management with extended on-site monitoring	Moderate withdrawal with all day withdrawal management and support and supervision; at night has supportive family or living situation.	DHCS Certified Outpatient Facility	<ul style="list-style-type: none"> <li>• AOD Certification with a non-residential detox service authorization</li> <li>• DMC Outpatient Certification</li> </ul>
3.2 – WM Residential/Inpatient Withdrawal Management	Moderate withdrawal, but needs 24-hour support to complete withdrawal management and increase likelihood of continuing treatment or recovery.	DHCS Licensed Residential Facility	<ul style="list-style-type: none"> <li>• DHCS Residential License with detox service authorization</li> <li>• DMC Residential Certification</li> </ul>
3.7 – WM Medically Monitored Inpatient Withdrawal Management	Severe withdrawal, needs 24-hour nursing care & physician visits; unlikely to complete withdrawal management without medical monitoring.	Chemical Dependency Recovery Hospital or Free Standing Psychiatric Hospital	<ul style="list-style-type: none"> <li>• Licensure by Department of Public Health</li> </ul>
4 – WM Medically Managed Intensive Inpatient Withdrawal Management	Severe, unstable withdrawal and needs 24-hour nursing care and daily physician visits to modify withdrawal management regimen and manage medical instability.	Chemical Dependency Recovery Hospital or Free Standing Psychiatric Hospital	<ul style="list-style-type: none"> <li>• Licensure by Department of Public Health</li> </ul>

**5. I am a new provider, and I want to become licensed / certified to provide WM services. What is the process?**

New providers may add WM services when submitting their provider application to the DHCS SUD Compliance Division. This request must include:

- A written request for WM license and/or certification.
- A program description that incorporates WM services.
- A written protocol that states the procedures for management of WM clients.
- A staffing plan, which includes WM-specific staff training for accurate evaluation, provision of services, and referrals. The plan must include a least one person in the residential facility at all times that is CPR and first aid certified.
- (Residential-only) A floor plan that clearly identifies the location of WM beds.

**6. I'm currently a licensed / certified provider, but I want to add WM services. What is the process?**

Existing Providers can amend their current license and/or certification by submitting the following to DHCS:

- A written request to amend current license and/or certification.
- A revised program description that incorporates WM services.
- A written protocol that states the procedures for management of WM clients.
- A revised staffing plan, which includes WM-specific staff training for accurate evaluation, provision of services, and referrals. The plan must include a least one person in the residential facility at all times that is CPR and first aid certified.
- (Residential-only) A floor plan that clearly identifies the location of WM beds.

Once the application is deemed complete and approved, DHCS staff will conduct an on-site visit.