

Frequently Asked Questions

The ASAM Criteria 4th Edition Optum Behavioral Health Implementation for Commercial plans

Overall Implementation

Why is Optum Behavioral Health transitioning to the 4th Edition criteria?

With the release of <u>ASAM's 4th Edition criteria</u> for treating adults with substance use disorders, Optum Behavioral Health must transition to the updated criteria to ensure we are aligned with national standards of care for members covered by a Commercial health plan.

The criteria provide national standards for conducting a comprehensive, multi-dimensional patient assessment and for determining the appropriate level of care for adult patients with addiction and co-occurring conditions. The criteria are evidence-based, outcome-oriented and focus on results-based care across the continuum of care – placement, continued stay, transfer or discharge.

We use the criteria to outline provider roles, responsibilities and requirements for treating patients. The parameters help ensure members receive the treatment that best fits their needs and that resources are used wisely.

Why are Medicaid plans delaying the implementation of the 4th Edition criteria until 2025 or later? Each state sets its own priorities, timelines and licensing requirements, based on all of the initiatives it is working on. We're monitoring state discussions and implementation decisions and will share information as it is available.

Does this implementation apply to Medicare plans?

No. The transition to the 4th Edition criteria only applies to Commercial health plans. Optum Behavioral Health follows CMS guidelines for assessing and treating Medicare members who have substance use disorders.

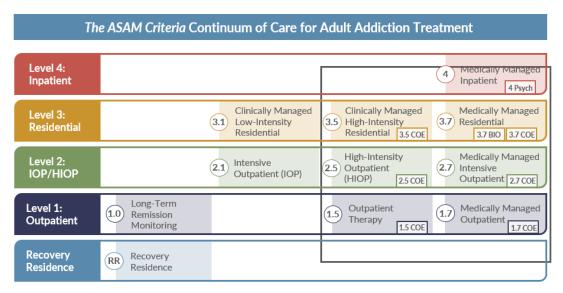
Treatment Guidelines

Why is 3.7WM being eliminated from the care continuum?

ASAM integrated withdrawal management services into the main continuum of care to support ongoing engagement in substance use disorder (SUD) treatment and continuity of care. The services that were outlined by Level 3.7WM are now incorporated into Level 3.7 – medically managed residential treatment, and the services provided by Level 4WM are now provided by Level 4 – inpatient medically managed care in an acute care hospital. These changes support a simplified continuum that is capable of providing more integrated care for biomedical and psychiatric comorbidities.

What are the most significant 4th edition changes I should be aware of?

From the 3rd edition to the 4th edition, ASAM made several significant changes to the continuum of care for treating adults with substance use disorders, These changes are specific for members covered by a Commercial health plan.



Withdrawal management

- **Level 1:** The 3rd Edition included office-based medical care, outpatient therapy and a separate Level 1WM for outpatient withdrawal management. The 4th Edition separately defines:
 - Level 1.5 (outpatient therapy) and
 - Level 1.7 (outpatient medically managed care for withdrawal as well as biomedical and psychiatric comorbidities).
- Level 2 WM: This has been incorporated withing the new Level 2.7 (Medically Managed Intensive Outpatient). This level of care provides intensive medically managed care for withdrawal as well as biomedical and psychiatric comorbidities.
 - Level 2.5: Has been renamed High Intensity Outpatient and the medical component has been incorporated within Level 2.7 (Medically Managed Intensive Outpatient).
- Level 3.1 (Clinically Managed Low-Intensity Residential): This level is now expected to provide 9-19 hours of clinical services per week within a structured residential setting.
- **Level 3.2WM:** The services provided by Level 3.2WM (Clinically Monitored Withdrawal) in the 3rd Edition have been eliminated from the 4th Edition criteria.
- **Level 3.7WM:** The services that were outlined by Level 3.7WM have been incorporated into Level 3.7 (Medically Managed Residential) Treatment
- Level 4WM: The services provided by Level 4WM are now outlined in Level 4 overall (Medically Managed Inpatient)..
 - Because this level of care should only be rendered in a hospital, Level 4 will be contracted only in acute care general hospitals. Freestanding specialty hospitals, non-acute hospitals and residential settings will no longer be contracted to provide ASAM Level 4 services.
 - With the 3.7WM and 4WM changes, ASAM has integrated withdrawal management services into the main continuum of care. This supports ongoing engagement in substance use disorder (SUD) treatment and continuity of care.
 - These changes also support a simplified continuum that is capable of providing more integrated care for biomedical and psychiatric comorbidities.

In summary, withdrawal management services should occur in Levels 1.7, 2.7, 3.7 and 4, depending on the patient's acuity need.

Residential treatment

- **Level 3.1**: This level of care (Clinically Managed Low-Intensity Residential) will now be covered by Commercial health plans; it has not been covered previously.
 - Level 3.3: This level of care (Clinically Managed Population-Specific High-Intensity Residential)
 has been incorporated into Level 3.5. The remainder of Level 3.5 is unchanged.
- Level 3.7: Medically Managed Residential is a residential level of treatment. The expectation is that other acute bio services will be delivered in this setting. Facilities will need to have a state license to provide services at this level of care. This change may affect non-acute hospitals the most. We encourage hospitals to review licensing requirements in your state and follow any necessary steps to obtain a residential license, as needed.

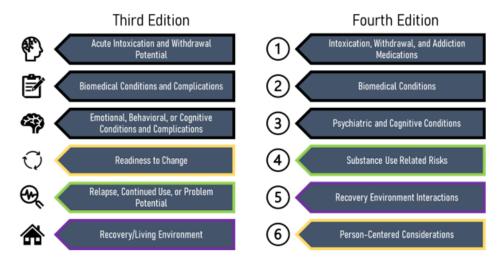
What hasn't changed from the 3rd Edition to the 4th Edition?

Several areas of the criteria are the same or have only had minor adjustments in the 4th Edition:

- Levels 2.1 (Intensive Outpatient) and 3.5 (Clinically Managed High-Intensity Residential) have not changed
- Level 4 (Medically Managed Inpatient) There is no change in requirements or process for acute care hospital settings to meet the bio and psychiatric needs of patients with addiction disorders

The six dimensions seem to have changed too?

The goal of the dimensional admission criteria is to recommend the least restrictive, least intensive level of care at which the patient can be safely and effectively treated. The 4th edition Dimensional Admission Criteria were designed and adjusted to streamline level of care and treatment plan decision-making:



Key Changes

- Readiness to change is no longer an individual dimension it should be considered across all dimensions and levels of care.
- Risk ratings have been integrated into the dimensions to help determine the recommended level of care.
- To support clinical decision making:
 - The dimensions have been reordered so that Dimensions 1-5 cover level of care considerations
 - Levels 4 and 5 have switched places
 - A new Dimension 6 Person-Centered Considerations has been added to focus on patient preferences, barriers to care and need the for motivational enhancement.

If we are currently treating an adolescent, what happens when the patient reaches age 18?

There are many factors that determine and influence treatment for adolescents, such as their benefit plan, their treatment plan and where they are receiving treatment. (Note: In-patient adolescent units vary in age limits). In most cases, the patient continues the current treatment through completion (step-down/discharge).

Contracting

Do I have to change?

Yes. To ensure members receive the treatment that best fits their needs, and to align with national standards of care, Optum Behavioral Health must transition to the 4th Edition criteria. They reflect the most up-to-date, evidence-based, outcome-oriented and results-based standards across the continuum of care. As a result of this, we will be working with you to make these changes as well.

When will my facility be contacted to update our contract with Optum Behavioral Health?

We are working in phases, focusing first on large facilities and agencies that provide services to a large number of our members. As new providers join the network, those contracts will also reflect the updated criteria. If you have questions about specific timing, contact your Network Management representative.

Will reimbursement rates be affected with this change?

The ASAM Criteria are used to determine appropriate level of care and outline requirements, responsibilities and roles for treating patients. They are not used to determine reimbursement amounts.

However, ASAM has adjusted some of the subdimensions, which in turn means some specific services and treatments have been moved to another level of care. We encourage you to review your participation agreement against the levels of care. You can consider adding additional levels of care to your contract, if needed. The first step is to submit an application for our network team to review. Go to Providerexpress.com > Our Network > Select application type.

How can I request to add additional levels of care to my contract?

The first step is to submit an application for our network team to review. Go to <u>Providerexpress.com</u> > Our Network > Select application type.

You can also reach out to the Network Management contract representative <u>for your state</u> for further information. If you're not able to reach them, you can call the Provider Service Line at 1-877-614-0484.

If my contract hasn't change to the 4th Edition, am I still expected to follow those guidelines? No. The 4th Edition changes are not effective until your contract has been updated. Until you have a fully executed, updated contract, you should continue to follow 3rd Edition guidelines.

What if I treat adults and adolescents?

ASAM has focused the 4th Edition criteria on adults only. Treatment for adolescents will continue to follow the 3rd Edition criteria. ASAM will release an individual volume for adolescents over the next 2 years.

We recognize it's going to be challenging to manage the many administrative aspects against 2 different sets of criteria. Your systems will need to be updated and billing processes may need to change to ensure accuracy. We will work with you through these changes to help reduce potential abrasion and confusion.

Can I use CARF certification to meet credentialing and contracting requirements?

Yes. ASAM level of care certification by CARF demonstrates a provider's capacity to deliver one or more residential ASAM levels of care, consistent with *The ASAM Criteria*. Certification is available for adult levels of care 3.1, 3.5 and 3.7.We recommend providers complete CARF certification to better understand the differences in the 3 levels of care. However, it is not a credentialing and contracting requirement.