

OUTPATIENT PROGRAMS

Primary mechanism by which to access supplemental Recovery Residence funds



RECOVERY RESIDENCES (RR)

Program's tracking of supplemental funding to include adherence to maximum daily allocations, as well as total spending of cost center/line item

Program's written policy and procedure(s) (P&P) outlines coordination of care, RR payment (no direct payment to clients) & management of RR budget allocation

Program's written P&P to guide RR selection. Programs may utilize BHS RR oversight contract (CHIP RRA)

Program's reimbursement is based on a client's actual use of RR bed; no reimbursements for unused RR bed days

Program may not use RR that provides treatment services

Utilization of RRs should be prioritized for clients who are homeless and for whom all other short-term or permanent housing options have been explored and are unavailable.

Inform COR when using other types of immediate short-term/time limited housing (e.g., motel)

Client maximum length of stay in RR is 24-months

Enter RR data into SanWITS and submit corresponding Excel file with monthly invoice

RESIDENTIAL PROGRAMS



Every effort should be made to connect clients to an Outpatient Program to access Recovery Residence funds

To obtain Recovery Residence through the Residential Program:

- * Client does not meet ASAM criteria for Residential or Outpatient Services OR
 - * Client meets Outpatient service criteria but declines
- If either conditions are met, RR funds shall be for direct payments to RR facilities, and alternatives such as hotels, motels, etc. RR funds may not be used for Program costs such as salaries & benefits, operating expenses, and/or indirect costs.

- ✓ Client must be actively receiving Recovery Services at minimum **weekly**
- ✓ Client must be informed of expanded Recovery Residence benefits through Outpatient Programs
- ✓ Client must have a specific housing need documented on the Problem List or Recovery Plan.
- ✓ County funds a maximum of \$50/day
- Client must contribute a minimum of 30% of net (take home) monthly income, including state/federal benefits
- ✓ Contract allocation: Line item within primary cost center and funding
- ✓ Contractor to have a tracking mechanism for RR utilization
- ✓ Contractor to refer to & align with SUDPOH

- ✓ Client must be actively receiving Outpatient Treatment / Intensive Outpatient or Recovery Services under BHS SUD contract, at **minimum weekly**.
- ✓ Client must have a specific housing need documented on the Problem List or Recovery Plan.
- ✓ County funds a maximum of \$50/day
- ✓ Client must contribute a minimum of 30% of net (take home) monthly income, including state/federal benefits
- ✓ Contract allocation: Separate RR cost center with dedicated funding
- ✓ RR cost center funding shall be allocated exclusively to the RR cost center for direct payments to RR facilities, and alternatives such as hotels, motels, etc.
- ✓ RR cost center funding may not be used for Program costs such as salaries & benefits, operating expenses, and/or indirect costs. A separate cost center, RR Indirect, will be created to reflect these costs.
- ✓ Contractor to have a tracking mechanism for RR utilization
- ✓ Contractor to refer to & align with SUDPOH

This document is a training tool and is subject to change. Please refer to SUDPOH for current processes, rates, and expanded details.

Version 13 (12.10.23)



DMC-ODS
Recovery Residences