

Medical Necessity Criteria

24-Hour Diversionary Services Enhanced Acute Treatment (E-ATS)

Enhanced Acute Treatment (E-ATS) for individuals with co-occurring mental health disorders provides diversionary and/or step-down opportunities for Members who require substance detoxification services through a planned program of 24-hour, medically monitored evaluation, care, and treatment and whose co-occurring mental health disorder requires a 24-hour, medically monitored evaluation, care, and treatment program, including the prescribing and dosing of medications typically used for the treatment of mental health disorders. E-ATS services for individuals with co-occurring addiction and mental health disorders are typically rendered in a licensed acute care or community-based setting (e.g., licensed freestanding or hospital-based programs, or a licensed detoxification program) with 24-hour physician and psychiatrist consultation availability, 24-hour nursing care and observation, counseling staff trained in addiction and mental health treatment, and overall monitoring of medical care. Services are typically provided under a defined set of physician-approved policies, procedures, or clinical protocols.

Unless contraindicated, the family, guardian, and/or natural supports are actively involved in the treatment as required by the treatment plan, or there are active efforts being made and documented to involve them.

Criteria

Admission Criteria

All of the following criteria must be met:

1. The Member has a DSM-5-TR or corresponding ICD substance use disorder diagnosis, which requires and is expected to respond to intensive, structured treatment intervention.
2. The Member agrees to voluntary admission and is able to appropriately participate in safety planning.
3. The Member's psychiatric condition does not require 24-hour medical/psychiatric and nursing services.
4. The Member may require medically monitored ATS detoxification services.
5. The Member requires 24-hour supervision in milieu setting to address the following:
 - a. Access to nursing and medical monitoring
 - b. Environmental interference with recovery efforts
 - c. Severity of addiction
 - d. Need for relapse prevention skills

Psychosocial, Occupational, and Cultural and Linguistic Factors

These factors may change the risk assessment and should be considered when making level-of-care decisions.

Continued Stay Criteria

All of the following criteria are necessary for continuing treatment at this level of care:

1. The Member's condition continues to meet admission criteria at this level of care.
2. Another less-restrictive level of care would not be adequate to provide needed containment and administer care.
3. The Member is experiencing symptoms of such intensity that if discharged, they would likely be

readmitted.

4. Treatment is still necessary to reduce symptoms and improve functioning so the Member may be treated in a less-restrictive level of care.
5. There is evidence of progress towards the resolution of the symptoms causing a barrier to treatment continuing in a less-restrictive level of care.
6. Medication assessment has been completed, when appropriate, and medication trials have been initiated or ruled out.
7. The family/guardian is participating in treatment as clinically indicated and appropriate.
8. Coordination of care and active discharge planning are ongoing, with the goal of transitioning the Member to a less-intensive level of care.

Discharge Criteria

One of the following must be met;

1. The Member no longer meets admission criteria and/or meets criteria for another level of care, either more- or less-intensive.
2. The Member withdraws consent for treatment and does not meet criteria for involuntary/mandated treatment.
3. The Member does not appear to be participating in a treatment plan; or treatment goals have been met.