ASAM 3.5 and 3.7 Utilization Review Parameters

This Bulletin is to inform Providers of the utilization review parameters for ASAM 3.5 and 3.7 levels of care.

Beginning July 1, 2022, the Pennsylvania Department of Drug and Alcohol Programs (DDAP) will no longer make a distinction between short-term and long-term drug and alcohol rehabilitation via license, Provider type, and specialty. CBH will collapse levels of care 200-02 Non-Hospital D&A Short Term Rehab and 200-07 Non-Hospital D&A Long Term Rehab to one new level of care, 200-28 ASAM 3.5 Clinically Managed High-Intensity Residential Services, effective July 1, 2022.

If a Member is admitted to either 200-02 Non-Hospital D&A Short Term Rehab or 200-07 Non-Hospital D&A Long Term Rehab prior to July 1, 2022, and remains in treatment as of June 30, 2022, all prior authorizations under previous level of care codes will be terminated and transitioned to the new level of care code, 200-28. The number of days authorized from the prior utilization review will remain.

The authorization parameters for ASAM 3.5 described below will be effective on July 1, 2022. For additional information, please see Provider Bulletin 22-11.

DDAP has already designated Providers to offer ASAM 3.7 level of care, which is now assigned as CBH level of care 200-27 Non-Hospital Medically Monitored Intensive Inpatient Residential Services. The authorization parameters for ASAM 3.7 described below will be effective on July 1, 2022.

**ASAM 3.5**

› No prior authorization required

› Providers admitting CBH Members to 3.5 should notify the CBH Psychiatric Emergency Services (PES) line (215-413-7171) at the time of the admission to obtain an initial authorization.

› Current diagnosis is required when contacting PES for the initial authorization.

› Initial authorization of 30 days

› Concurrent authorization of 30 days if the Member continues to meet ASAM criteria for 3.5 level of care.
ASAM 3.5 and 3.7 Utilization Review Parameters

CBH Clinical Care Manager (CCM) will review with a CBH Physician Advisor if the Member remains in treatment for 60 days (or sooner, if clinically indicated during the completion of the initial utilization review).

**ASAM 3.7**

- Prior authorization is required
  - Providers should contact the PES line to complete the prior authorization utilizing ASAM criteria.
  - If approved, initial authorization of 20 days
- Concurrent authorization of 15 days if the Member continues to meet ASAM criteria for 3.7 level of care
- CCM will review with a CBH Physician Advisor if the Member remains in treatment for 45 days (or sooner, if clinically indicated during the completion of the initial utilization review).

Please submit questions about this Bulletin to Joseph Ume, Clinical Director of Adult Services, at Joseph.Ume@phila.gov.