



State of California—Health and Human Services Agency
Department of Health Care Services



GAVIN NEWSOM
GOVERNOR

DATE: May 14, 2021

Behavioral Health Information Notice No: 21-020
Supersedes: Behavioral Health Information Notice No.: [17-034](#)

TO: California Alliance of Child and Family Services
California Association for Alcohol/Drug Educators
California Association of Alcohol & Drug Program Executives, Inc.
California Association of DUI Treatment Programs
California Association of Social Rehabilitation Agencies
California Consortium of Addiction Programs and Professionals
California Council of Community Behavioral Health Agencies
California Hospital Association
California Opioid Maintenance Providers
California State Association of Counties
Coalition of Alcohol and Drug Associations
County Behavioral Health Directors
County Behavioral Health Directors Association of California
County Drug & Alcohol Administrators

SUBJECT: Drug Medi-Cal Organized Delivery System – Clarification on Recovery Services

PURPOSE: To provide clarification on recovery services as part of California's Advancing and Innovating Medi-Cal (CalAIM)

BACKGROUND:

The Department of Health Care Services (DHCS) received approval on August 13, 2015, from the Centers for Medicare & Medicaid Services (CMS) to implement the Drug Medi-Cal Organized Delivery System (DMC-ODS) Waiver. Authority for the DMC-ODS waiver was reauthorized as part of the state's Medi-Cal 2020 1115 waiver for a five-year term from January 2016 to December 2020. Prior to the expiration date, DHCS received a one-year waiver extension on December 29, 2020, that extends DMC-ODS through December 31, 2021.

CMS has approved several policy changes/clarifications in key areas effective retroactively to January 1, 2021, and continuing through the duration of the extension

period. These changes and clarifications are specified in amendments to the special terms and conditions of the waiver. DHCS is currently preparing a new waiver request that, if approved by CMS, would authorize the DMC-ODS through December 2026.

This information notice clarifies the policy related to recovery services.

Recovery services, as identified in the American Society for Addiction Medicine (ASAM) Criteria, are made available to beneficiaries during or after substance use disorder (SUD) treatment. The recovery community becomes a therapeutic agent through which beneficiaries are empowered and prepared to manage their health and health care. Therefore, treatment must emphasize the client's central role in managing their health, use effective self-management support strategies, and organize internal and community resources to provide ongoing self-management support to beneficiaries.

POLICY:

As part of CalAIM, DHCS is clarifying (1) the allowable components of recovery services, described below; (2) when and how beneficiaries, including justice-involved individuals, may access recovery services; and (3) the availability of recovery services to individuals receiving Medication-Assisted Treatment (MAT). Recovery services may be delivered concurrently with other DMC-ODS services and levels of care as clinically appropriate. Beneficiaries without a remission diagnosis may also receive recovery services and do not need to be abstinent from drugs for any specified period of time.

The service components of recovery services are:

- Individual and/or group outpatient counseling services;
- Recovery Monitoring: Recovery coaching and monitoring delivered in-person, by synchronous telehealth, or by telephone/audio-only;
- Relapse Prevention: Relapse prevention, including attendance in alumni groups and recovery focused events/activities;
- Education and Job Skills: Linkages to life skill services and supports, employment services, job training, and education services;
- Family Support: Linkages to childcare, parent education, child development support services, family/marriage education;
- Support Groups: Linkages to self-help and support services, spiritual and faith-based support;
- Ancillary Services: Linkages to housing assistance, transportation, case management, and other individual services coordination.

Beneficiaries may receive recovery services based on a self-assessment or provider assessment of relapse risk. Beneficiaries receiving MAT, including Narcotic (Opioid)

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Treatment Program services, may receive recovery services. Beneficiaries may receive recovery services immediately after incarceration regardless of whether or not they received SUD treatment during incarceration. Recovery services may be provided in-person, by synchronous telehealth, or by telephone/audio-only. Recovery services may be provided in the home or the community.

These clarifications aim to address inconsistency in interpretation of the recovery services benefit.

These changes are effective as of January 1, 2021. DHCS shall amend the state-county DMC-ODS intergovernmental agreement accordingly.

If you have questions, please contact countysupport@dhcs.ca.gov.

Sincerely,

Original signed by

Shaina Zurlin, PsyD, LCSW, Chief
Medi-Cal Behavioral Health Division