

## **REGIONAL AUTHORIZATION MATRIX**

## Revised July 2021

The column to the far right (Regional) is the standard regional authorization process agreed upon by all member CMHSPs.

	Allegan	N180	West Michigan	Health West	Ottawa	Regional
ОР	6-month auth. with no limit on sessions	6-month auth. with no limit on sessions	6-month auth. with no limit on sessions	6-month initial auth, capped at 20. Reauthorization up to 20 sessions. Current limit of 40 sessions per year unless more treatment is clinically appropriate	6-month auth capped at 20 sessions	6-month authorization with no limit on sessions
IOP	Re-auth. after 25 sessions based on Medical Necessity 25 in treatment episode; each plan is based on unique needs of the individual.	Re-auth. after 25 sessions 25 in treatment episode; each plan is based on unique needs of the individual.	This service is not available in our area.	6-month initial auth for 21 sessions. Will approve additional if medically necessary.	6-month auth capped at 21 IOP group sessions. Minimal individual and case management can be authorized with justification	Re-authorization after 25 sessions based on Medical Necessity. 25 in treatment episode; each plan is based on unique needs of the individual.

	Allegan	N180	West Michigan	Health West	Ottawa	Regional
MAT (Methadone)	Up to 90-day initial auth. If client doing well auth. is moved to 180 days. If client is using other drugs 90 auth. is made	Up to 90-day initial auth. If client doing well auth. is moved to 180 days. If client is using other drugs 90 auth. is made	Up to 90-day initial auth. If client doing well auth. is moved to 180 days. If client is using other drugs 90 auth. is made	Up to 90-day initial auth. If client doing well auth. is moved to 180 days. If client is using other drugs 90 auth. is made	Up to 90-day initial auth. If client doing well auth. is moved to 120 days. Weekly drug screens. Weekly to bi-weekly individual therapy. Outpatient group if needed. E&M monthly (or more frequent if medically necessary for stabilization)	Up to 90-day initial authorization. If client doing well authorization is moved to 180 days. If client is using other drugs 90-day authorization is made (CMHSP's have an option to do this).
MAT (Suboxone)	Individual/Group Therapy minimally once weekly. Weekly physician visit until stable.	Individual/Group Therapy minimally once weekly. Weekly physician visit until stable.	Individual/Group Therapy minimally once weekly. Weekly physician visit until stable	Individual/Group Therapy minimally once weekly. Weekly physician visit until stable.	Up to 90-day initial auth. If client doing well auth. is moved to 120 days. Weekly drug screens. Weekly to bi-weekly individual therapy. Outpatient group if needed. E&M monthly (or more frequent if medically necessary for stabilization	Individual/Group Therapy minimally once weekly. Weekly physician visit until stable.
MAT (Vivitrol)	Individual/Group Therapy minimally once weekly. Monthly physician visit until stable.	Individual/Group Therapy minimally once weekly. Monthly physician visit until stable.	Individual/Group Therapy minimally once weekly. Monthly physician visit until stable.	Individual/Group Therapy minimally once weekly. Monthly physician visit until stable.	Standard outpatient or IOP authorization. Monthly medication administration. No payment for the injection itself.	Individual/Group Therapy minimally once weekly. Monthly physician visit until stable.

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Detox	3 days for alcohol, 2 days for Opiates with a transfer to MAT at SSC, 5 days for benzos or opiates with no MAT. Reauth. 1 day based on continued medical symptoms.	3 days for alcohol, 2 days for Opiates with a transfer to MAT at SSC, 5 days for benzos or opiates with no MAT. Re- auth. 1 day based on continued medical symptoms.	3 days for alcohol, 2 days for Opiates with a transfer to MAT at SSC, 5 days for benzos or opiates with no MAT. Re-authorization. 1 day based on continued medical symptoms.	3 days for alcohol, 5 days for opiates benzos. 2-5 days dependent on severity. Must include MAT initiation and coordination to community-based MAT provider. Additional days approved if medically necessary. Cocaine/meth no detox, just short-term res	For alcohol initial 3 days, reauthorization as needed; for opiates and benzos, initial 5 days, reauthorization as needed	3 days for alcohol, 2 days for Opiates with a transfer to MAT at SSC, 5 days for benzos or opiates with no MAT. Re- authorization 1 day based on continued medical symptoms.
Long Term Residential	Up to 22 days for LTR with re- auth. as clinically appropriate (up to 90 days maximum). Can be reviewed sooner if UM desires.	Up to 22 days for LTR with re-auth. as clinically appropriate (up to 90 days maximum). Can be reviewed sooner if UM desires.	Up to 22 days for LTR with re-auth. as clinically appropriate (up to 90 days maximum). Can be reviewed sooner if UM desires.	22 days for LTR with re-authorization as clinically appropriate (up to 90 days maximum)	22 days for LTR with re-authorization as clinically appropriate (up to 90 days maximum)	Up to 22 days for LTR with re-authorization as clinically appropriate (up to 90 days maximum). Can be reviewed sooner if UM desires.
Intensive Stabilization/Short Term Residential	Initial authorization of 7 days, with a reauthorization of 3 to 4 days based on progress/needs, not exceeding a total of 14 days.	Initial authorization of 7 days, with a reauthorization of 3 to 4 days based on progress/needs, not exceeding a total of 14 days.	7 days short-term residential; will approve additional days if clinically appropriate.	7 days short-term residential; will approve additional days if clinically appropriate.	7 days short-term residential; will approve additional days if clinically appropriate. Max of 14 days.	Initial authorization of 7 days, with a reauthorization of 3 to 4 days based on progress/needs, not exceeding a total of 14 days.

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Recovery Management	Minimum 2 – 4 times/week	Minimum 2 – 4 times/week	Minimum 2 – 4 times/week	No limit on units- 6mon to 1-year auth 1/12 payments	Not yet implemented	Minimum 2 – 4 times/week
Family Engagement	6-month authorization. 26 hours of therapy, case management, and peer services. ASAM needs to indicate higher need than outpatient LOC. Services can be concurrent to other treatment services with no duplication	6-month authorization. 26 hours of therapy, case management, and peer services. ASAM needs to indicate higher need than outpatient LOC. Services can be concurrent to other treatment services with no duplication	N/A	Same as above	6-month authorization. 26 hours of therapy, case management, and peer services. ASAM needs to indicate higher need than outpatient LOC. Services can be concurrent to other treatment services with no duplication.	6-month authorization. 26 hours of therapy, case management, and peer services. ASAM needs to indicate higher need than outpatient LOC. Services can be concurrent to other treatment services with no duplication
Women Case Management	6 months to 1- year Auth	Year Auth	N/A	120 units for 6-month auth	N/A	6 months to 1-year authorization
Recovery Residence	Authorizations are given for 30- day increments for a maximum of 60 days. Additional 30 days with justification.	Initial authorization of 30 days. Additional 30 days with justification.	30 days initial auth with maximum of 60 days. Additional need up to 90 days considered on a case-by-case basis as clinically warranted	One month at a time, will also cover food money until food stamps kick in. 3 months max with some exceptions now and then.	Initial authorization of 30 days. Additional 30 days with justification. Can authorize 1 hour weekly of Recovery Coach.	Authorizations are given for 30-day increments for a maximum of 60 days. Additional 30 days with justification.