

5101:3-30-02

**Coverage and limitation policies for alcohol and drug addiction treatment services.**

(A) The following identifies alcohol and drug addiction treatment services that may be covered by medicaid and the limitation policies applicable to these services.

- (1) "Assessment services" are those services defined in paragraph (K) of rule 3793:2-1-08 of the Administrative Code and provided by an alcohol and other drug treatment program certified in accordance with Chapters 3793:2-1 and 3793:2-2 or 3793:2-5 of the Administrative Code. This service must be provided by one of the following as defined in paragraph (AA) to (OO) or paragraph (QQ) of rule 3793:2-1-08 of the Administrative Code.
- (2) "Crisis intervention services" are those services defined in paragraph (L) of rule 3793:2-1-09 3793:2-1-08 of the Administrative Code and provided by an alcohol and other drug treatment program certified in accordance with Chapters 3793:2-1 and 3793:2-2 or 3793:2-5 of the Administrative Code. This service must be provided by one of the following as defined in paragraph (AA) to (OO) or paragraph (QQ) of rule 3793:2-1-08 of the Administrative Code.
- (3) "Individual counseling services" and "group counseling services" are those services defined in paragraphs (N) and (O) of rule 3793:2-1-11 3793:2-1-08 of the Administrative Code and provided by an alcohol and other drug treatment program certified in accordance with Chapters 3793:2-1 and 3793:2-2 and 3793:2-5 of the Administrative Code. This service must be provided by one of the following as defined in paragraph (AA) to (OO) or paragraph (QQ) of rule 3793:2-1-08 of the Administrative Code.
- (4) "Medical somatic services" are those services defined in paragraph (S) rule 3793:2-1-13 3793:2-1-08 of the Administrative Code and provided by an alcohol and other drug treatment program certified in accordance with Chapters 3793:2-1 and 3793:2-2 or 3793:2-5 of the Administrative Code. This service must be provided by one of the following as defined in paragraph (AA) or (JJ) or (KK) or (RR) of rule 3792:2-1-08 of the Administrative Code and supervised in accordance with paragraph (SS) of rule 3793:2-1-08 of the Administrative Code.
- (5) ~~"Drug screening/urinalysis services" are those services~~ "Laboratory urinalysis" is the service defined in paragraph (R)(1) of rule 3793:2-1-14 3793:2-1-08 of the Administrative Code and provided by an alcohol and other drug treatment program certified in accordance with Chapters 3793:2-1 and 3793:2-2 or 3793:2-5 of the Administrative Code. Notwithstanding the provisions found in Chapters 3793:2-1 and 3793:2-2 of the Administrative Code, a physician must order the drug screening/urinalysis for medicaid to cover the service. A

physician's order must be on file for and specific to each individual client in order for the laboratory urinalysis service to be covered by medicaid. There does not need to be a written order each time the laboratory urinalysis is to be provided, but rather a client specific standing order is acceptable. This service must be provided by one of the following as defined in paragraph (AA) to (OO) or paragraph (QQ) of rule 3793:2-1-08 of the Administrative Code.

- (6) "Methadone administration services" are those services defined in paragraph (T) of rule 3793:2-1-15 3793:2-1-08 of the Administrative Code and provided by an alcohol and other drug treatment program in accordance with Chapters 3793:2-1 and 3793:2-2 of the Administrative Code and licensed in accordance with Chapter 3793:2-3 of the Administrative Code. This service must be provided by one of the following as defined in paragraph (AA) or (JJ) or (KK) or (RR) of rule 3793:2-1-08 of the Administrative Code.
- (7) "Case management services" are those services defined in paragraph (M) of rule 3793:2-1-16 3793:2-1-08 of the Administrative Code and provided by an alcohol and other drug treatment program certified in accordance with Chapters 3793:2-1 and 3793:2-2 or 3793:2-5 of the Administrative Code. This service must be provided by one of the following as defined in paragraph (AA) to (OO) or paragraph (QQ) of rule 3793:2-1-08 of the Administrative Code.
- (8) "Intensive outpatient services" are those services defined in paragraph (O) of rule 3793:2-1-17 3793:2-1-08 of the Administrative Code and provided by an alcohol and other drug treatment program certified in accordance with Chapters 3793:2-1 and 3793:2-2 or 3793:2-5 of the Administrative Code. This service must be provided by one of the following as defined in paragraph (AA) to (OO) or paragraph (QQ) of rule 3793:2-1-08 of the Administrative Code.
- (9) "Ambulatory medical" or "social detoxification services" "Ambulatory detoxification services" are those services defined in paragraph ~~(F)~~(X) of rule 3793:2-1-10 3793:2-1-08 of the Administrative Code and provided by an alcohol and other drug treatment program certified in accordance with Chapters 3793:2-1 and 3793:2-2 or 3793:2-5 of the Administrative Code. This service must be provided by one of the following as defined in paragraph (AA) or (JJ) or (KK) of rule 3793:2-1-08 of the Administrative Code.

(B) Services meeting the requirements identified in paragraphs (A)(1) to (A)(9) of this rule are covered when recommended by an individual who has one of the following

credentials:

- (1) Certified chemical dependency counselor three E;
- (2) Licensed physician;
- (3) Licensed psychologist;
- (4) Licensed professional clinical counselor with a declared scope of practice of alcohol and drug addiction counseling;
- (5) Licensed professional counselor with a declared scope of practice of alcohol and drug addiction counseling;
- (6) Licensed independent social worker with a declared scope of practice of alcohol and drug addiction counseling; or
- (7) Registered nurse with a declared scope of practice of alcohol and drug addiction nursing.

(C) Individuals under age sixty-five who are patients in an institution for mental diseases, unless they are under age twenty-two and receiving inpatient psychiatric services under the medicaid program , are not eligible to receive services defined in this rule. An individual on conditional release or convalescent leave from an institution for mental disease is not considered to be a patient in that institution. However, such an individual who is under age twenty-two and has been receiving inpatient psychiatric services under the medicaid program is considered to be a patient in the institution until he is unconditionally released or, if earlier, the date he reaches age twenty-two.

Effective:

R.C. 119.032 review dates: 04/16/2002

WITHDRAWN ELECTRONICALLY

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Certification

02/14/2005

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Date

Promulgated Under: 119.03  
Statutory Authority: 5111.02  
Rule Amplifies: 3793.06, 3793.11, 5111.01 and 5111.02  
Prior Effective Dates: 7/1/91 (Emer.), 9/30/91