

The Vermont Department of Health (VDH) Division of Substance Use Programs (DSU) is working towards establishing clinically managed residential withdrawal management programming as a Medicaid reimbursable benefit to enhance access and quality of services for people with substance use disorder (SUD).

Objectives

The objectives are to:

1. **Increase the number and enhance accessibility** of clinically managed residential withdrawal management programs (certified and funded by the Health Department) to be reimbursed through Medicaid. This will enable statewide access to clinically managed residential withdrawal management programs integrated into the larger SUD system of care while maintaining fiscal responsibility and clinical quality.
2. **Provide long-term, sustainable funding** for clinically managed residential withdrawal management programs through Medicaid reimbursement for Vermonters covered by Medicaid.

Background

According to the American Society of Addiction Medicine (ASAM), withdrawal management refers to the medical and psychological care of patients who are experiencing withdrawal symptoms as a result of ceasing or reducing their substance use. Withdrawal management support is available in all levels of care and may also occur in medical and non-clinical settings such as a doctor's office or while a person is receiving recovery or other social services.

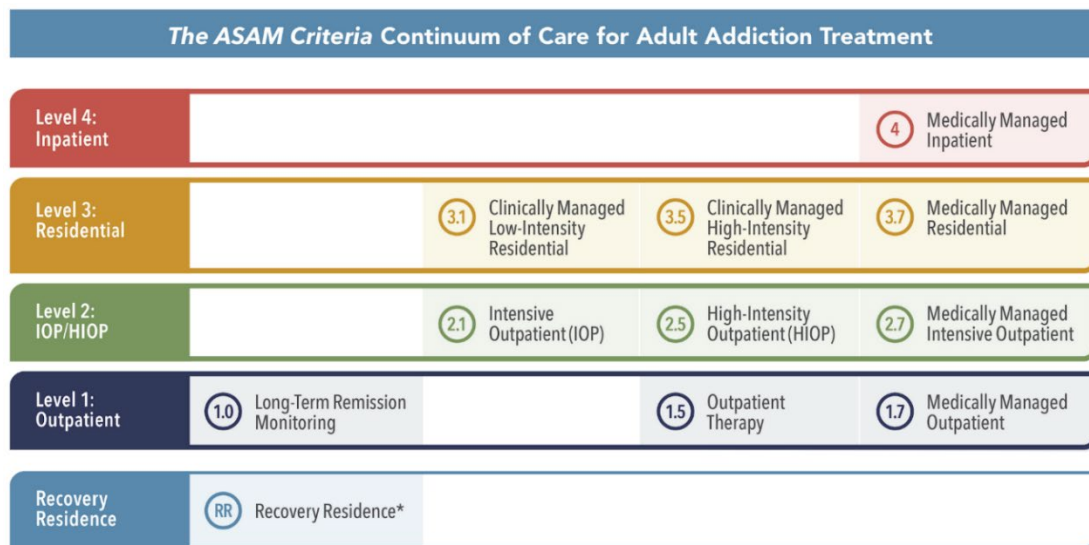


Table Source: Waller RC, Boyle MP, Daviss SR, et al, eds. The ASAM Criteria: Treatment Criteria for Addictive, Substance-Related, and Co-occurring Conditions, Volume 1: Adults. 4th ed. Hazelden Publishing; 2023. <https://www.asam.org/asam-criteria/about-the-asam-criteria>.

SUD Withdrawal Management

Level 3 programs, as established by ASAM, offer organized treatment services that feature a planned and structured regimen of care in a 24-hour residential setting. Level 3.5 programs offer clinically managed high-intensity residential treatment, inclusive of clinically managed residential withdrawal services.

These programs utilize trained staff who apply physician-approved protocols for patient observation and supervision. These programs typically provide services to ensure connection to treatment and recovery in the existing continuum of care. A person seeking these services must meet a defined set of criteria to establish medical necessity. The criteria include demonstrating signs and symptoms of withdrawal or imminent withdrawal that can be managed in a clinical setting. Progress is monitored throughout a patient's stay, and upon discharge, patients are supported in transitioning to a different level of service, which could be in the community. As authorized by Vermont's Global Commitment to Health 1115 Waiver, the State of Vermont will work to establish clinically managed residential withdrawal management as a Medicaid-covered benefit.

Note: While withdrawal management is not called out in Figure 1, the 4th edition of ASAM specifically mentions withdrawal management as a potential component of the 1.7, 2.7, and 3.5/3.7 levels of care. Withdrawal management can be provided at every level of care.

Key Activities

In order to establish clinically managed residential withdrawal management as a Medicaid-covered benefit, the Health Department will pursue the following activities:

1. **Update the Medicaid program** by submitting an amendment to the Centers for Medicare and Medicaid Services (CMS) to update the Medicaid State Plan and update the Medicaid Management Information System (MMIS) to accommodate clinically managed residential WM programs, including reimbursement to Medicaid-enrolled withdrawal management programs.
2. **Conduct targeted outreach to qualified vendors** to provide clinically managed residential withdrawal management services.

Next Steps

- The Health Department will work with rate-setting consultants to define the types of services and rates reimbursable through Medicaid [expected timing: fourth quarter of calendar year 2024].
- The Health Department will process edits to the Medicaid State Plan to reflect updates to covered services to account for clinically managed residential withdrawal management [expected timing: fourth quarter of calendar year 2024].

For more information, visit HealthVermont.gov/SUDSystemOfCare or email ahs.vdhdsuclinicalteam@vermont.gov