Medical Necessity Guideline

Medical Necessity Guideline (MNG) Title: Structured Outpatient Addiction Program (SOAP)

<table>
<thead>
<tr>
<th>MNG #: 033</th>
<th>☒SCO  ☒One Care</th>
<th>Prior Authorization Needed?</th>
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</thead>
<tbody>
<tr>
<td>☐Clinical: ☒</td>
<td>☐Operational: ☐</td>
<td>☒Yes ☒No</td>
</tr>
<tr>
<td>☒Medicare Benefit: Yes ☒No</td>
<td>☐Approval Date: 10/03/2019</td>
<td>☒Effective Date: 4/25/2020</td>
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<tr>
<td>Last Revised Date: 5/5/2020</td>
<td>Next Annual Review Date: 10/03/2020</td>
<td>Retire Date:</td>
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Overview:
Structured Outpatient Addiction Program (SOAP) is a clinically intensive, structured, day and/or evening substance use disorder service including Motivational Interviewing (MI). It can be used by individuals, 21 years of age and older, including pregnant women, who need outpatient services, but who also need more structured treatment for substance use disorders. These programs can be used as a transition service in the continuum of care for those individuals being discharged from Acute Treatment Services (ATS) for Substance Use Disorders or for individuals needing more-intensive treatment than can be provided at Residential Rehabilitative Services (RRS) or traditional outpatient settings.

SOAP provides multidisciplinary treatment to address the sub-acute needs of members with addiction and/or co-occurring disorders, while allowing members to maintain employment or attend school and participation in the community. SOAP services can only be provided in DPH-licensed, freestanding facilities skilled in addiction recovery treatment, outpatient departments in acute-care hospitals or outpatient agencies of healthcare professionals.

KEY CARE PLANNING CONSIDERATIONS:
Unless contraindicated, the family, guardian, and/or natural supports are actively involved in the treatment as required by the treatment plan, or there are active efforts being made, and documented, to involve these supports. Care plans for members who are identified as appropriate for high opioid patient engagement (HOPE) may include SOAP as an appropriate level of care for stabilization.

AUTHORIZATION:
No Prior Authorization Required

RELATED REFERENCES:
See MA Chapter 258 Guidelines

ASAM Level 2.1: [https://www.asamcontinuum.org/knowledgebase/what-are-the-asam-levels-of-care/](https://www.asamcontinuum.org/knowledgebase/what-are-the-asam-levels-of-care/)