Patient Flow: Youth (Age 12-17)

### Initial Placement Determination

**Point of Entry**

- Parent/youth screened for youth’s substance use.

**Parent/youth contacts treatment provider directly**

**Parent/youth or referral source contacts the Beneficiary Access Line**

**SAPC renders decision regarding pre-authorization request within 24-hours of request.**

**Approved?**

- **Yes**
  - Youth referred to and admitted into appropriate treatment services.
  - Youth admitted into the provider’s outpatient SUD treatment services.
  - Youth referred to and admitted into appropriate treatment services.
  - Provider re-assesses case to determine most appropriate LOC and either appeals the authorization denial or refers to the more appropriate LOC.

- **No**
  - Residential treatment needed?
    - **Yes**
      - Youth admitted into residential SUD treatment services.
    - **No**
      - Does the full ASAM assessment recommend a LOC (outpatient) offered by the provider?
        - **Yes**
          - Youth admitted into the provider’s outpatient SUD treatment services.
        - **No**
          - Youth referred to and admitted into appropriate treatment services.

- Does the youth need full assessment?
  - **Yes**
    - Youth referred to early intervention services.
  - **No**
    - Youth referred to resource materials on SAPC website.

**Parent receives face-to-face appointment at youth outpatient provider of choice for a full assessment based on ASAM Criteria within 15 business days of the screener date; provider determines medical necessity.**

**Does the youth meet medical necessity for SUD treatment?**

- **Yes**
  - Youth referred to and admitted into appropriate treatment services.
- **No**
  - Youth referred to early intervention services.

**Red Track – Patient Self-Refers Into System of Care**

**Blue Track – Beneficiary Access Line Refers Patient Into System of Care**

**Purple – New Drug Medi-Cal Organized Delivery System Process**

**Green – Existing Service(s) Now Eligible for Reimbursement**
Patient transfers up or down to appropriate LOC

Transfer

Regular re-evaluation of medical necessity and appropriate placement according to the ASAM Criteria:
- continuation of care,
- transfer to different LOC, or
- discharge

Continuation of Care

Patient continues at current LOC

Patient no longer meets medical necessity for SUD treatment, or prematurely exits the SUD system of care

Discharge

Provider monitors and tracks patient progress, coordinate care, and provide linkages with community support services, as well as coordinate referrals to other LOCs; provider communicates with network providers as patients move between LOCs and into post-discharge recovery services to support successful transition(s)

Patient receives recovery support services once they are discharged from treatment. They are non-clinical services that foster health and resilience in individuals and families by helping them to navigate systems of care, and reduce barriers to employment, housing, education, and other life goals

Certified Substance Use Disorder (SUD) Counselor or higher develops and Licensed Practitioner of the Healing Arts (LPHA) signs individualized treatment plan

And

Patient receives case management and care coordination to successfully engage in the initial treatment episode, receives necessary services including Medication Assisted Treatment (if clinically appropriate) and transitions through care as clinically appropriate

And

Patient receives discharge plan; treatment team and individual prepare for return into the community including linkages to essential supportive services such as education, employment training, employment, housing, benefit enrollment, and other human services

Treatmeat plan will be reviewed, updated, and adjusted accordingly at least every 30-days in all treatment settings