

Recovery Housing Protocols

- Jurisdiction must purchase service using a fee for service method.
- Jurisdiction must describe the mechanism they will use to procure services.
- Jurisdiction must require patient participation in either care coordination or a level of care – OP, IOP, Continuing Care.
- The patient’s care coordinator or if no care coordinator, counselor/continuing care worker will collect patient data related to use of recovery housing.
- Jurisdiction will monitor recovery housing vendor quarterly.
- Jurisdiction will investigate complaints against vendor. Jurisdiction will describe complaint investigation protocol.
- The jurisdiction will:

Describe the protocol used for determining client eligibility

Determine the length of stay

What data will BHA want to collect on use of recovery housing services?

Jurisdictions may only pay for recovery housing for patients who are also enrolled in Care Coordination or a level of care (intensive outpatient, outpatient, or continuing care)

The patient’s Care Coordinator or level of care clinician is responsible for indicating the patient’s participation in Recovery Housing via Program Enrollment and entering Patient Follow-up data into the SMART system.

The Program Enrollment will provide the patient’s recovery housing start and end date, and National Outcome Measures. The Patient Follow-up is to be completed every six months while the patient is receiving recovery housing. The Patient Follow-up information consists of National Outcome Measures, and will provide data for patients who remain in recovery housing for longer than six months.