TREATMENT OF DRUG ABUSE (CHEMICAL DEPENDENCY)  
(NCD 130.6) 

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INSTRUCTIONS FOR USE 

This Policy Guideline is applicable to UnitedHealthcare Medicare Advantage Plans offered by UnitedHealthcare and its affiliates for health care services submitted on CMS 1500 forms and, when specified, to those billed on UB04 forms (CMS 1450), or their electronic comparative. The information presented in this Policy Guideline is believed to be accurate and current as of the date of publication.

This Policy Guideline provides assistance in administering health benefits. All reviewers must first identify member eligibility, any federal or state regulatory requirements, Centers for Medicare and Medicaid Services (CMS) policy, the member specific benefit plan coverage, and individual provider contracts prior to use of this Policy Guideline. When deciding coverage, the member specific benefit plan document must be referenced. The terms of the member specific benefit plan document may differ greatly from the standard benefit plan upon which this Policy Guideline is based. In the event of a conflict, the member specific benefit plan document supersedes this Policy Guideline. Other Policies and Guidelines may apply. UnitedHealthcare reserves the right, in its sole discretion, to modify its Policies and Guidelines as necessary.

UnitedHealthcare follows Medicare coverage guidelines and regularly updates its Medicare Advantage Policy Guidelines to comply with changes in CMS policy. UnitedHealthcare encourages physicians and other healthcare professionals to keep current with any CMS policy changes and/or billing requirements by referring to the CMS or your local carrier website regularly. Physicians and other healthcare professionals can sign up for regular distributions for policy or regulatory changes directly from CMS and/or your local carrier. This Policy Guideline is provided for informational purposes. It does not constitute medical advice.

POLICY SUMMARY 

Overview 
CMS recognizes that there are similarities between the approach to treatment of drug abuse and alcohol detoxification and rehabilitation. However, the intensity and duration of treatment for drug abuse may vary (depending on the particular substance(s) of abuse, duration of use, and the patient's medical and emotional condition) from the duration of treatment or intensity needed to treat alcoholism.

Guidelines 
Accordingly, when it is medically necessary for a patient to receive detoxification and/or rehabilitation for drug substance abuse as a hospital inpatient, coverage for care in that setting is available. Coverage is also available for treatment services that are provided in the outpatient department of a hospital to patients who, for example, have been discharged from an inpatient stay for the treatment of drug substance abuse or who require treatment but do not require the availability and intensity of services found only in the inpatient hospital setting. The coverage available for these services is subject to the same rules generally applicable to the coverage of outpatient hospital services. The services must also be reasonable and necessary for treatment of the individual's condition. Decisions regarding reasonableness and necessity of treatment, the need for an inpatient hospital level of care, and length of treatment should be made by intermediaries based on accepted medical practice with the advice of their medical consultant. (In hospitals under QIO review, QIO determinations of medical necessity of services and appropriateness of the level of care at which services are provided are binding on the title XVIII fiscal intermediaries for purposes of adjudicating claims for payment.)
Cross Reference: Also see the Medicare Benefit Policy Manual, Chapter 6, § 20 Outpatient Hospital Services, and Chapter 16, § 90 Routine Services and Appliances.

These services may require pre-authorization and/or notification from the managed behavioral health care benefits administrator. Access United Behavioral Health (UBH) online at http://www.unitedbehavioralhealth.com/.

REFERENCES

CMS National Coverage Determinations (NCDs)
NCD 130.6 Treatment of Drug Abuse (Chemical Dependency)

CMS Benefit Policy Manual
Chapter 2 Inpatient Psychiatric Hospital Services
Chapter 3; § 30 Inpatient Days Counting Toward Benefit Maximums
Chapter 4 Inpatient Psychiatric Benefit Days Reduction and Lifetime Limitation
Chapter 6; § 20 Outpatient Hospital Services, § 70 Outpatient Hospital Psychiatric Services, § 70.2 Coverage Criteria for Outpatient Hospital Psychiatric Services
Chapter 7; § 40.1.2.15 Psychiatric Evaluation, Therapy, and Teaching
Chapter 16; § 20 Services Not Reasonable and Necessary

Related Medicare Advantage Policy Guidelines
Chemical Aversion Therapy for the Treatment of Alcoholism (NCD 130.3)
Electrical Aversion Therapy for the Treatment of Alcoholism (NCD 130.4)
Inpatient Hospital Stays for Treatment of Alcoholism (NCD 130.1)
Outpatient Hospital Treatment of Alcoholism (NCD 130.2)
Screening and Behavioral Counseling Interventions in Primary Care to Reduce Alcohol Misuse (NCD 210.8)
Treatment of Alcoholism and Drug Abuse in a Freestanding Clinic (NCD 130.5)
Withdrawal Treatments for Narcotic Addictions (NCD 130.7)

Related Medicare Advantage Coverage Summary
Alcohol, Chemical and/or Substance Abuse - Detoxification and Rehabilitation

GUIDELINE HISTORY/REVISION INFORMATION

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<th>Date</th>
<th>Action/Description</th>
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<td>10/12/2016</td>
<td>• Annual review, no changes</td>
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