

RECOVERY HOUSE

- A. The Contractor shall provide Recovery House services to individuals age eighteen (18) or older who have a substance use disorder or co-occurring psychiatric and substance use disorder. Priority will be given to individuals who are recipients or pending recipients of medical benefits through Medicaid Low Income Adults (LIA). Such services shall be defined as twenty-four (24) hour temporary housing and supportive services for individuals who present without evidence of intoxication, withdrawal or psychiatric symptoms that would indicate clinical inappropriateness for participation in the Recovery House program. The length of stay for this program shall not exceed ninety (90) days.
- B. Specifically, the Contractor shall:
1. confirm that each individual has been registered and authorized by the Department's Administrative Services Organization (ASO) for admission;
 2. utilize an admission procedure approved by the Department which ensures close coordination and collaboration with the Department's Intensive Case Management Program, the Eastern Region Service Center, the Recovery Support Program, and the Substance Abuse Treatment Enhancement Project (SATEP);
 3. maintain a clean and safe living environment that is free from illicit drug use;
 4. accept admissions during routine business hours;
 5. provide an orientation to all individuals who are admitted which shall include, but not be limited to, an explanation of the program's services, resident's rights and responsibilities and the program's expectations of the individual;
 6. provide directly or assist access to a variety of psycho-educational groups directly or by referral, such as life skills training, family unification, parenting skills, job search skills, anger management, relapse prevention, stress management, and support for spiritual/religious involvement;
 7. provide directly or assist access to a variety of recovery support groups, such as the 12-step model;
 8. provide 3 nutritionally-balanced meals on site daily; menus are to be dietician-approved in advance;
 9. utilize a procedure for safe storage and self-administration of all medications;
 10. provide transportation services, as needed for program participation, to a variety of supportive services, such as treatment, methadone treatment and/or maintenance, court appearances, medical appointments, and appointments with various social service agencies;
 11. perform urine and/or breathalyzer screening, randomly or as clinically indicated;
 12. maintain a written daily schedule of services and activities including on-site and off-site recreational activities that promote and support recovery; and
 13. provide case management services which include assessment, planning and linking residents to substance abuse, mental health, financial, housing and other needed community supports.
- C. The Contractor shall: register at least 95% of all admissions to the Recovery House with the ASO within 2 days of the individual's admission; register at least 95% of all discharges from the Recovery House with the Department's ASO within two (2) days of the individual's discharge and coordinate at least 90% of all admissions with the Department's Intensive Case Management Program.

- D. The program shall serve as an integral component of a region wide and statewide support system. Services shall be provided at the following location and with the capacity described below:

Location	Capacity

- E. The Contractor shall provide services which meet the required utilization for Recovery House services. The minimum acceptable utilization rate for Recovery House programs funded by the Department is 90% of the maximum attainable number of bed days, which will be determined by multiplying the total capacity for the program (as stated in section D. above) by three hundred sixty-five (365). The Contractor’s services shall be measured by the number of bed days reported to the Department’s ASO, and in any other required reports.
- F. The Contractor shall implement the program and services described herein to result in the following outcomes on behalf of individuals served. Such outcomes shall be measured in the manner described herein. Outcome results achieved pursuant to these terms and conditions will be monitored by the Department through data reported by the Contractor to the Department’s information systems, in observations through site visits and/or in any other required reports. The Department’s outcome indicators for the Contractor’s Recovery House services are as follows:

PERFORMANCE OUTCOME MEASURES

RECOVERY HOUSE

OUTCOMES	MEASURES
1. Contractor will meet reporting requirements in a timely manner.	Department required data will be submitted to the Department’s data collection system no later than the 15 th day of each month.
2. Contractor will meet the expected utilization rate or annual projection of individuals to be served.	A utilization rate of at least 90% will be achieved.
3. Individuals will improve or maintain their overall functioning.	At least 95% of individuals served annually will maintain or increase their level of functioning as measured by the Global Assessment of Functioning Scale (GAF), or Modified Global Assessment of Functioning Scale (MGAF).
4. Individuals will successfully complete treatment.	At least 80% of individuals discharged will have substantially completed the objectives identified on their recovery plans.
5. Individuals will receive follow-up care promptly.	At least 90% of individuals who have successfully completed treatment will have at least one (1) residential admission or two (2) outpatient services within thirty (30) days of discharge.
6. Individuals will improve or maintain their living situation.	At least 95% of individuals served annually will improve or maintain their living situation.
7. Individuals will improve or maintain their social supports.	At least 60% of individuals served annually will have increased or maintained the number of

	social supports.
8. Individuals will reduce or eliminate substance use.	At least 65% of individuals served annually will have reduced or eliminated substance use.