



Bulletin Title: Community Support Service Limits

Bulletin ID: 141

Issued Date: May 8, 2024

Effective Date: May 8, 2024

At its April 11, 2024, Fiscal Year 2025 Budget Oversight Hearing, the Department of Behavioral Health (DBH or the Department) [announced](#) plans to realign Community Support authorization limits to reflect utilization trends. The changes are as follows:

- Upon enrollment, consumers will automatically receive two-hundred (200) units of Community Support services for a one-hundred eighty (180) day period.
- Community Support services provided in excess of two-hundred (200) units within a one-hundred eighty (180) day period will require prior authorization from the Department.
- DBH will automatically authorize another two-hundred (200) units for an additional one-hundred eighty (180) day period with an updated treatment plan.

Currently, [Title 22-A District of Columbia Municipal Regulations \(DCMR\) Chapter 34](#) allows consumers to receive up to six-hundred (600) units of Community Support services within a one-hundred and eighty (180) day period before requiring prior authorization from the Department; any additional authorizations are not allowed to exceed two-hundred (200) units within another one-hundred eighty (180) day period. DBH utilization data shows that ninety (90) percent of consumers utilize less than four-hundred (400) units of Community Support services per year. The Department will not deny medically necessary care to any consumer and will grant additional Community Support units when clinically indicated pursuant to [Title 22-A District of Columbia Municipal Regulations Chapter 34](#).

The Department also plans to limit the use of audio-only telehealth for Community Support services to six (6) units per one-hundred eighty (180) day period. DBH claims from Fiscal Year 2023 identified that fifteen (15) providers delivered Community Support services through telemedicine for sixty-three (63) to eighty-three (83) percent of their total claims; audio-only services accounted for seventy-two (72) percent of all Community Support telemedicine expenditures and twenty-seven (27) percent of all Community Support claims overall. Community Support is a community-based service that should be delivered in natural settings in accordance with Title 22-A DCMR 3421.10(b). Limiting overutilization of audio-only telemedicine will improve fidelity to the service, quality of care and outcomes for patients.

DBH anticipates publishing rulemaking effectuating these changes in the third quarter of Fiscal Year 2024 and will provide additional information at upcoming provider meetings. DBH encourages stakeholders to submit comments in response to the rulemaking upon publication. DBH encourages providers to begin to address internal operational changes to facilitate the amendments delineated above.

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Please contact Dr. Jean Moise, Deputy Director, Adult Services (jean.moise@dc.gov) with questions about this bulletin.