



Bulletin Title: Community Support Supplemental Units Request
Bulletin ID: 149
Issue Date: March 25, 2025

On December 13, 2024, the Department of Behavioral Health (DBH or the Department) published [Emergency and Proposed Rulemaking](#) amending Title 22-A District of Columbia Municipal Regulations (DCMR) Chapter 34 to limit community support services delivered via audio-only telemedicine to six (6) units and twenty (20) units to collateral contacts per one hundred eighty (180) day period, unless otherwise authorized by the Department pursuant to the Department's Authorization and Billing Manual. (*See* Title 22-A DCMR §§ 3421.10 (d), 3434.4). In addition, this rulemaking maintained allowable community support units at two hundred (200) per one hundred and eighty (180) day period, unless otherwise authorized by the Department. (*See* Title 22-A DCMR § 3434.4).

The Department is publishing this bulletin to update the attached Sections of DBH Policy 1000.2A, [DBH Authorization and Billing Manual](#), to align the billing manual with the updated Chapter 34 regulation and to establish procedures for Core Service Agencies (CSA) to request additional units of community support services, and audio-only telehealth community support units (including collateral contacts). The changes are effective March 14, 2025. The Department will publish an updated billing manual with these changes on its website within 45 days.

Please direct any questions to communitysupport.ahl@dc.gov.

7.8.3 SUPPLEMENTAL UNIT REQUESTS FOR COMMUNITY SUPPORT:

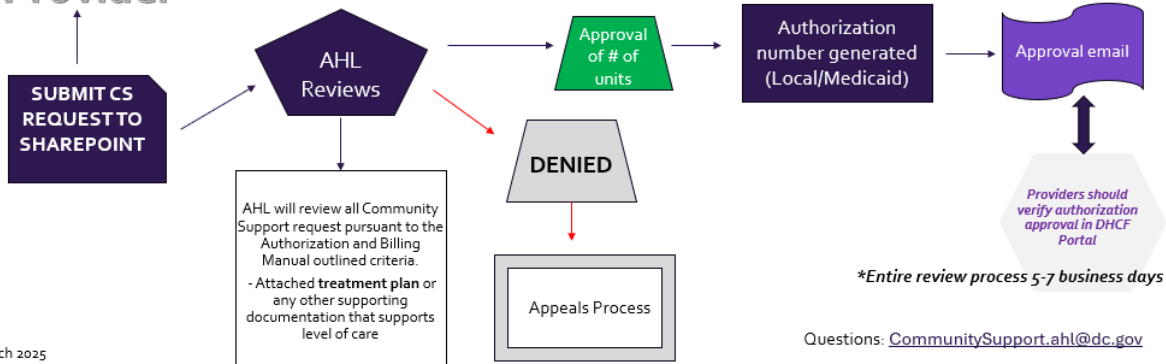
1. CSAs may request supplemental community support units for any consumer who requires additional units and meets the authorization criteria (*see* § 5a, b). CSAs must submit supplemental unit requests to DBH through [this](#) SharePoint site.
2. DBH will deny all requests for supplemental community support units that are submitted more than thirty (30) calendar days after the date of service.
3. CSAs must submit the consumer's treatment plan and clinical justification demonstrating the consumer's level of care needs with the request for supplemental community support units.
4. DBH may grant up to fifty (50) supplemental community support units per one-hundred and eighty (180) days.
5. DBH shall use the following authorization criteria to evaluate requests for supplemental community support units:
 - a. Does the consumer participate in a specialized program where the intensity of community support is expected for a limited period?
 - b. Has there been a significant change in treatment within the past thirty (30) days that supports a request for additional units?
 - c. Has the consumer received a supplemental unit request in the past six (6) months? If so, please provide authorization number.
6. DBH will grant supplemental community support units if sufficient clinical justification is provided. DBH will notify the requesting CSA of approval via email. CSAs must retrieve the authorization numbers from the Department of Health Care Finance Portal.
7. DBH will notify the requesting CSA of a supplemental unit denial via email, including information on how to appeal the decision.
8. Consumers may appeal a denial pursuant to Section 6.9 of the DBH Authorization and Billing Manual.
9. Providers shall utilize the following workflow to submit supplemental unit requests:



Community Support Supplemental Requests



Provider



7.4.5 SERVICE LINE UNIT SETTINGS

(b) Providers can change the “default” units up to the maximum setting for a selected service to be approved by AHL. The maximum number of units that can be placed on a service line by a provider are indicated below.

Community Support	200 units per 180 days
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7.9.2 LEVEL II APPEALS– DBH SERVICE AUTHORIZATION APPEAL BOARD:

	Registration/ Enrollment	Med Management	Low Intensity	Average Intensity	High Intensity	Global
Duration	30 days	365 Days	365 Days	180 Days	180 Days	Add-on to Any Plan
Authorized Units						
Community Support	24	-	60	100	200	-