

Exhibit 2Q - State Hospital Access to Rehabilitation Education (SHARE) ASAM Residential LOC Authorization Parameters

SFY 2025
Effective 07/01/2024
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State Hospital Access to Rehabilitation & Education (SHARE)

Fee for Service - Adult Residential
ASAM Level of Care Authorization Parameters

Service	Assessment	Short Term Residential (7 days)	Short Term Residential (14 days)
Modality/Type	Pre-Admission	Residential	Residential
ASAM LOC	N/A	Level 3.7	Level 3.7
CPT Code	H0001 HF	H0018 HF	H0018 HF
Maximum units per Authorization	4	7	14
Authorization time frame (days)	30	7	14
Unit	30 minutes	Per diem	Per diem
Daily Limits	4	1	1
Weekly Limits	4	7	7
# of days at which initial ERL needed	N/A	14	
# of days at which ERL can be submitted	N/A	7	
Authorization RED ZONE (67% of annual allocation)	N/A	23	
Adult Annual Client Limits (units)	N/A	35	
Rate Per Unit	\$28.49	\$ 244.78	
Authorization Value	\$113.96	\$ 1,713.46	\$ 3,426.92
Shared Service Name	N/A	Short Term Residential	