I. Purpose:

To identify the parameters of providing services for the Family Members/Significant Others of the LCDAC funded client in the OP; IOP; and/or PHP level of care

II. Procedure:

A. The following is relevant for all LCDAC contracted OP, IOP, and/or PHP treatment providers when serving family members/significant others of the LCDAC funded client:

1. a maximum of five (5) hours of counseling and education for each family member and/or significant others, without the client being present for these sessions.
2. A special fiscal code (003014.0) is used for these sessions on the LCDAC invoice. Reimbursement for this service is $72 per hour, for a maximum of $360.00.

Approved By: _____ ___03222023_____

Rick Kastner LCDAC Executive Director Date