LEVEL 3.5 CLINICALLY MANAGED HIGH-INTENSITY RESIDENTIAL CO-OCCURRING ENHANCED SERVICES BY SERVICE CHARACTERISTICS ¹

I. SETTING

No additional sub-service characteristics.

II. SUPPORT SYSTEMS (2 sub-service characteristics)

Address those services which need to be readily available to the program through affiliation or contract.

II.1. Level 3.5 co-occurring enhanced programs offer psychiatric services, medication evaluation and laboratory services (*The ASAM Criteria*, p 249).

Patients admitted to Level 3.5 co-occurring enhanced programs meet the diagnostic criteria for both a mental disorder and substance use disorder. Providing active psychiatric services, including medication evaluation and laboratory services, is a defining service characteristic of the co-occurring intensity of service.

III.2. Such services are available by telephone within 8 hours and on-site or closely coordinated off-site within 24 hours, as appropriate to the severity and urgency of the patient's mental condition (*The ASAM Criteria*, p 249).

Clinical experience indicates the need for staff to have timely and reliable access to psychiatric services when a patient experiences a change in their mental condition.

Goal: Provide active psychiatric services, including medication evaluation and laboratory services.

III. STAFF (3 sub-service characteristics)

Address the composition and competencies of professionals on the staff of the program.

III.1. Level 3.5 co-occurring enhanced programs are staffed by appropriately credentialed mental health professionals, including addiction psychiatrists who are able to assess and treat co-occurring mental disorders and who have specialized training in behavior management techniques (*The ASAM Criteria*, p 251).

Patients presenting for treatment at Level 3.5 co-occurring enhanced services require a set of treatment services that are provided by mental health clinicians, including addiction psychiatrists who are able to assess and treat co-occurring mental disorders.

III.2. Some (if not all) of the addiction treatment professionals should have sufficient cross-training to understand the signs and symptoms of co-occurring mental disorders, and to understand and be able to explain the purposes of psychotropic medications and their interactions with substance use (The ASAM Criteria, p 251).

In order to provide optimal clinical services to patients with a mental and substance use disorder, addiction professionals working in a Level 3.5 co-occurring enhanced program must be competent to recognize the signs and symptoms of mental disorders and be able to be a resource to patients to explain the purpose of psychotropic medications and their interactions with substance abuse.

III.3. The intensity of nursing care and observation is sufficient to meet the patient's needs (*The ASAM Criteria*, p 251).

Level 3.5 co-occurring enhanced programs, unlike Level 3.5 programs, must plan for the availability of on-site nursing services to meet the needs of patients as they arise.

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¹This document provides an overview of the characteristics of co-occurring programs at Level 3.5 Clinically Managed High-Intensity Residential Services. Clinically Managed High-Intensity co-occurring programs should review The ASAM Criteria 2013, 3rd edition, for criteria specific to Level 3.5.

Goal: Services are provided by mental health clinicians with the education, training, and expertise to assess, monitor, and manage severe and chronic mental disorders.

IV. THERAPIES (2 sub-service characteristics)

Cover the range of therapies that programs need to offer to ensure they meet the personalized biopsychosocial needs of patients.

IV.1. Level 3.5 co-occurring enhanced programs offer planned clinical activities designed to stabilize the patient's mental health problems and psychiatric symptoms, and to maintain such stabilization (*The ASAM Criteria, p 252*).

Level 3.5 co-occurring enhanced programs provide a regular schedule of planned clinical activities (individual counseling, group counseling, medication management and education) that work to stabilize the patient's mental health problems, psychiatric symptoms and maintain such stabilization.

IV.2. Specific attention is given to medication education and management and to motivational engagement strategies which are used in preference to non-evidence-based practices (*The ASAM Criteria*, p 252).

The use of motivational engagement strategies can positively impact readiness for change as well as promote positive engagement in treatment. Evidence shows that these strategies are particularly effective when providing medication education and management services.

Goal: Provide a regular schedule of planned clinical activities that work to stabilize the patient's mental health problems, psychiatric symptoms and maintain such stabilization.

V. ASSESSMENT/TREATMENT PLAN REVIEW (2 sub-service characteristics)

V.1. Level 3.5 co-occurring enhanced programs provide a review of the patient's recent psychiatric history and mental status examination. (If necessary, this review is conducted by a psychiatrist). A comprehensive psychiatric history and examination and psychodiagnostic assessment are performed within a reasonable time, as determined by the patient's needs (*The ASAM Criteria*, p 253).

A comprehensive review and assessment of the patient's recent psychiatric history, as well as psychodiagnostic assessment are part of the standard multidimensional assessment. The assessment is the foundation for developing an individualized treatment plan.

V.2. Level 3.5 co-occurring enhanced programs also provide active reassessments of the patient's mental status, at a frequency determined by the urgency of the patient's psychiatric symptoms and follow through with mental health treatment and psychotropic medications as indicated (*The ASAM Criteria*, p 253).

Active reassessments of the patient's mental status at a frequency determined by the urgency of the patient's psychiatric problems ensures that the patient's response to treatment and medications is accurately tracked and appropriate adjustments to treatment and medications are made.

VI. DOCUMENTATION (1 sub-service characteristic)

Detail the expectations regarding the individualized patient information that needs to be captured to ensure optimal patient care.

VI.1. Level 3.5 co-occurring enhanced programs document the patient's mental health status, the relationship between the mental and substance use disorder, and the patient's current level of mental functioning (*The ASAM Criteria*, p 254).

The primary method for documenting progress is through regular notes that describe the implementation of the treatment plan, patient response to interventions and any amendments made. Co-occurring enhanced program documentation specifically records the patient's mental health problems, the relationship between the mental and substance use disorders, and the patient's current level of mental functioning. Notes should be timely, complete, and accurate, in accordance with established policies and procedures.

1 03/01/2023

Goal: Specifically record the patient's mental health problems, the relationship between the mental and substance use disorders, and the patient's current level of mental functioning.

1 03/01/2023