

Substance Abuse Level of Care Criteria

ABH Substance Abuse LOC Criteria Reviewed 2025/Revised 2025



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SUBSTANCE ABUSE PREVENTION: Adult

Prevention services include activities and strategies that are used to prevent or impede the development or progression of substance abuse problems. The services are directed toward the general population or specific subpopulations, or toward individuals who are manifesting behavioral effects of specific risk factors for substance abuse.

ADMISSION CRITERIA

1. There is reasonable expectation that the individual or group can benefit from services at this level of care

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is assessable to the individual
- 2. The individual has medical impairments/conditions that renders treatment at this level of care ineffective/unsafe
- 3. The individual presents with emotional, behavioral, or cognitive conditions and complications to a degree that render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

- 1. The individual's needs can not be better met by a higher level of care
- 2. Continued intervention at this level of care is required to maintain the individual so that the risk of needing a higher level of service is reduced

DISCHARGE CRITERIA

- 1. Admission criteria for a higher level of care are met
- 2. Maximum progress has been achieved
- 3. The individual refuses to participate in services



OPIOID MAINTENANCE THERAPY: Adult

Medication and Methadone maintenance treatment are nonresidential services which utilizes methadone or other approved medication in combination with clinical services to treat persons who are dependent upon opioid drugs.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

Meets ASAM Criteria as outlined below:

Client meets the criteria in dimensions one through six.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

In this dimension, the client must meet (a) and (b), or one of (c), (d), or (e):

a. A Physician determines that the client "meets diagnostic criteria for a moderate to severe Opioid Use Disorder (OUD); the individual has an active moderate to severe OUD, or OUD in remission, or is at high risk for recurrence or overdose." (FDA 42 CFR Part 8); and

b. Criteria for determining the client's current physiological dependence (in addition to a history of addiction) include but are not limited to vital signs, early physical signs of narcotic withdrawal, a urine screen that is positive for opiates, the presence of old or fresh needle marks, and documented reports from medical professionals, the client or family, treatment history, or (if necessary) a positive reaction to a naloxone test; or

c. Clients admitted from penal or chronic care settings, if admitted within 14 days of release, or up to six months after release without documented physiological dependence if the client was eligible for admission prior to incarceration (FDA 42 CFR Part 8); or

d. Pregnant women who have a documented history of opiate dependence without physiological dependence, if the program physician certifies that the woman is pregnant and finds that treatment is medically justified (FDA 42 CFR Part 8); or

e. Previously treated clients who are voluntarily detoxified from methadone within 2 years of discharge, in the absence of current physiological dependence, if the program can document prior methadone treatment of 6 months or more duration and, in the judgment of the program physician, readmission to OMT is medically indicated (FDA 42 CFR Part 8).

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client meets the biomedical criteria for opiate dependence, with or without the complications of opiate addiction, requiring medical monitoring and skilled care; or

b. The client has a concurrent biomedical illness or pregnancy, which can be treated on an outpatient basis with minimal daily medical monitoring; or

c. The client has biomedical conditions that can be managed on an outpatient basis, such as: (1) liver disease or problems with potential hepatic decompensation, (2) pancreatitis, (3) gastrointestinal problems, (4) cardiovascular disorders, (5) HIV and AIDS, (6) sexually transmitted diseases, (7) concurrent psychiatric illness

requiring medications, and (8) tuberculosis. Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's emotional, behavioral, or cognitive conditions, if present, are manageable in an outpatient structured environment; or

b. The client's addiction-related abuse/neglect of the client's spouse, children or significant others require intensive outpatient treatment to reduce risk of further deterioration; or

c. The client has diagnosed and stable emotional, behavioral or cognitive conditions or thought disorders (e.g. stable borderline personality or obsessive-compulsive disorder) that require monitoring, management, and/or



medication because of the risks that these conditions will distract the client from a focus on treatment; or d. The client demonstrates a mild risk of posing harm to self or others, with or without a history of severe depression, suicidal and/or homicidal behavior, and can be managed safely in a structured outpatient environment; or

e. The client demonstrates emotional/behavioral stability but requires continued pharmacology to prevent relapse to opiate use.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client requires structured therapy, pharmacotherapy, and programmatic milieu to promote treatment progress because the client

Attributes continued relapse to physiologic craving/need for opiates; or

b. Despite active participation in other treatment interventions without provision for OMT, the client is experiencing an intensification of

addiction symptoms (e.g., difficulty postponing immediate gratification and related drug-seeking behavior) or continued high-risk

behaviors (e.g., shared needle use), and the individual's level of functioning is deteriorating, despite revision of the treatment plan; or

c. The client is at high risk of relapse to opiate use without OMT and is in need of close outpatient monitoring and structured support, as indicated by lack of awareness or relapse triggers, difficulty in postponing immediate gratification and/or ambivalence toward or resistance to treatment.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. A sufficiently supportive psychosocial environment makes OMT feasible (e.g., significant others are supportive of recovery efforts, the

client's workplace is supportive, the client is subject to legal coercion, the client has adequate transportation to the program, etc.); or

b. Family/significant others are supportive but require professional intervention to improve the client's likelihood of treatment success

(e.g., assistance with limit-setting, communication skills, avoiding rescuing behaviors, education about methadone treatment and HIV

risk avoidance, etc.); or

c. The client does not have a positive social support system to assist with immediate recovery efforts, but he or she has demonstrated

motivation to obtain such a support system or to pursue (with assistance) an appropriate alternative living environment; or

d. The client has experienced traumatic events in his or her recovery environment (such as physical, emotional, sexual or domestic abuse) or has manifested the effects of emotional/behavioral problems in the environment (such as criminal activity), but these are manageable on an outpatient basis.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client requires structured therapy, pharmacotherapy, and programmatic milieu to promote treatment progress and recovery; or

b. The client attributes problems to persons or external events rather that to the client's addictive disorder. This inhibits the client's ability to make behavior changes in the absence of clinically directed and repeated structured motivational interventions. However, the client's resistance is not so high as to render treatment ineffective.

EXCLUSION CRITERIA

1. The individual refuses to consent to the required registry procedures



- 2. The individual is known to be currently participating in this level of service with another provider
- 3. The physician after assessment of the individual determines that the individual would not benefit from treatment at this level of care
- 4. The physician determines that treatment of the individual at this level of care poses a danger to the individual, staff, or other individuals
- 5. The individual has medical impairments/conditions that renders treatment at this level of care ineffective/unsafe
- 6. The individual presents with emotional, behavioral, or cognitive conditions and complications to a degree that render treatment at this level of care ineffective/unsafe
- 7. The individual does not give voluntary consent for treatment
- 8. The individual's recovery environment is such that treatment at this level of care is not recommended
- 9. The individual refuses agreement to follow program structure/rules

CONTINUED STAY CRITERIA

Meets ASAM continued stay criteria as outlined below:

Continued service requires the client meet the criteria of dimensions one through six.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

- a. The client requires continued opioid maintenance therapy to prevent his or her return to illicit opiate use; or
- b. The client evidences current use (or increased risk of use) of drugs other than opiates; or
- c. The client has a history of inability to abstain from opiate use, despite multiple attempts at detoxification.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. Biomedical conditions, if any, continue to be sufficiently stable to permit the client's continued participation in outpatient treatment; or

b. The client evidences, or is at risk of a serious or chronic biomedical condition (such as HIV/AIDS,

tuberculosis, etc.) that may be exacerbated by a return to illicit opiate use

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client has achieved stable emotional, behavioral, or emotional functioning, which may be jeopardized by discontinuation of opioid maintenance treatment; or

b. The client demonstrates the potential for making use of OMT (as by participating in the program, attending counseling sessions, decreasing illicit activity, etc.) but has not yet made necessary life changes; or

c. An emotional, behavioral, or cognitive disorder, which is being concurrently managed, continues to distract the client from focusing on treatment goals; however, the client is responding to treatment and, with further intervention, is expected to achieve treatment objectives; or

d. The client continues to manifest behaviors that pose a risk to self or others (e.g., periodic needle-sharing, unprotected sexual contact, outside drug use, etc.), but the condition is improving; or

e. Emotional, behavioral, or cognitive complications of addiction are still present and are manageable in a structured outpatient environment but require continued therapeutic interventions. These behaviors may include illicit drug use/criminal activity, involvement in domestic violence as a victim or perpetrator, or inability to keep a job or maintain a stable household (e.g., provide for food, consistent shelter, supervision of children, and health care).

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client continues to require structured therapy, pharmacotherapy, and programmatic milieu to promote treatment progress because the client attributes continued relapse to physiologic craving/need for opiates; or

b. The client recognizes relapse triggers but has not developed sufficient coping skills to interrupt or postpone gratification or to change inadequate impulse control behaviors; or



c. The client's addiction symptoms, while stabilized, have not been reduced sufficiently to support functioning outside a structured milieu; or

d. Pharmacotherapy has been a part of an effective treatment process that has alleviated addiction symptoms and prevented relapse, and the withdrawal of methadone or other medication is likely to lead to a recurrence of addiction symptoms.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. The client has not yet developed sufficient coping skills to withstand stressors in the work environment so as to prevent return to illicit opiate use and has not developed vocational alternatives; or

b. The client has not yet developed sufficient coping skills to deal with non-supportive family/social environment to prevent return to illicit opiate use and has not developed alternative support systems; or

c. The client has not yet integrated the socialization skills necessary to establish a supportive social network; or d. Problem aspects of the client's social and interpersonal life are responding to treatment, but are not

sufficiently supportive of recovery to allow transfer to a less intensive level of care; or

e. The client's social and interpersonal life has not improved or has deteriorated, and the client needs additional treatment to learn to cope with the current situation or to take steps to secure an alternative environment; or f. The client's social and interpersonal life has stabilized while he/she has been in treatment and indicates the need for continued OMT.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client recognizes the severity of his or her drug problem but demonstrates minimal understanding of the self-defeating nature of his/her substance abuse, however, the client is progressing in treatment; or

b. The client recognizes the severity of his or her drug problem and demonstrates an understanding of the selfdefeating nature of such alcohol or other drug involvement; however, the client does not demonstrate behaviors that indicate the level of responsibility necessary to cope with the problem; or

c. The client is beginning to accept responsibility for addressing his or her drug problem but still requires this level of intensity of motivational strategies to sustain progress in treatment; or

d. The client has accepted responsibility for his or her drug problems and has determined that ongoing treatment with OMT is the most effective means of preventing relapse.

DISCHARGE CRITERIA

Meets ASAM discharge criteria

Discharge requires that the client meet the criteria in at least one of the six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. The client no longer requires OMT to prevent his or her return to illicit use of opiates or other drugs; or

b. The client exhibits symptoms of severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions, if any, and opiate dependence problem have stabilized and can be managed without continuing OMT, and the client **does not meet any of the continued service criteria** that indicate the need for further treatment; or

b. The client's biomedical condition has deteriorated, and the client requires continued treatment in a different treatment setting.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's emotional, behavioral, or cognitive problems have diminished or stabilized to the extent that they can be managed through outpatient counseling or self-help fellowship without continued OMT, and the client



does not meet any of the continued service criteria that indicate the need for further treatment; or b. A psychiatric or emotional, behavioral, or cognitive problem exists that is interfering with addiction treatment in an outpatient treatment setting, so that (1) continued participation in an OMT presents a serious psychiatric risk, as determined by the program's medical director, and (2) continued treatment is required at a more intensive level of care.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client recognizes relapse triggers and has developed sufficient coping skills to interrupt or postpone gratification and impulse control behaviors without continued OMT, and the client **does not meet any of the continued service criteria** that indicate the need for further treatment; or

b. The client is experiencing a continuation or exacerbation of drug-seeking behaviors or craving that is not responding to OMT and which has been determined to require a more intensive level of care.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. The client's social system and significant others are supportive of recovery to the extent that the client can adhere to a self-directed recovery plan without substantial risk or relapse on discontinuation of OMT, and the client **does not meet any of the continued service criteria** that indicate the need for further treatment; or b. The client's social system remains non-supportive or has deteriorated. The client is having difficulty coping with this environment and is at substantial risk of relapse. The client is unable to achieve essential treatment objectives within his/her current social environment.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client's awareness and acceptance of his or her addiction and commitment to recovery is sufficient to expect maintenance of recovery through outpatient counseling or self-directed recovery plan, as evidence by (1) the client's recognition of the severity of his/her drug problem, (2) the client's demonstration of an understanding of the self-defeating nature of his/her alcohol/other drug use, (3) the client's application of the essential skills necessary to maintain a stable recovery program without pharmacological supports at this time, and (4) the client **does not meet any of the continued service criteria** that indicate the need for further treatment; or

b. The client consistently has failed to achieve essential treatment objectives, despite revisions to the treatment plan, to the degree that the client needs placement at another level of care.



SUBSTANCE ABUSE INTERVENTION: Adolescent

Intervention services are activities and strategies that are used to prevent or impede the development or progression of substance abuse problems. Structured services are targeted toward individuals or groups at risk of substance abuse and focused on reducing those factors associated with the onset or early stages of substance abuse, and related problems.

ADMISSION CRITERIA

Meets ASAM admission criteria for this level of care:

Must meet one of Dimensions of 4, 5, or 6 and Dimensions 1, 2, and 3 are stable or being addressed through appropriate outpatient medical or mental health services.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client's intoxication or withdrawal symptoms/risks can be managed at this level of care.

Dimension 2: Biomedical Conditions

None or very stable– Any biomedical conditions are stable or are being actively addressed and will not interfere with interventions at this level of care.

Dimension 3: Psychiatric and Cognitive Conditions

None or very stable - Any emotional, behavioral, or cognitive conditions or complications are being addressed through appropriate mental health services and will not interfere with interventions at this level of service.

Dimension 4: Substance Use-Related Risks

Needs understanding of, or skills to change current use patterns. The situation is characterized by **one** of the following:

a. The client does not understand the need to alter the current pattern of use of substances to prevent further harm related to such use; or

b. The client needs to acquire the specific skills needed to change his/her current pattern of use.

Dimension 5: Recovery Environment Interactions

Social support system or significant others increase risk for personal conflict about alcohol/drug use. The client's living environment is characterized by **one** of the following:

a. The social support system is composed primarily of individuals whose substance use patterns prevent them from meeting social, work, school, or family obligations; or

b. Family members currently are abusing substances, increasing the client's risk for substance related disorder; or

c. Significant others express values concerning alcohol or other drug use that create significant conflict for the client; or

d. Significant others condone or encourage inappropriate use of alcohol or other drugs.

Dimension 6: Person-Centered Considerations

Willing to understand how current use may affect personal goals – The client expresses willingness to gain an understanding of how his/her current use of alcohol and /or other drugs may interfere with meeting responsibilities and achieving personal goals.

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is at risk of substance abuse
- 3. The individual has medical impairments/conditions that would make treatment at this level of care ineffective/unsafe
- 4. The individual presents with Psychiatric and Cognitive Conditions to a degree that render treatment at



this level of care ineffective/unsafe

- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admissions pursuant to Florida Statutes, Chapter 397
- 6. The individual's recovery environment is such that treatment at this level of care is not recommended
- 7. The individual/caregiver refuses agreement to follow program structure/rules to such a degree to render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

Meets ASAM continued stay criteria for this level of care:

The client remains stable in Dimensions 1,2, and 3, and meets the criteria in at least one of Dimensions 4, 5, or 6.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Client is free from intoxication or withdrawal symptoms/risks.

Dimension 2: Biomedical Conditions

None or very stable– Any biomedical conditions are stable or are being actively addressed and will not interfere with interventions at this level of care.

Dimension 3: Psychiatric and Cognitive Conditions

None or very stable - Any emotional, behavioral, or emotional conditions or complications are stable or are being actively addressed and will not interfere with interventions at this level of care.

Dimension 4: Substance Use-Related Risks

The client demonstrates an understanding of the detrimental aspects of his/her alcohol and/or drug use pattern but does not yet demonstrate the skills necessary to change those patterns.

Dimension 5: Recovery Environment Interactions

The client's living environment is characterized by one of the following:

- a. Problem aspects of the environment remain, but the client is acquiring the skills needed to cope with them; or
- b. Significant others who have documented problems with alcohol or other drug use are receiving help for their problems, which have not yet stabilized.

Dimension 6: Person-Centered Considerations

Willing to understand how current use may affect personal goals – The client continues to express a willingness to gain an understanding of how his/her current use of alcohol and /or other drugs may interfere with meeting responsibilities and achieving personal goals.

DISCHARGE CRITERIA

Meets ASAM discharge criteria for this level of care:

Discharge from this level of care requires that the client meet the criteria in one of the six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client exhibits symptoms of severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client has a condition in Dimension 2 that precludes continued participation in this level of care and requires transfer to another level; or

b. The client has no biomedical conditions, or they are stable.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client has a condition in Dimension 3 that precludes continued participation in this level of care and requires transfer to another level; or

b. The client has no emotional, behavioral or cognitive conditions or they are stable and are being actively



addressed.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client has demonstrated the personal skills necessary to make responsible choices about alcohol/other drug use, and **does not meet criteria indicating the need for continued service** at this level of care; or b. The client has not integrated the skills necessary to avoid harmful or inappropriate substance use, despite professional interventions, and a recommendation is being made for further assessment and follow-up.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. The client has resolved problems in his/her living environment or demonstrates the needed coping skills necessary to achieve personal goals and **does not meet criteria indicating a need for continued service at this level of care**; or

b. The client no longer is willing to examine problems in his/her living environment, despite program efforts. Since these problems persist, a recommendation is being made for appropriate living and support services.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client has remained stable in Dimension 6 and **does not meet any other criteria that indicates the need for continued service** at this level of care; or

b. The client is no longer willing to examine personal substance use patterns, despite program efforts, and a recommendation is being made for further assessment and follow-up.



SUBSTANCE ABUSE INTERVENTION: Adult

Intervention services include activities and strategies that are used to prevent or impede the development or progression of substance abuse problems.

ADMISSION CRITERIA

Meets ASAM admission criteria as outlined below:

Must meet one of the Dimensions of 4, 5, or 6 and any identifiable problems in Dimensions 1, 2 or 3 that are stable or being addressed through appropriate outpatient medical or mental health services.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client's intoxication or withdrawal symptoms/risks can be managed at this level of care.

Dimension 2: Biomedical Conditions

None or very stable– Any biomedical conditions are stable or are being actively addressed and will not interfere with interventions at this level of care.

Dimension 3: Psychiatric and Cognitive Conditions

None or very stable - Any emotional, behavioral, or cognitive conditions or complications are being addressed through appropriate mental health services and will not interfere with interventions at this level of service.

Dimension 4: Substance Use-Related Risks

Needs understanding of, or skills to change current use patterns. The situation is characterized by one of the following:

a. The client does not understand the need to alter the current pattern of use of substances to prevent further harm related to such use; or

b. The client needs to acquire the specific skills needed to change his/her current pattern of use.

Dimension 5: Recovery Environment Interactions

Social support system or significant others increase risk for personal conflict about alcohol/drug use. The client's living environment is characterized by one of the following:

a. The social support system is composed primarily of individuals whose substance use patterns prevent them from meeting social, work, school, or family obligations; or

b. Family members currently are abusing substances, increasing the client's risk for substance related disorder; or

c. Significant others express values concerning alcohol or other drug use that create significant conflict for the client; or

d. Significant others condone or encourage inappropriate use of alcohol or other drugs.

Dimension 6: Person-Centered Considerations

Willing to understand how current use may affect personal goals – The client expresses a willingness to gain an understanding of how his/her current use of alcohol and /or other drugs may interfere with meeting responsibilities and achieving personal goals.

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is at risk of substance abuse
- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with Psychiatric and Cognitive Conditions to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to



- treatment for involuntary admissions pursuant to Florida Statutes, Chapter 397
- 6. The individual's recovery environment is such that treatment at this level of care is not recommended
- 7. The individual refuses agreement to follow program structure/rules to such a degree as to render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

Meets ASAM continued stay criteria as outlined below:

The client remains stable in Dimensions 1, 2, and 3, and meets the criteria in at least one of Dimensions 4, 5, or 6.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Client is free from intoxication or withdrawal symptoms/risks.

Dimension 2: Biomedical Conditions

None or very stable – Any biomedical conditions are stable or are being actively addressed and will not interfere with interventions at this level of care.

Dimension 3: Psychiatric and Cognitive Conditions

None or very stable - Any emotional, behavioral, or cognitive conditions or complications are stable or are being actively addressed and will not interfere with interventions at this level of service.

Dimension 4: Substance Use-Related Risks

The client demonstrates an understanding of the detrimental aspects of his/her alcohol and/or drug use pattern but does not yet demonstrate the skills necessary to change those patterns.

Dimension 5: Recovery Environment Interactions

The client's living environment is characterized by one of the following:

a. Problem aspects of the environment remain, but the client is acquiring the skills needed to cope with them; or b. Significant others who have documented problems with alcohol or other drug use are receiving help for their

problems, which have not yet stabilized.

Dimension 6: Person-Centered Considerations

Willing to understand how current use may affect personal goals – The client continues to express a willingness to gain an understanding of how his/her current use of alcohol and /or other drugs may interfere with meeting responsibilities and achieving personal goals.

DISCHARGE CRITERIA

Meets ASAM discharge criteria as outlined below:

Discharge from this level of service requires that the client meet the criteria in one of the six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. The client is free from intoxication or withdrawal symptoms/risks; or

b. The client exhibits severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions, if any, have diminished or stabilized and the client **does not meet any of the continued stay criteria** in this or another dimension that indicates the need for transfer to another level of care; or

b. The client's condition precludes continued participation in this level of care and requires transfer to another level of care.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's emotional, behavioral or cognitive conditions, if any, have diminished or stabilized and the client **does not meet any of the continued stay criteria** in this or another dimension that indicates the need for transfer to another level of care; or



b. The client's mental health conditions (e.g., anxiety, guilt, or thought disorders) are stable and related to substance use or to a co-occurring emotional, behavioral, or cognitive condition. Mental health monitoring is needed to maintain this stability (e.g., fluctuations in mood recently stabilized with medication, substance induced depression reduced and still significant or a client with schizophrenic disorder released recently from the hospital); or

c. The client's condition precludes continued participation in this level of care and requires transfer to another level of care; or

d. The client is assessed as not posing a risk of harm to self or others and is not vulnerable to victimization by others.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client has demonstrated the personal skills necessary to make responsible choices about alcohol/other drug use, and **does not meet any other criteria indicating the need for continued service** at this level of care; or

b. The client has not integrated the skills necessary to avoid harmful or inappropriate substance use, despite professional interventions, and a recommendation is being made for further assessment and follow-up.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. The client has resolved problems in his/her living environment or demonstrates the needed coping skills necessary to achieve personal goals and **does not meet any other criteria indicating a need for continued service** at this level of care; or

b. The client is no longer willing to examine problems in his/her living environment, despite program efforts.

Since these problems persist, a recommendation is being made for appropriate living and support services. **Dimension 6: Person-Centered Considerations**

The client's status in this dimension is characterized by one of the following:

a. The client has remained stable in Dimension 6 and does not meet any other criteria that indicates the need for continued service at this level of care; or

b. The client no longer is willing to examine personal substance use patterns, despite program efforts, and a recommendation is being made for further assessment and follow-up.



SUBSTANCE ABUSE OUTPATIENT: ADOLESCENT

Outpatient treatment provides individual, group, or family counseling for clients by appointment during scheduled operating hours, with an emphasis on assessment and treatment of substance abuse and related problems.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

Meets ASAM-PPC-2 admission criteria for this level of care:

Meets criteria in all six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client's intoxication or withdrawal risks symptoms/risks can be managed at this level of care.

Dimension 2: Biomedical Conditions

None or very stable - The client's biomedical conditions, if any, are stable enough to participate in outpatient treatment.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in Dimension 3 is characterized by all of the following:

a. *Dangerousness/Lethality*: The client is assessed as not posing a risk of harm to self or others. He or she has adequate impulse control to deal with any thoughts of harm or self or others.

b. Interference with Addiction Recovery Efforts: The client's emotional concerns relate to negative consequences and effects of addiction, and he or she is able to view them as part of addiction and recovery. Emotional, behavioral or cognitive symptoms, if present, appear to be related to substance-related problems rather than to a co-occurring psychiatric, emotional or behavioral condition. If they are related to such a condition, appropriate additional psychiatric services are provided concurrent with the Level I treatment. The client's mental status does not preclude his or her ability to: [1] understand the materials presented; [2] participate in the treatment process.

c. *Social Functioning*: The client's relationships or spheres of social functioning are impaired but not endangered by substance use. The client is able to meet personal responsibilities and to maintain stable, meaningful relationships despite the mild symptoms experienced.

d. *Ability for Self-Care*: The client has adequate resources and skills to cope with emotional, behavioral or cognitive problems, with some assistance. He or she has the support of a stable environment and is able to manage the activities of daily living.

e. *Course of Illness*: The client has only mild signs and symptoms. Any acute problems have been well stabilized, and chronic problems are not serious enough to pose a high risk of vulnerability.

Dimension 4: Substance Use-Related Risks

Able to maintain abstinence and pursue treatment goals with minimal support – The client is willing to consider maintaining abstinence and recovery goals with support and scheduled therapeutic contact.

Dimension 5: Recovery Environment Interactions

The situation is characterized by one of the following:

a. A sufficiently supportive psychosocial environment makes outpatient treatment feasible; or

b. Although the client does not have an ideal primary or social support system to assist with immediate sobriety, he/she has demonstrated motivation and willingness to obtain such a support system; or

c. Family and significant others are supportive but require professional interventions to improve the client's chance of treatment success and recovery. This may involve assistance in limit setting, communication skills, a reduction in rescuing behaviors, etc.



Dimension 6: Person-Centered Considerations

Willing to cooperate but needs motivating and monitoring – The situation is characterized by one of the following:

a. The client expresses willingness to cooperate with the treatment plan and attend all scheduled activities; or b. The client admits to having a substance abuse problem but requires monitoring and motivating strategies.

However, a structured residential program is not required; or

c. The client who has a co-occurring mental and substance-related disorder is able to acknowledge one of the diagnosis' but is resistant to the other; or

d. The client is responsive to minimal external motivation (e.g., requests by parents and/or requirements of the school system).

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances
- 3. The individual has medical impairments/conditions that would make treatment at this level of care ineffective/unsafe
- 4. The individual presents with emotional, behavioral, or cognitive conditions and complications to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admissions pursuant to Florida Statutes, Chapter 397
- 6. The individual's recovery environment is such that treatment at this level of care is not recommended
- 7. The individual/caregiver refuses agreement to follow program structure/rules to such a degree to render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

Meets ASAM PPC-2 continued stay criteria for this level of care:

Continued service at this level of care requires meeting criteria in Dimensions 1 and 2, and one of Dimensions 3, 4, 5 or 6

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Client is free from intoxication or withdrawal symptoms/risks.

Dimension 2: Biomedical Conditions

None or very stable - The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions are stable enough to continue to participate in outpatient treatment; or b. An intervening problem interrupted treatment but has been resolved enough for the client to progress in treatment.

Dimension 3: Psychiatric and Cognitive Conditions

None or very stable - The client's status in this dimension is characterized by one of the following:

a. The client is making progress to reduce anxiety, guilt, and/or depression, if present, but these symptoms have not been sufficiently resolved to permit discharge from treatment; or

b. An intervening emotional, behavioral, or cognitive condition interrupted treatment but, with stabilization, the client again is progressing in treatment.

Dimension 4: Substance Use-Related Risks

Able to maintain abstinence and pursue treatment goals with minimal support. The client, while not using alcohol and/or drugs remains mentally preoccupied with such use to the extent he/she is unable to address primary relationships, social matters or school tasks; however, there are indications with continued treatment, and the client will effectively address these issues.

Dimension 5: Recovery Environment Interactions

Supportive recovery environment and/or client has skills to cope - The social environment remains non-



supportive or has deteriorated, but the client is making sufficient progress in learning social and related coping skills to function in the environment without using substances.

Dimension 6: Person-Centered Considerations

Willing to cooperate but needs motivating and monitoring - The client continues to work on treatment goals and objectives but does not understand or accept his/her addiction sufficiently to maintain a self-directed treatment plan.

DISCHARGE CRITERIA

Meets ASAM PPC-2 discharge criteria for this level of care:

Meets criteria in one of the six dimensions unless discharged for lack of diagnostic criteria.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client exhibits symptoms of severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions, if any, have diminished or stabilized to the extent they can be managed through outpatient appointments at the client's discretion, and the client **does not meet any of the continued stay criteria** in this or another dimension that indicates the need for further treatment in ASAM Level I; or

b. The client has a biomedical condition that is interfering with treatment and that requires treatment in another setting.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's emotional, behavioral, or cognitive conditions, if any, have diminished or stabilized to the extent they can be managed through outpatient appointments at the client's discretion, and the client **does not meet any of the continued stay criteria** in this or another dimension that indicates the need for further treatment in ASAM Level I; or

b. The client has a psychiatric or emotional, behavioral, or cognitive condition that is interfering with addiction treatment and that requires treatment in another setting.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client's therapeutic gains in addressing craving and relapse issues have been internalized and integrated so the client **does not meet any of the ASAM Level I continued stay criteria** in this or another dimension that indicates the need for further treatment in ASAM Level I; or

b. The client is experiencing a worsening of drug-seeking behaviors or craving, requiring treatment in a more intensive level of care.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. The client's social system and significant others are supportive of recovery to an extent that the client can adhere to a self-directed treatment plan without substantial risk of relapse/continued use and the client **does not meet any of the continued stay criteria** in this or another dimension that indicates the need for further treatment at ASAM Level I; or

b. The client is functioning adequately in assessed areas of deficiency in life tasks including school, work, social functioning or primary relationships and the client **does not meet any of the continued stay criteria** in this or another dimension that indicates the need for further treatment at ASAM Level I; or

c. The client's social system remains non-supportive or has deteriorated. The client is having difficulty in coping with this environment and is at substantial risk of relapse and requires placement in a more intensive level of care.



Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client's awareness and acceptance of his/her addiction problem and commitment to recovery is sufficient to expect maintenance of a self-directed aftercare plan, based on the following evidence. 1) the client recognizes the severity of the substance abuse problem; 2) the client has an understanding of the self-defeating relationship with substances; 3) the client is applying the skills necessary to maintain sobriety in a mutual self-help group and/or with post-treatment support care; and 4) the client **does not meet any of the continued stay**

criteria in this or another dimension that indicates the need for further treatment in ASAM Level I; or b. The client is experiencing escalation in drug seeking behaviors or craving that necessitates treatment in a more intensive level of care.



SUBSTANCE ABUSE OUTPATIENT: Adult

Outpatient treatment services are those individualized treatment services that are offered in an office, clinic, the individual's home, or other appropriate locations. Outpatient services include the provision of insight oriented, cognitive behavioral or supportive therapy to an individual or family. Services are provided for the maximum reduction of the individual's substance abuse/dependence and restoration to the best possible functional level, with an emphasis on assessment and treatment of the substance abuse and related problems. Outpatient services are expected to improve the individual's condition or prevent further regression. Services include but are not limited to group, individual, family and psycho-educational sessions. Frequency and length of services will vary according to the individual needs of the recipient as outlined on the treatment plan, but should take into account the age, developmental level and the level of functioning of the individual.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

- 1. Evidence of substance abuse/dependence
 - A. Member has been assessed by a trained professional(s) and
 - B. Symtomology meets criteria for ICD-10 substance abuse diagnosis and
- 2. There is reasonable expectation that the individual will be able to respond to intervention at this level of care and
- 3. Must meet ASAM Admission criteria for level I adult outpatient as outlined below:
- ASAM Requirements Meets criteria in all six dimensions.

• Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

- a. Client is free from intoxication or withdrawal symptoms/risks; or
- b. The client's intoxication or withdrawal symptoms/risks can be managed at this level of care.

• Dimension 2: Biomedical Conditions

None or very stable - The client's biomedical conditions, if any, are stable enough to participate in outpatient treatment.

• Dimension 3: Psychiatric and Cognitive Conditions

None or very stable – The situation is characterized by all of the following:

a. The client's anxiety, guilt and/or depression, if present, appear to be related to substance-related problems rather than to a coexisting psychiatric/emotional/behavioral or cognitive condition. If they are related to such a condition, appropriate care is being provided concurrent with ASAM Level I; and

b. The client's mental status does not preclude his/her ability to understand the materials presented or to participate in the treatment process; and

c. The client is assessed as not posing a risk of harm to self or others.

Dual Diagnosed Enhanced Programs

In addition to the foregoing criteria, either (a) or (b) and (c) and (d) characterize the client's status in Dimension 3.

(a) The client has a severe and persistent mental illness that impairs his or her ability to follow through consistently with mental health appointments and psychotropic medication. The client maintains the ability to access service such as assertive community treatment and intensive case management or supportive living designed to help the client remain engaged in treatment; or

(b) The client has a severe and persistent mental disorder or other emotional, behavioral or cognitive problems, or substance induced disorder; and

(c) The client's mental health functioning is such that he or she has impaired ability to: [1] understand the information presented, and [2] participate in treatment planning and the treatment process. Mental health management is required to stabilize mood, cognition, and behavior; and



(d) The client is assessed as not posing a risk of harm to self or others and is not vulnerable to victimization by another.

• Dimension 4: Substance Use-Related Risks

Able to maintain abstinence and pursue recovery goals with minimal support – The client is assessed as being able to achieve or maintain abstinence and recovery goals only with support and scheduled counseling to assist in dealing with issues that include mental preoccupation with alcohol or other drugs, craving, peer pressure, lifestyle, attitude changes and other treatment plans issues.

Dual Diagnosed Enhanced Programs

In addition to the criteria listed above, the client is assessed as able to achieve or maintain mental health functioning and related goals only with support and scheduled therapeutic contact to assist him or her in dealing with issues that include (but are not limited to) impulses to harm self or others and difficulty in coping with his or her affects, impulses or cognition.

• Dimension 5: Recovery Environment Interactions

The situation is characterized by one of the following:

a. A sufficiently supportive psychosocial environment makes outpatient treatment feasible; or

b. Although the client does not have an ideal primary or social support system to assist with sobriety, he or she has demonstrated motivation and willingness to obtain such a support system; or

c. Family and significant others are supportive but require professional interventions to improve the client's chance of treatment success and recovery.

Dual Diagnosed Enhanced Programs

In addition to the criteria listed above, (a) or (b) or (c) characterizes the client's status in Dimension 5.

a. The client does not have an adequate primary or social support system and has mild impairment in his or her ability to obtain a support system; or

b. The family guardian or significant others require active family therapy or systems interventions to improve the client's chances of treatment success and recovery; or

c. The client's status in Dimension 5is characterized by all of the following: (1) the client has a severe and persistent mental disorder or emotional, behavioral, or cognitive problem, and (2) the client does not have an adequate family or social support system, and (3) the client is chronically impaired, however, not in imminent danger, had limited ability to establish a supportive recovery environment. (The client, however, does not have access to intensive outreach and case management services that can provide structure and allow him or her to work toward stabilizing both the substance and mental health related disorders). The client does, however, have access to intensive outreach and case management services that can provide structure and allow them to work toward stabilizing both the substance related and mental disorders.

Dimension 6: Person-Centered Considerations

The situation is characterized by (a) and (b) or (c) or (d):

a. The client wants to adhere to the treatment plan and attend all scheduled activities; and

b. The client admits to a substance abuse and/or a mental health problem but requires monitoring and motivating strategies. A structured residential program is not required; or

c. The client is ambivalent about or does not recognize that he or she has a substance related and/or mental health problem; or

d. The client may not recognize that they have a substance-related and/or mental health problem. They may require monitoring and motivating strategies to engage in treatment and to progress through the stages of change.

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances



- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with emotional, behavioral, or cognitive conditions and complications to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admissions pursuant to Florida Statutes, Chapter 397
- 6. The individual's recovery environment is such that treatment at this level of care is not recommended
- 7. The individual refuses agreement to follow program structure/rules to such a degree as to render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

- 1. The individual's needs can not be better met by either a higher or lesser level of care
- 2. Services are individualized and directly related to the treatment plan goals and the individual's long-term goals for residential, work/education and other life domains
- 3. Treatment planning is individualized with specific, measurable, and timed goals and objectives
- 4. Services delivered are supported by clinical and research data to have the expectation of improving the individual's symptoms
- 5. Need for continued intervention at this level of service is required to address lack of progress toward treatment goals or although progress is evident, specified goals of treatment have not yet been met
- 6. A comprehensive discharge plan has been developed that includes specific, behavioral, and timed discharge criteria
- 7. Care is provided in a clinically sound manner
- 8. Referral is made as appropriate for psychiatric evaluation and medication management
- 9. Continued intervention at this level of care is necessary to alleviate identified problems
- 10. Continued intervention at this level of care is required to maintain the individual so that the risk of needing a higher level of service is reduced
- 11. Individual/caregiver is provided information and education regarding the individual's substance abuse/dependence and related issues and the means to cope with this in the home environment
- 12. Meets ASAM continued stay criteria for level 1 adult outpatient as defined below:

ASAM Requirements Meets criteria in Dimensions 1 and 2 and one of Dimensions 3, 4, 5 or 6.

• Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Client is free from intoxication or withdrawal symptoms/risks.

• Dimension 2: Biomedical Conditions

None or very stable - The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions are stable enough to continue to participate in outpatient treatment; or

b. An intervening problem interrupted treatment but is now stable enough for the client to progress in treatment

• Dimension 3: Psychiatric and Cognitive Conditions

None or very stable - The client's status in this dimension is characterized by one of the following:

a. The client is making progress to reduce anxiety, guilt, or depression, if present, but these symptoms have not been sufficiently resolved to permit discharge from treatment; or

b. An intervening emotional, behavioral, or cognitive condition interrupted treatment but is now stable enough for the client to progress in treatment.

Dimension 4: Substance Use-Related Risks

Able to maintain abstinence and pursue recovery goals with minimal support as characterized by one of the following:

a. Client is not using alcohol or other drugs but remains mentally preoccupied with such use to the extent he/she is unable to address primary relationships, social or work tasks; however, there are indications that with continued treatment, the client will effectively address these issues; or



b. Client is not using alcohol or drugs and demonstrates minimal craving but requires continued work on the development of an alternative lifestyle, thinking patterns and emotional responses; however, the client is making progress toward these goals.

Dimension 5: Recovery Environment Interactions

Supportive recovery environment and/or client has skills to cope – The social environment remains nonsupportive or has deteriorated, but the client is making sufficient progress in learning social and related coping skills to function in the environment without using substances.

Dimension 6: Person-Centered Considerations

Willing to cooperate but needs motivating and monitoring strategies - The client continues to work on treatment goals and objectives but does not yet understand or accept his/her addiction sufficiently to maintain a self-directed recovery plan.

DISCHARGE CRITERIA

Discharge occurs when any one of the following criteria is met **and** there is no evidence that the individual is at risk for hospitalization, rehospitalization, or readmission to other acute levels of care.

- 1. Admission criteria for outpatient treatment services no longer met
- 2. Admission criteria for a lower level of care are met and is available/accessible
- 3. Admission criteria for a more acute level of care are met
- 4. Consent for treatment is withdrawn (unless there is a court commitment)
- 5. Level of functioning shows improvement
- 6. No reported assaultive or destructive behavior
- 7. The individual demonstrates the ability to maintain stability
- 8. Support systems are available that allow for a termination of services or for referral to a lower level of care
- 9. Maximum therapeutic progress has been achieved
- 10. Treatment goals and objectives have been met to a significant degree
- 11. The individual is not meeting treatment goals as outlined on the treatment plan, and there is no reasonable expectation of progress at the outpatient level of care
- 13. Physical condition is such that individual is unable to participate in outpatient services
- 14. The individual/family refuses to participate in treatment to such a degree that that continued treatment at this level of care is ineffective and/or unsafe. Documentation of attempts to address this issue is found in the medical record
- 15. The individual refuses to follow program rules and regulations to such a degree that continued treatment at this level of care is ineffective and/or unsafe
- 16. Meets discharge criteria as indicated on ASAM for level 1 adult outpatient as indicated below:

Meets criteria in one of the six dimensions unless discharged for lack of diagnostic criteria.

• Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client exhibits symptoms of severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

• Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions, if any, have diminished or stabilized to the extent they can be managed through outpatient appointments at the client's discretion, and the client **does not meet any of the continued stay criteria** in this or another dimension that indicates the need for further treatment in ASAM Level I; or

b. The client has a biomedical condition that is interfering with addiction treatment and that requires treatment in



another setting.

• Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's emotional, behavioral, or cognitive conditions, if any, have diminished or stabilized to the extent they can be managed through outpatient appointments at the client's discretion, and the client **does not meet any of the continued stay criteria** in this or another dimension that indicates the need for further treatment in ASAM Level I; or

b. The client has an emotional, behavioral, or cognitive condition that is interfering with treatment and that requires additional treatment in another setting.

• Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client's therapeutic gains in addressing craving and relapse issues have been internalized and integrated so the client **does not meet any of the ASAM Level I continued stay criteria** in this or another dimension that indicates the need for further treatment in ASAM Level I; or

b. The client is experiencing a worsening of drug-seeking behaviors or craving, requiring treatment in a more intensive level of care.

• Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. The client's social system and significant others are supportive of recovery to an extent that the client can follow a self-directed treatment plan without substantial risk of relapse/continued use and the client **does not meet any of the continued service criteria** in this or another dimension that indicates the need for further treatment at ASAM Level I; or

b. The client is functioning adequately in assessed life task areas of work, social functioning or primary relationships and **does not meet any of the continued service criteria** in this or another dimension that indicates the need for further treatment at ASAM Level I; or

c. The client's social system remains non-supportive or has deteriorated. The client is having difficulty coping with this environment and is at substantial risk of relapse and requires placement in a more intensive level of care.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client's awareness and acceptance of his/her addiction problem and commitment to recovery is sufficient to expect maintenance of a self-directed recovery plan, based on the following evidence: 1) the client recognizes the severity of the substance abuse problem; 2) the client has and understanding of the self-defeating relationship with substances; 3) the client is applying the skills necessary to maintain sobriety in a mutual self-help group and/or with post-treatment support care; and 4) the client **does not meet any of the continued stay criteria** in this or another dimension that indicates the need for further treatment in ASAM Level I; or

b. The client consistently has failed to achieve essential treatment objectives despite revisions to the treatment plan, to an extent that no further progress is likely to occur.



SUBSTANCE ABUSE INTENSIVE OUTPATIENT: Adolescent

Intensive outpatient is nonresidential treatment that provides structured services that may include ancillary psychiatric and medical services. Each client receives at least nine hours of services per week, including counseling.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

Meets ASAM-PPC-2 admission criteria for this level of care:

Must meet Dimension 1 and 2, and at least one of Dimensions 3, 4, 5, or 6.

Transfer criteria: Clients may be transferred to this level of care when they have met essential treatment objectives in a more intensive level and require this intensity of service provided at this level of care in at least one dimension. A client may transfer from ASAM Level I when services at that level have been insufficient to address the client's needs or when ASAM Level I has consisted of motivational interventions to prepare the client for participation in a more intensive level of care for which admission criteria are met.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized in one of the following:

- a. Client is free from intoxication or withdrawal symptoms/risks; or
- b. The client's intoxication or withdrawal symptoms/risks can be managed at this level of care.

c. The client has made a commitment to sustain treatment and to follow treatment recommendations or has

external supports that promote engagement in treatment.

Dimension 2: Biomedical Conditions

None or not a distraction from treatment and manageable in ASAM Level II. The client's status in this dimension is characterized by one of the

following:

a. The client's biomedical conditions, if any, are stable or are being concurrently addressed and will not interfere with treatment at this level of care; or

b. The client's biomedical conditions are not severe enough to warrant inpatient treatment but are sufficient to distract from recovery efforts. Such conditions require medical monitoring and/or medical management, which can be provided by the intensive outpatient program or through a concurrent arrangement with another treatment provider.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in Dimension 3 is characterize by at least one of the following:

a. *Dangerous Lethality:* The client is at mild risk of behaviors endangering self, others or property and requires frequent monitoring to assure that there is a reasonable likelihood of safety between IOP sessions. However, his or her condition is not so severe as to require daily supervision.

b. *Interference with Addiction Recovery Efforts:* The client's recovery efforts are negatively affected by an emotional, behavioral, or cognitive problem, which causes mild interference with and requires increased intensity to support treatment participation and/or compliance.

c. *Social Functioning:* The client symptoms are causing mild to moderate difficulty in social functioning, but not to such a degree that he or she is unable to manage the activities of daily living or to fulfill responsibilities at home, school, work, or community.

d. *Ability for Self-Care* The client is experiencing mild to moderate impairment in ability to manage the activities of daily living, and thus requires frequent monitoring and treatment interventions. Problems may involve poor hygiene secondary to exacerbation of a chronic mental illness. Poor self-care or lack of independent living skills in an older client who is transitioning to adulthood, or in a younger adolescent who lacks adequate family supports.

e. Course of Illness: The client's history and present situation suggest that an emotional, behavioral or cognitive



condition would become unstable without frequent monitoring and maintenance.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. There is a high likelihood of drinking or drug use without close outpatient monitoring and structured support, as indicated by the client's lack of awareness of relapse triggers, difficulty in postponing immediate gratification, and/or ambivalence/resistance to treatment; or

b. The client is assessed as being unable to interrupt his or her impulsive and self-defeating behaviors, which threaten abstinence in the absence of ongoing clinical support; or

c. Despite active participation in treatment, the client is experiencing an intensification of addiction symptoms (such as craving and drug seeking behavior) with associated moderate risk of relapse.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. Continued exposure to current job, school or living environment will make recovery unlikely, and the client has insufficient or severely limited resources or skills needed to maintain an adequate level of functioning without this level of service; or

b. The client lacks social contacts, or has inappropriate social contacts that jeopardize recovery, or has few friends or peers who do not use alcohol or other drugs. He or she also has insufficient resources or skills necessary to maintain an adequate level of functioning without the services of a

level II.I program, but is capable of maintaining an adequate level of functioning between sessions; or c. The client family is supportive of recovery but family conflicts and related family dysfunction impedes the client's ability to learn the skills necessary to achieve and maintain abstinence.

Dimension 6: Person-Centered Considerations

The client's status in Dimension 6 is characterized by (a) or (b):

a. The client requires structured therapy and a programmatic milieu to promote progress through the stages of change, as evidenced by behaviors such as the following: [1] the adolescent is verbally compliant but does not demonstrate consistent behaviors; [2] the client is only passively involved in treatment; or [3] the client demonstrates variable compliance with attendance at outpatient sessions or self- or mutual-help meetings or support groups. Such interventions are not feasible or are not likely to succeed in a level I services: or b. The client's perspective inhibits his or her ability to make progress through the stages of change. The client thus requires structured therapy and a programmatic milieu. Such interventions are not feasible or are not likely to succeed in a Level II.1 service.

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances
- 3. The individual has medical impairments/conditions that would make treatment at this level of care ineffective/unsafe
- 4. The individual presents with emotional, behavioral, or cognitive conditions and complications to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admissions pursuant to Florida Statutes, Chapter 397
- 6. The individual's recovery environment is such that treatment at this level of care is not recommended
- 7. The individual/caregiver refuses agreement to follow program structure/rules to such a degree to render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

Meets ASAM PPC-2 continued stay criteria for this level of care:



The client is sufficiently stable in Dimensions 2 and 3 to allow participation in this level of care, and the client meets the criteria in one of Dimensions 4, 5, or 6.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Client is free from intoxication or withdrawal symptoms/risks.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions or problems, if any, are stable or are being currently addressed and do not interfere with treatment; or

b. The client is responding to treatment. Biomedical conditions are not severe enough to warrant inpatient treatment, yet they distract from recovery efforts. Such problems require medical monitoring and/or medical management, which can be provided by the intensive outpatient program or through a concurrent arrangement with another treatment provider.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client continues to demonstrate recurrent impulsive behavior and/or current inability to maintain behavioral stability for more than a 72-hour period; however, the behavioral stability problem is being actively addressed in treatment, and there are indications that the client is responding to treatment interventions; or b. The client's emotional, behavioral, or cognitive disorder, which is being concurrently managed, continues to distract the client from treatment; however, the client is responding to treatment, and it is anticipated that, with further interventions, he/she will be able to achieve treatment objectives.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client recognizes and understands relapse triggers, but has not developed sufficient coping skills to interrupt or postpone gratification, or to change related to inadequate impulse-control behaviors; or

b. The client's alcohol/drug seeking behaviors, while diminishing, have not been reduced sufficiently to support functioning outside the structured milieu provided at this level of care; or

c. The client, despite active participation in treatment, is experiencing an intensification of addiction symptoms (such as craving and a return to drug seeking behaviors) and has begun to deteriorate in his/her level of functioning. However, the treatment interventions, guided by the treatment plan, have been revised to address this problem and the client is beginning to respond.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. Continuing family conflicts inhibit the development of family problem solving skills necessary to support ongoing abstinence, yet the family engaged in active treatment; or

b. The client, while actively engaged in treatment, remains minimally engaged in school or other academic/vocational endeavors: or

c. The client is involved in some non-alcoholic/ other drug-centered peer activities but still remains involved in chemically abusing peer support system; or

d. The client had not yet integrated the socialization skills necessary to establish a supportive social network. **Dimension 6: Person-Centered Considerations**

The client is beginning to recognize and understand that he/she is responsible for addressing his/her illness, but still requires ASAM Level II services and motivational strategies to sustain personal responsibility and progress in treatment.

DISCHARGE CRITERIA

Meets ASAM PPC-2 discharge criteria for this level of care:

Meets diagnostic criteria in one of the six dimensions unless discharged for lack of diagnostic criteria.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:



a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client exhibits symptoms of severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions, if any, have diminished or have been stabilized to the extent they can be managed through outpatient appointments at a less intensive level of care, and the client **does not meet any**

of the continued stay criteria indicating the need for further treatment in this or another dimension; or b. The client has a biomedical condition that is interfering with treatment that requires treatment in another setting.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's emotional, behavioral or cognitive conditions have diminished in severity to such an extent that regular monitoring of the behavior is no longer necessary, and the client **does not meet any of the continued stay criteria** for further treatment at ASAM Level II ; or

b. The client has a psychiatric, emotional, or behavioral condition that is interfering with addiction treatment and that should be addressed in another setting; or

c. The client has been unable to benefit from treatment due to the inability to function at least at the 11-year-old age level.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client's therapeutic gains in addressing craving and relapse issues have been integrated into the client's daily behavior to support an ongoing care program at a less intensive level of care, and the client **does not meet continued stay criteria** indicating the need for further treatment at ASAM Level II; or

b. The client is experiencing an intensification of drug-seeking behaviors such as craving or regular use of substances despite continued interventions, to such an extent that he/she requires treatment in a more intensive level of care.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. Problem aspects of the client's social and interpersonal environment are responding to treatment and the environment is sufficiently supportive of recovery to allow discharge or transfer to a less intensive level of care, and the client **does not meet any of the continued stay criteria** that indicate the need for further treatment at this level of care; or

b. The client's social or interpersonal environment has not changed or has deteriorated, but the client has learned skills adequate to cope with the current situation or has secured an alternative environment, and the client **does not meet continued stay criteria** that indicated the need for further treatment at this level of care; or

c. The client's support system remains non-supportive or has deteriorated and the client is having difficulty coping with this environment and is at substantial risk of reactivating his/her addiction. An alternative environment is not feasible. The client requires placement in a more intensive level of care or an alternative supportive environment.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client's no longer requires ASAM Level II intensive clinically directed motivational interventions, as evidenced by the following: 1) the client recognizes the severity of his/her substance abuse problem; and 2) the client has an understanding of his/her self-defeating relationship with substances; 3) the client is beginning to apply skills necessary to maintain recovery by accessing appropriate community supports or by continuing treatment in a less intensive level of care; and 4) the client **does not meet any of the continued stay criteria**



for ASAM Level II indicating the need for further treatment; or b. The client consistently has failed to achieve essential treatment objectives despite revisions to the treatment plan and advice concerning the consequences of continued alcohol/other drug use, to such an extent that further progress is not likely to occur.



SUBSTANCE ABUSE INTENSIVE OUTPATIENT: Adult

Intensive outpatient is nonresidential treatment that provides structured services that may include ancillary psychiatric and medical services. Each client receives at least nine hours of services per week, including counseling.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

Meets ASAM Criteria as outlined below:

Must meet Dimensions 1, 2, or 3 and one of Dimensions 4, 5, or 6.

Transfer criteria: Clients may be transferred to this level of care when they have met essential treatment objectives in a more intensive level and require this intensity of service provided at this level of care in at least one dimension. A client may transfer from ASAM Level I when services at that level have been insufficient to address the client's needs or when ASAM Level I has consisted of motivational interventions to prepare the client for participation in a more intensive level of care for which admission criteria are met.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's situation in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client's intoxication or withdrawal symptoms/risks can be managed at this level of care.

Dimension 2: Biomedical Conditions

None or not a distraction from treatment and manageable in ASAM Level II.1. The client's biomedical conditions, if any, are stable or are being concurrently addressed and will not interfere with treatment at this level of care.

Dimension 3: Psychiatric and Cognitive Conditions

Problems in Dimension 3 are not necessary for admission to a Level II.1 program. However, if any of the Dimension 3 conditions are present, the client must be admitted to either a Dual Diagnosis Capable or Dual Diagnosis Enhanced program, depending on the client's level of function, stability and degree of impairment in this dimension.

Dual Diagnosed Capable Programs

The client's status in Dimension 3 is characterized by (a) or (b):

a. The client engages in abuse of family members or significant others, and requires intensive outpatient treatment to reduce the risk of further deterioration; or

b. The client has a diagnosed emotional, behavioral, or cognitive disorder that requires intensive outpatient monitoring to minimize distractions from their treatment or recovery.

Dual Diagnosed Enhanced Programs

The client's status in Dimension 3 is characterized by (a) or (b) or (c):

a. The client has a diagnosed emotional, behavioral, or cognitive disorder that requires management because the client's history suggests a high potential for distracting him or her from treatment; such a disorder requires stabilization concurrent with addiction treatment; or

b. The client is assessed as at mild risk of behaviors endangering self, others, or property; or

c. The client is at significant risk of victimization by another. However, the risk is not severe enough to require 24-hour supervision.

Dimension 4: Substance Use-Related Risks

Despite active participation at a less intensive level of care, the client is experiencing intensification of addiction symptoms (cravings/drug seeking related behavior) and is deteriorating in his/her level of functioning despite revisions in the treatment plan.

Dual Diagnosed Enhanced Programs

The client's status in Dimension 5 is characterized by psychiatric symptoms that pose a moderate risk of



relapse to the alcohol, drug or psychiatric disorder. The client has impaired recognition or understanding of and difficulty in managing relapse issues and requires Level II.I Dual Diagnosis Enhanced Program services to maintain and adequate level of functioning.

Dimension 5: Recovery Environment Interactions

Environment not supportive, but with structure and support the client can cope. The situation is characterized by one of the following:

a. Continued exposure to current job, school or living environment will make recovery unlikely, and the client has insufficient or severely limited resources or skills needed to maintain an adequate level of functioning without this level of service: or

b. The client lacks social contacts, or has inappropriate social contacts that jeopardize recovery, or has few friends or peers who do not use alcohol/drugs. The client also has insufficient or severely limited resources or skills to maintain an adequate level of functioning without this level of service.

Dual Diagnosed Enhanced Programs

A living, working, social and/or community environment that is not supportive of good mental functioning characterizes the client status in Dimension 6. The client has insufficient resources and skills to deal with this situation.

Dimension 6: Person-Centered Considerations

Resistance high enough to require a structured program but not so high as to render outpatient treatment ineffective. – The client's status in this dimension is characterized by one of the following:

a. The client requires structured therapy and a programmatic milieu to promote treatment progress and recovery because of failure at different levels of care. Such interventions are not likely to succeed at ASAM Level I service: or

b. The client's perspective inhibits his/her ability to make behavior changes without clinically directed and repeated structured motivational interventions. Such interventions are not feasible or not likely to succeed at ASAM Level I service. The client's resistance, however, is not so high to render the treatment ineffective.

Dual Diagnosed Enhanced Programs

The client status in Dimension 6 is characterized by (a) or (b) or (c):

a. The client is reluctant to agree to treatment and is ambivalent about his or her commitment to change a cooccurring mental health problem: or

b. The client's follow through in treatment is so poor or inconsistent that Level I services are not succeeding or are not feasible: or

c. The client is assessed as requiring intensive services to improve their awareness of the need to change. The client has such limited awareness of or commitment to change that he or she cannot maintain an adequate level of functioning with out Level II.I services.

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances
- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with emotional, behavioral, or cognitive conditions and complications to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admissions pursuant to Florida Statutes, Chapter 397
- 6. The individual's recovery environment is such that treatment at this level of care is not recommended
- 7. The individual/caregiver refuses agreement to follow program structure/rules to such a degree as to render treatment at this level of care ineffective/unsafe



CONTINUED STAY CRITERIA

Meets ASAM continued stay criteria as outlined below:

The client is sufficiently stable in Dimensions 2 and 3 to allow participation in this level of care, and the client meets the criteria in one of Dimensions 4, 5, or 6.

Dimension 1: Acute Intoxication and /or Withdrawal Potential

Client is free from intoxication or withdrawal symptoms/risks.

Dimension 2: Biomedical Conditions

The client's biomedical conditions, if any, are stable or are being concurrently addressed and will not interfere with treatment at this level of care.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's risk of addiction related abuse/neglect of spouse, children or significant others is diminishing in response to treatment but is not fully resolved; or

b. The client's emotional, behavioral, or cognitive condition continues to distract the client from treatment, but the client is responding to treatment and staff anticipates that, with further interventions, the client will be able to achieve treatment objectives; or

c. The client continues to manifest mild risk behaviors endangering self, others or property, but these conditions are improving.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client recognizes and understands relapse triggers, but has not developed sufficient coping skills to interrupt or postpone gratification, or to change related to inadequate impulse-control behaviors; or

b. The client's addiction symptoms, while stabilized, have not been reduced sufficiently to support functioning outside the structured treatment provided at this level of care.

Dimension 5: Recovery Environment Interactions

The client has not integrated the socialization skills necessary to establish a supportive social network without the support of ASAM Level II.1 structured treatment.

Dimension 6: Person-Centered Considerations

The client is beginning to recognize and understand that he/she is responsible for addressing his/her illness, but still requires ASAM Level II.1 services and motivational strategies to sustain personal responsibility and progress in treatment.

DISCHARGE CRITERIA

Meets ASAM discharge criteria as outlined below:

Meets diagnostic criteria in one of Dimensions 2, 3, 4, 5, or 6 unless discharged for lack of diagnostic criteria. **Dimension 1: Intoxication, Withdrawal, and Addiction Medications**

The client's status in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client exhibits symptoms of severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions, if any, have diminished or stabilized to the extent they can be managed through outpatient appointments at the client's discretion at a less intensive level of care, and the client **does not meet any of the continued stay criteria** in this or another dimension that indicates the need for further treatment; or

b. The client has a biomedical condition that is interfering with addiction treatment and that requires treatment in another setting.

Dimension 3: Psychiatric and Cognitive Conditions



The client's status in this dimension is characterized by one of the following:

a. The client no longer requires ASAM Level II.1 clinically directed interventions, as evidenced by: 1) an assessment that the client no longer is likely to continue addiction-related abuse/neglect of spouse, children or significant others; and 2) evidence that the client's emotional, behavioral or cognitive condition has diminished in severity to such an extent that regular monitoring of the behavior is no longer necessary, and the client **does not meet any of the continued stay criteria** indicating the need for further treatment; or

b. Client has a psychiatric, emotional, behavioral, or cognitive condition that is interfering with addiction treatment and that should be addressed in another setting

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client's therapeutic gains in addressing craving and relapse issues have been significantly integrated in the client's daily behavior to support an ongoing care program at a less intensive level of care, and the client **does not meet continued stay criteria** indicating the need for further treatment; or

b. The client is experiencing a worsening of drug-seeking behaviors such as craving or return to regular use of psychoactive substances despite continued interventions, to such an extent that he/she requires treatment in a more intensive level of care.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. The client no longer requires ASAM Level II.1 clinically directed interventions, as evidenced by one of the following: 1) problem aspects of the client's social and interpersonal environment are responding to treatment and the environment is sufficiently supportive of recovery to allow discharge or transfer to a less intensive level of care; or 2) the client's social or interpersonal environment has not changed or has deteriorated, but the client has learned skills adequate to cope with the current situation or has secured an alternative environment, and the client **does not meet any of the continued stay criteria** that indicated the need for further treatment at this or another level of care; or

b. The client's social support system remains non-supportive or has deteriorated and the client is having difficulty coping with the environment and is at substantial risk of reactivating his/her addiction. An alternative environment is not feasible. The client requires this placement in a more intensive level of care.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client no longer requires ASAM Level II.1 intensive clinically directed-motivational interventions, as evidenced by the following: 1) The client recognizes the severity of his/her substance abuse problem; 2) the client has an understanding of his/herself defeating relationship with substances; and 3) the client is applying skills necessary to maintain recovery by accessing appropriate community

supports or by continuing treatment in a less intensive level of care, and the client **does not meet any of the continued stay criteria** indicating the need for further treatment; or

b. The client consistently has failed to achieve essential treatment objectives despite revisions to the treatment plan and advice concerning the consequences of continued alcohol/drug use, to such an extent that further progress is not likely to occur.



SUBSTANCE ABUSE DAY OR NIGHT TREATMENT: Adolescent

Day and Night treatment provides a nonresidential environment with a structured schedule of substance abuse treatment and rehabilitation services. Each client receives a minimum of 12 hours of services per week, at least three hours per day, to include individual counseling, group counseling, or counseling with families.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

- 1. Evidence of substance abuse/dependence
 - a. Member has been assessed by a trained professional(s) and
 - b. Symtomology meets criteria for ICD-10 substance abuse diagnosis and
- 2. There is reasonable expectation that the individual will be able to respond to intervention at this level of care and
- 3. Must meet ASAM Admission criteria for this level of care as outlined below:

Must meet Dimension 1 and 2, and at least one of Dimensions 3, 4, 5, or 6.

Transfer criteria: Clients may be transferred to this level of care when they have met essential treatment objectives in a more intensive level and require this intensity of service provided at this level of care in at least one dimension. A client may transfer from ASAM Level I when services at that level have been insufficient to address the client's needs or when ASAM Level I has consisted of motivational interventions to prepare the client for participation in a more intensive level of care for which admission criteria are met.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized in one of the following:

- a. Client is free from intoxication or withdrawal symptoms/risks; or
- b. The client's intoxication or withdrawal symptoms/risks can be managed at this level of care.
- c. The client has made a commitment to sustain treatment and to follow treatment recommendations or has external supports that promote engagement in treatment.

Dimension 2: Biomedical Conditions

None or not a distraction from treatment and manageable in ASAM Level II. The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions, if any, are stable or are being concurrently addressed and will not interfere with treatment at this level of care; or

b. The client's biomedical conditions are not severe enough to warrant inpatient treatment but are sufficient to distract from recovery efforts. Such conditions require medical monitoring and/or medical management, which can be provided by the intensive outpatient program or through a concurrent arrangement with another treatment provider.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in Dimension 3 is characterize by at least one of the following:

a. *Dangerous Lethality:* The client is at mild risk of behaviors endangering self, others or property and requires frequent monitoring to assure that there is a reasonable likelihood of safety between IOP sessions. However, his or her condition is not so severe as to require daily supervision.

b. *Interference with Addiction Recovery Efforts:* The client's recovery efforts are negatively affected by an emotional, behavioral, or cognitive problem, which causes mild interference with and requires increased intensity to support treatment participation and/or compliance.

c. *Social Functioning:* The client symptoms are causing mild to moderate difficulty in social functioning, but not to such a degree that he or she is unable to manage the activities of daily living or to fulfill responsibilities at home, school, work, or community.

d. *Ability for Self-Care* The client is experiencing mild to moderate impairment in ability to manage the activities of daily living, and thus requires frequent monitoring and treatment interventions. Problems may involve poor



hygiene secondary to exacerbation of a chronic mental illness. Poor self-care or lack of independent living skills in an older client who is transitioning to adulthood, or in a younger adolescent who lacks adequate family supports.

e. *Course of Illness:* The client's history and present situation suggest that an emotional, behavioral or cognitive condition would become unstable without frequent monitoring and maintenance.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. There is a high likelihood of drinking or drug use without close outpatient monitoring and structured support, as indicated by the client's lack of awareness of relapse triggers, difficulty in postponing immediate gratification, and/or ambivalence/resistance to treatment; or

b. The client is assessed as being unable to interrupt his or her impulsive and self-defeating behaviors, which threaten abstinence in the absence of ongoing clinical support; or

c. Despite active participation in treatment, the client is experiencing an intensification of addiction symptoms (such as craving and drug seeking behavior) with associated moderate risk of relapse.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. Continued exposure to current job, school or living environment will make recovery unlikely, and the client has insufficient or severely limited resources or skills needed to maintain an adequate level of functioning without this level of service; or

b. The client lacks social contacts, or has inappropriate social contacts that jeopardize recovery, or has few friends or peers who do not use alcohol or other drugs. He or she also has insufficient resources or skills necessary to maintain an adequate level of functioning without the services of a

level II.I program, but is capable of maintaining an adequate level of functioning between sessions; or c. The client family is supportive of recovery but family conflicts and related family dysfunction impedes the client's ability to learn the skills necessary to achieve and maintain abstinence.

Dimension 6: Person-Centered Considerations

The client's status in Dimension 6 is characterized by (a) or (b):

a. The client requires structured therapy and a programmatic milieu to promote progress through the stages of change, as evidenced by behaviors such as the following: [1] the adolescent is verbally compliant but does not demonstrate consistent behaviors; [2] the client is only passively involved in treatment; or [3] the client demonstrates variable compliance with attendance at outpatient sessions or self- or mutual-help meetings or support groups. Such interventions are not feasible or are not likely to succeed in a level I services: or b. The client's perspective inhibits his or her ability to make progress through the stages of change. The client thus requires structured therapy and a programmatic milieu. Such interventions are not feasible or are not likely to succeed in a Level II.I service.

EXCLUSION CRITERIA

1. The individual is assessed as needing a more/less intensive level of care and:

- a. Such a program is available to the individual
- b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances
- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with emotional, behavioral, or cognitive conditions and complications to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admissions pursuant to Florida Statutes, Chapter 397
- 6. The individual's recovery environment is such that treatment at this level of care is not recommended
- 7. The individual/caregiver refuses agreement to follow program structure/rules to such a degree to render



treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

Must meet ASAM continued stay criteria:

The client is sufficiently stable in Dimensions 2 and 3 to allow participation in this level of care, and the client meets the criteria in one of

Dimensions 4, 5, or 6.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Client is free from intoxication or withdrawal symptoms/risks.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions or problems, if any, are stable or are being currently addressed and do not interfere with treatment; or

b. The client is responding to treatment. Biomedical conditions are not severe enough to warrant inpatient treatment, yet they distract from recovery efforts. Such problems require medical monitoring and/or medical management, which can be provided by the intensive outpatient program or through a concurrent arrangement with another treatment provider.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client continues to demonstrate recurrent impulsive behavior and/or current inability to maintain behavioral stability for more than a 72-hour period; however, the behavioral stability problem is being actively addressed in treatment, and there are indications that the client is responding to treatment interventions; or b. The client's emotional, behavioral, or cognitive disorder, which is being concurrently managed, continues to distract the client from treatment; however, the client is responding to treatment, and it is anticipated that, with further interventions, he/she will be able to achieve treatment objectives.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client recognizes and understands relapse triggers, but has not developed sufficient coping skills to interrupt or postpone gratification, or to change related to inadequate impulse-control behaviors; or

b. The client's alcohol/drug seeking behaviors, while diminishing, have not been reduced sufficiently to support functioning outside the structured milieu provided at this level of care; or

c. The client, despite active participation in treatment, is experiencing an intensification of addiction symptoms (such as craving and a return to drug seeking behaviors) and has begun to deteriorate in his/her level of functioning. However, the treatment interventions, guided by the treatment plan, have been revised to address this problem and the client is beginning to respond.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. Continuing family conflicts inhibit the development of family problem solving skills necessary to support ongoing abstinence, yet the family engaged in active treatment; or

b. The client, while actively engaged in treatment, remains minimally engaged in school or other academic/vocational endeavors; or

c. The client is involved in some non-alcoholic/ other drug-centered peer activities but still remains involved in chemically abusing peer support system; or

d. The client had not yet integrated the socialization skills necessary to establish a supportive social network. **Dimension 6: Person-Centered Considerations**

The client is beginning to recognize and understand that he/she is responsible for addressing his/her illness, but still requires ASAM Level II services and motivational strategies to sustain personal responsibility and progress in treatment.

DISCHARGE CRITERIA



Must meet ASAM discharge criteria for this level of care:

Meets diagnostic criteria in one of the six dimensions unless discharged for lack of diagnostic criteria.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client exhibits symptoms of severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions, if any, have diminished or have been stabilized to the extent they can be managed through outpatient appointments at a less intensive level of care, and the client **does not meet any**

of the continued stay criteria indicating the need for further treatment in this or another dimension; or b. The client has a biomedical condition that is interfering with treatment that requires treatment in another setting.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's emotional, behavioral or cognitive conditions have diminished in severity to such an extent that regular monitoring of the behavior is no longer necessary, and the client **does not meet any of the continued stay criteria** for further treatment at ASAM Level II ; or

b. The client has a psychiatric, emotional or behavioral condition that is interfering with addiction treatment and that should be addressed in another setting; or

c. The client has been unable to benefit from treatment due to the inability to function at least at the 11-year-old age level.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client's therapeutic gains in addressing craving and relapse issues have been integrated into the client's daily behavior to support an ongoing care program at a less intensive level of care, and the client **does not meet continued stay criteria** indicating the need for further treatment at ASAM Level II; or

b. The client is experiencing an intensification of drug-seeking behaviors such as craving or regular use of substances despite continued interventions, to such an extent that he/she requires treatment in a more intensive level of care.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. Problem aspects of the client's social and interpersonal environment are responding to treatment and the environment is sufficiently supportive of recovery to allow discharge or transfer to a less intensive level of care, and the client **does not meet any of the continued stay criteria** that indicate the need for further treatment at this level of care; or

b. The client's social or interpersonal environment has not changed or has deteriorated, but the client has learned skills adequate to cope with the current situation or has secured an alternative environment, and the client **does not meet continued stay criteria** that indicated the need

for further treatment at this level of care; or

c. The client's support system remains non-supportive or has deteriorated and the client is having difficulty coping with this environment and is at substantial risk of reactivating his/her addiction. An alternative environment is not feasible. The client requires placement in a more intensive level of care or an alternative supportive environment.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client's no longer requires ASAM Level II intensive clinically directed motivational interventions, as



evidenced by the following: 1) the client recognizes the severity of his/her substance abuse problem; and 2) the client has an understanding of his/her self-defeating relationship with substances; 3) the client is beginning to apply skills necessary to maintain recovery by accessing appropriate community supports or by continuing treatment in a less intensive level of care; and 4) the client **does not meet any of the continued stay criteria** for ASAM Level II indicating the need for further treatment; or

b. The client consistently has failed to achieve essential treatment objectives despite revisions to the treatment plan and advice concerning the consequences of continued alcohol/other drug use, to such an extent that further progress is not likely to occur.



SUBSTANCE ABUSE DAY OR NIGHT TREATMENT: Adult

Day and Night treatment provides a nonresidential environment with a structured schedule of substance abuse treatment and rehabilitation services. Each client receives a minimum of 12 hours of services per week, at least three hours per day, to include individual counseling, group counseling, or counseling with families.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

- 1. Evidence of substance abuse/dependence
 - a. Member has been assessed by a trained professional(s) and
 - b. Symtomology meets criteria for ICD-10 substance abuse diagnosis and
- 2. There is reasonable expectation that the individual will be able to respond to intervention at this level of care and
- 3. Must meet ASAM Admission criteria for this level of care as outlined below:

Must meet Dimensions 1, 2, or 3 and one of Dimensions 4, 5, or 6.

Transfer criteria: Clients may be transferred to this level of care when they have met essential treatment objectives in a more intensive level and require this intensity of service provided at this level of care in at least one dimension. A client may transfer from ASAM Level I when services at that level have been insufficient to address the client's needs or when ASAM Level I has consisted of motivational interventions to prepare the client for participation in a more intensive level of care for which admission criteria are met.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's situation in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client's intoxication or withdrawal symptoms/risks can be managed at this level of care.

Dimension 2: Biomedical Conditions

None or not a distraction from treatment and manageable in ASAM Level II.1. The client's biomedical conditions, if any, are stable or are being concurrently addressed and will not interfere with treatment at this level of care.

Dimension 3: Psychiatric and Cognitive Conditions

Problems in Dimension 3 are not necessary for admission to a Level II.1 program. However, if any of the Dimension 3 conditions are present, the client must be admitted to either a Dual Diagnosis Capable or Dual Diagnosis Enhanced program, depending on the client's level of function, stability, and degree of impairment in this dimension.

Dual Diagnosed Capable Programs

The client's status in Dimension 3 is characterized by (a) or (b):

a. The client engages in abuse of family members or significant others, and requires intensive outpatient treatment to reduce the risk of further deterioration; or

b. The client has a diagnosed emotional, behavioral, or cognitive disorder that requires intensive outpatient monitoring to minimize distractions from their treatment or recovery.

Dual Diagnosed Enhanced Programs

The client's status in Dimension 3 is characterized by (a) or (b) or (c):

a. The client has a diagnosed emotional, behavioral, or cognitive disorder that requires management because the client's history suggests a high potential for distracting him or her from treatment; such a disorder requires stabilization concurrent with addiction treatment; or

b. The client is assessed as at mild risk of behaviors endangering self, others or property; or

c. The client is at significant risk of victimization by another. However, the risk is not severe enough to require 24-hour supervision.

Dimension 5: Recovery Environment Interactions



Environment not supportive, but with structure and support the client can cope. The situation is characterized by one of the following:

a. Continued exposure to current job, school or living environment will make recovery unlikely, and the client has insufficient or severely limited resources or skills needed to maintain an adequate level of functioning without this level of service; or

b. The client lacks social contacts, or has inappropriate social contacts that jeopardize recovery, or has few friends or peers who do not use alcohol/drugs. The client also has insufficient or severely limited resources or skills to maintain an adequate level of functioning without this level of service.

Dual Diagnosed Enhanced Programs

A living, working, social and/or community environment that is not supportive of good mental functioning characterizes the client status in Dimension 5. The client has insufficient resources and skills to deal with this situation.

Dimension 6: Person-Centered Considerations

Resistance high enough to require a structured program but not so high as to render outpatient treatment ineffective. – The client's status in this dimension is characterized by one of the following:

a. The client requires structured therapy and a programmatic milieu to promote treatment progress and recovery because of failure at different levels of care. Such interventions are not likely to succeed at ASAM Level I service; or

b. The client's perspective inhibits his/her ability to make behavior changes without clinically directed and repeated structured motivational interventions. Such interventions are not feasible or not likely to succeed at ASAM Level I service. The client's resistance, however, is not so high to render the treatment ineffective.

Dual Diagnosed Enhanced Programs

The client status in Dimension 6 is characterized by (a) or (b) or (c):

a. The client is reluctant to agree to treatment and is ambivalent about his or her commitment to change a cooccurring mental health problem; or

b. The client's follow through in treatment is so poor or inconsistent that Level I services are not succeeding or are not feasible: or

c. The client is assessed as requiring intensive services to improve their awareness of the need to change. The client has such limited awareness of or commitment to change that he or she cannot maintain an adequate level of functioning with out Level II.I services.

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances
- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with Psychiatric and Cognitive Conditions to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admissions, pursuant to Florida Statutes, Chapter 397
- 6. The individual's recovery environment is such that treatment at this level of care is not recommended
- 7. The individual refuses agreement to follow program structure/rules to such a degree as to render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

Meets criteria for ASAM continued stay at this level of care.

The client is sufficiently stable in Dimensions 2 and 3 to allow participation in this level of care, and the client



meets the criteria in one of Dimensions 4, 5, or 6.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Client is free from intoxication or withdrawal symptoms/risks.

Dimension 2: Biomedical Conditions

The client's biomedical conditions, if any, are stable or are being concurrently addressed and will not interfere with treatment at this level of care.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's risk of addiction related abuse/neglect of spouse, children or significant others is diminishing in response to treatment but is not fully resolved; or

b. The client's emotional, behavioral, or cognitive condition continues to distract the client from treatment, but the client is responding to treatment and staff anticipates that, with further interventions, the client will be able to achieve treatment objectives; or

c. The client continues to manifest mild risk behaviors endangering self, others, or property, but these conditions are improving.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client recognizes and understands relapse triggers, but has not developed sufficient coping skills to interrupt or postpone gratification, or to change related to inadequate impulse-control behaviors; or

b. The client's addiction symptoms, while stabilized, have not been reduced sufficiently to support functioning outside the structured treatment provided at this level of care.

Dimension 5: Recovery Environment Interactions

The client has not integrated the socialization skills necessary to establish a supportive social network without the support of ASAM Level II.1 structured treatment.

Dimension 6: Person-Centered Considerations

The client is beginning to recognize and understand that he/she is responsible for addressing his/her illness, but still requires ASAM Level II.1 services and motivational strategies to sustain personal responsibility and progress in treatment.

DISCHARGE CRITERIA

Meets ASAM discharge criteria for this level of care.

Meets diagnostic criteria in one of Dimensions 2, 3, 4, 5, or 6 unless discharged for lack of diagnostic criteria. **Dimension 1: Intoxication, Withdrawal, and Addiction Medications**

The client's status in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client exhibits symptoms of severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions, if any, have diminished or stabilized to the extent they can be managed through outpatient appointments at the client's discretion at a less intensive level of care, and the client **does not meet any of the continued stay criteria** in this or another dimension that indicates the need for further treatment; or

b. The client has a biomedical condition that is interfering with addiction treatment and that requires treatment in another setting.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client no longer requires ASAM Level II.1 clinically directed interventions, as evidenced by: 1) an



assessment that the client no longer is likely to continue addiction-related abuse/neglect of spouse, children or significant others; and 2) evidence that the client's emotional, behavioral or cognitive condition has diminished in severity to such an extent that regular monitoring of the behavior is no longer necessary, and the client **does not meet any of the continued stay criteria** indicating the need for further treatment; or

b. Client has a psychiatric, emotional, behavioral, or cognitive condition that is interfering with addiction treatment and that should be addressed in another setting

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client's therapeutic gains in addressing craving and relapse issues have been significantly integrated in the client's daily behavior to support an ongoing care program at a less intensive level of care, and the client **does not meet continued stay criteria** indicating the need for further treatment; or

b. The client is experiencing a worsening of drug-seeking behaviors such as craving or return to regular use of psychoactive substances despite continued interventions, to such an extent that he/she requires treatment in a more intensive level of care.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. The client no longer requires ASAM Level II.1 clinically directed interventions, as evidenced by one of the following: 1) problem aspects of the client's social and interpersonal environment are responding to treatment and the environment is sufficiently supportive of recovery to allow discharge or transfer to a less intensive level of care; or 2) the client's social or interpersonal environment has not changed or has deteriorated, but the client has learned skills adequate to cope with the current situation or has secured an alternative environment, and the client **does not meet any of the continued stay criteria** that indicated the need for further treatment at this or another level of care; or

b. The client's social support system remains non-supportive or has deteriorated and the client is having difficulty coping with the environment and is at substantial risk of reactivating his/her addiction. An alternative environment is not feasible. The client requires this placement in a more intensive level of care.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client no longer requires ASAM Level II.1 intensive clinically directed-motivational interventions, as evidenced by the following: 1) The client recognizes the severity of his/her substance abuse problem; 2) the client has an understanding of his/herself defeating relationship with substances; and 3) the client is applying skills necessary to maintain recovery by accessing appropriate community

supports or by continuing treatment in a less intensive level of care, and the client **does not meet any of the continued stay criteria** indicating the need for further treatment; or

b. The client consistently has failed to achieve essential treatment objectives despite revisions to the treatment plan and advice concerning the consequences of continued alcohol/drug use, to such an extent that further progress is not likely to occur.



SUBSTANCE ABUSE RESIDENTIAL TREATMENT LEVEL 1: Adult

Residential treatment provides a structured, live-in environment within a non-hospital setting on a 24-hours-aday, 7-days per week basis. Level 1 programs provide services on a short-term basis. This level is appropriate for persons who have sub-acute biomedical problems or behavioral, emotional, or cognitive problems that are severe enough that they require inpatient treatment, but do not need the full resources of an acute care general hospital or a medically managed inpatient treatment program. Typically, individuals have a job and a home to support their recovery upon completion of this level of care. The emphasis is on an intensive regimen of clinical services using a multidisciplinary team approach. Services may include some medical services based on the needs of the client.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

Meets ASAM PPC-2 admission criteria for this level of care as outlined below:

Client meets criteria of at least two of the six dimensions, at least one of which is in dimension 1, 2 or 3.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by (a) or (b):

a. The client is experiencing signs and symptoms of severe withdrawal, or there is evidence that a severe withdrawal syndrome is imminent and is assessed as manageable at this level of service; or

b. There is a strong likelihood that the client will not complete detoxification at another level of care and enter into continuing treatment or self-help recovery.

Dimension 2: Biomedical Conditions

Client requires medical monitoring but not intensive treatment - The client's status in this dimension is characterized by one of the following:

a. Continued substance use places the client in imminent danger of serious damage to physical health or concomitant biomedical conditions: or

b. A concurrent biomedical illness requires monitoring available in this level of care.

Biomedical Enhanced Services

The client who has a biomedical problem that requires a degree of staff attention that is not available in other Level III.7 programs are in need of Biomedical Enhanced services.

Dimension 3: Psychiatric and Cognitive Conditions

Problems in dimension three are not necessary for admission, however, *if any* of the dimension three conditions are present the resident must be admitted to a Dual Diagnosis Capable or Dual Diagnosis Enhanced program. **Dual Diagnosis Capable Programs**

The client's status in Dimension 3 is characterized by one of the following:

a. The client's psychiatric condition is unstable. Depression and/or other emotional, behavioral, or cognitive symptoms are interfering with abstinence, recovery, and stability to such a degree that the client needs a structured 24 hour medically monitored environment to address recovery efforts; or

b. The client exhibits stress dependence behaviors associated with recent or threatened losses in work, family or social domains, to a degree that his or her ability to manage the activities of daily living are significantly impaired. The client thus requires a secure, medically monitored environment in which to address self-care problems and to focus on his or her substance abuse or mental health problems; or

c. The client has significant functional deficits that require active psychiatric monitoring. They may include, but are not limited to, problems with activities of daily living, problems with self-care, lethality or dangerousness, and problems with social functioning. These deficits may be complicated by problems in Dimensions 2 through 6: or

d. The client is at moderate risk of behaviors endangering self, others, or property, and is in imminent danger of relapse without the 24-hour support and structure of a Level III.7 program; or



e. The client is actively intoxicated, with resulting violent or disruptive behavior that poses imminent danger to self or others; or

f. The client has a thought disorder or cognitive limitations that require stabilization but not medical management.

Dual Diagnosis Enhanced Programs

The client's status in Dimension 3 is characterized by one of the following:

a. The client has a moderate psychiatric decompensation on discontinuation of drugs of abuse, and is currently present; or

b. The client is assessed as at moderate to high risk of behaviors endangering self, others or property, and is in imminent danger of relapse without 24-hour structure and support and medically monitored treatment; or

c. The client is severely depressed, with suicidal impulses and a plan. However, he or she is able to contract to reach out for help as needed and does not require a one-on-one suicide watch; or

d. The client has a co-occurring psychiatric disorder that is interfering with his or her addictions treatment and thus requires stabilization with psychotropic medications; or

The client has a co-occurring psychiatric disorder of moderate to high severity that is marginally and tenuously stable and which requires care to prevent exacerbation. The client thus requires the type of close management available only in an addiction treatment program with integrated mental health services, or in a mental health program with integrated addiction treatment services.

Dimension 4: Substance Use-Related Risks

Unable to control use with dangerous consequences despite active participation in less intensive care - The client's status in this dimension is characterized by one of the following:

a. Despite active participation in less intensive care, the client is experiencing an acute crisis with intensification of addiction symptoms and is in imminent danger of substance use with attendant severe consequences and is in need of 24-hour short term professionally directed clinical interventions; or

b. The client recognizes that the substance use is excessive and has attempted to reduce or control it but has been unable to do so as long as alcohol/other drugs are present in the environment; or

c. The modality of treatment requires this level of care.

Dual Diagnosis Enhanced Programs

The client's status in Dimension 5 is characterized by psychiatric symptoms that pose a moderate to high risk of relapse to a substance dependence or mental disorder. This client may demonstrate limited ability to apply relapse prevention skills, as well as poor skills in coping with mental disorders and/or avoiding or limiting relapse, with imminent serious consequences. The client's follow through in treatment is poor or inconsistent, and his or her relapse problems are escalating to such a degree that treatment at a lower level of care is not succeeding or not feasible.

Dimension 5: Recovery Environment Interactions

Environment dangerous for recovery; client lacks skills to cope outside of a highly structured 24-hour setting -The client's status in this dimension is characterized by one of the following:

a. The client lives in an environment in which treatment is unlikely to succeed such as family conflict, substance abusing family members; or

b. Distance from treatment facility would impede client's access to treatment, or treatment at a lesser level of care is not possible because of a lack of transportation or loss of driver's license; or

c. There is a danger of physical, sexual and/or severe emotional abuse or victimization in the client's current living environment which makes recovery unlikely; or

d. The client is engaged in an occupation in which continued drug/alcohol use poses an imminent risk to public or personal safety.

Dual Diagnosis Enhanced Programs

The client status in Dimension 5 is characterized by severe and persistent mental illness. He or she may be too ill to benefit from skills training to learn to cope with problems in the recovery environment. This client may



require planning for assertive community treatment, intensive case management or other community outreach and support services. This client's living, working; social and/or community environment is not supportive of good mental health functioning. He or she has insufficient resources and skills to deal with this situation. Such a resident needs the support and structure of this program to achieve stabilization and prevent further deterioration.

Dimension 6: Person-Centered Considerations

Resistance high and impulse control poor despite negative consequences; client needs motivating strategies found in 24-hour structured setting - The client's status in this dimension is characterized by one of the following:

a. Despite serious consequences of the effects of the addiction the client does not relate the addiction to the severity of the problems; or

b. The client is in need of intensive motivating strategies, activities, and processes available found in a 24-hour structured setting; or

c. The client needs psychiatric monitoring to assure follow-through with the treatment regimen and psychiatric medications; or

d. The client requires structured therapy and a 24-hour programmatic milieu because motivational interventions have failed at less intensive levels of care and are assessed as not likely to succeed in the future at a less intensive level of care; or

e. The client's perspective impairs his or her ability to make behavior changes without repeated, structured, clinically directed motivational interventions delivered in a 24-hour milieu.

Dual Diagnosis Enhanced Programs

The client's status in Dimension 6 is characterized by a lack of commitment to change and refusal to engage in activities necessary to address a cooccurring mental health problem. Similarly, the client who can not consistently follow through with treatment, or demonstrates minimal awareness

of a problem, or is unaware of the need to change, requires active interventions with family, significant others and other external systems to create leverage and align incentives so as to promote engagement in treatment, is appropriately placed in a Level III.7 Dual Diagnosed Enhanced program.

EXCLUSION CRITERIA

1. The individual is assessed as needing a more/less intensive level of care and:

- a. Such a program is available to the individual
- b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances
- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with emotional, behavioral, or cognitive conditions and complications to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admission pursuant to Florida Statutes, Chapter 397
- 6. The individual refuses agreement to follow program structure/rules to such a degree as to render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

Meets ASAM PPC-2 continued stay criteria for this level of care:

Meets criteria in at least one of the six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Client is free from intoxication or withdrawal symptoms/risks.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. Biomedical conditions require medical monitoring, or a concurrent biomedical illness needs medical



monitoring but not intensive care; or

b. Continued alcohol/other drug use places the client in imminent danger of serious damage to physical health or concomitant biomedical conditions.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client is making progress toward resolution of concomitant emotional, behavioral or cognitive problems but has not sufficiently resolved the problem to allow transfer to a less intensive level of care; or

b. The client is being held pending transfer (within 72 hours) to a more intensive level of care.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client continues to exhibit intensive addiction symptomatology (persistent drug or alcohol craving); or

b. The client recognizes specific relapse triggers or dysfunctional behaviors that previously undermined sobriety. While the client demonstrates minimal understanding of their role in relapse, he/she is progressing in treatment; or

c. The client recognizes the severity of his/her relapse triggers and dysfunctional behaviors that undermine sobriety, and manifests an understanding of these dysfunctional behaviors, yet does not demonstrate skills necessary to interrupt these behaviors and to apply alternative coping skills necessary to maintain ongoing abstinence.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. Problem aspects of the client's social and interpersonal life are responding to treatment but are not sufficiently supportive of recovery to allow discharge or transfer to a less intensive level of care; or

b. The social and interpersonal life of the client has not changed or has deteriorated, and the client needs

additional treatment to learn to cope with the current situation or take steps to secure alternative placement.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client recognizes the severity of the substance related problem but demonstrates minimal understanding or his/her self-defeating use of alcohol/drugs, yet the client is progressing in treatment; or

b. The client recognizes the severity of his/her substance-related problems and manifests understanding of his/her personal relationship with substances yet does not demonstrate behaviors indicating that he or she has developed the skills needed to cope with the problem.

DISCHARGE CRITERIA

Meets ASAM PPC-2 discharge criteria for this level of care:

The client meets criteria in at least one of the six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client exhibits symptoms of severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. Biomedical conditions, if any, have diminished or stabilized to a degree that daily availability of 24-hour medical and/or nursing care is no longer necessary, and the client **does not meet criteria in this or another dimension that indicates the need for continued treatment at ASAM Level**

III.7; or

b. A biomedical condition is interfering with addiction treatment and requires treatment at another level of care. **Dimension 3: Psychiatric and Cognitive Conditions**

The client's status in this dimension is characterized by one of the following:



a. Emotional, behavioral or cognitive conditions, if any, have diminished or stabilized to a degree that daily availability of 24-hour medical, psychosocial and/or nursing care is no longer necessary, and the client **does not meet criteria in this or another dimension that indicates the need for continued treatment at ASAM** Level III.7; or

b. A psychiatric, emotional, behavioral, or cognitive condition is interfering with treatment sufficiently that the client requires treatment at another level of care.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client is capable of following and completing a specific continuing care recovery plan. The client's integration of therapeutic gains is sufficient that the client does not appear to be at risk of imminent relapse, and the client **does not meet criteria in this or another dimension indicating the**

need for continued treatment at ASAM Level III.7; or

b. The client is not committed to continuing care and has achieved maximum benefit from all attempts to help him/her accept the need for continuing care and relapse prevention.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. Problem aspects of the client's social and interpersonal life are responding to treatment and the environment is now sufficiently supportive of recovery to allow discharge or transfer to a less intensive level of care and the client **does not meet criteria in this or another dimension for continued care at ASAM Level III.7**; or b. The social and interpersonal life of the client has not changed or has deteriorated, but the client has acquired skills to cope with the current situation or has secured an alternative environment, and the client **does not meet criteria in this or another dimension for continued care ASAM Level III.7**; or

c. The social and interpersonal life of the client has deteriorated, and the client has not learned the skills necessary to cope with the current situation. An extended care alternative environment has been found, but the client is unwilling to be transferred, and the client **does not meet the criteria in this**

or another dimension for continued treatment in ASAM Level III.7.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client's awareness and acceptance of his/her addiction problem and commitment to definitive treatment is sufficient to expect treatment compliance in a less intensive level of care, as evidenced by: 1) ability to recognize the severity of the substance abuse problem; 2) understanding of the self-defeating relationship with substances and of the triggers and dysfunctional behaviors that lead to use; and 3) acceptance of the concept of continuing care and participation in the development of a post-treatment recovery plan; or

b. The client does not meet criteria for continued treatment at ASAM Level III.7; or

c. The client has consistently failed to meet treatment objectives and further progress is not likely to occur, despite persistent therapeutic efforts and treatment plan revisions. Thus, the client is being referred to a more appropriate level of care.



SUBSTANCE ABUSE RESIDENTIAL TREATMENT LEVEL 2: Adolescent

Residential treatment provides a structured, live-in environment within a non-hospital setting on a 24-hours-aday, 7-days per week basis. Level 2 programs include therapeutic communities or some variation of therapeutic communities and are of longer duration than level 1 residential programs. This level is appropriate for persons characterized as having chaotic and often abusive interpersonal relationships, extensive criminal justice histories, prior treatment episodes in less restrictive levels of care, inconsistent work histories and educational experiences, and antisocial behavior. In addition to clinical services, considerable emphasis is placed on services that address the client's educational and vocational needs, socially dysfunctional behavior, and the need for stable housing upon discharge. It also includes services that assist the individual in remaining abstinent upon returning to the community

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

Meets ASAM-PPC-2 admission criteria for this level of care:

Must meet at least Dimensions 2 and 3 and if problems exist and does not require exclusion from the level of care then at least two of the six dimensions. Transfer criteria: Clients may be transferred to this level of care when they have met essential treatment objectives in a more intensive level and require this intensity of service provided at this level of care in at least one dimension. A client may transfer from ASAM Level I when services at that level have been insufficient to address the client's needs or when ASAM Level I has consisted of motivational interventions to prepare the client for participation in a more intensive level of care for which admission criteria are met.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The risk of withdrawal is present, as evidenced by a history of current alcohol/or other drug use or a high index of suspicion of such use. However, withdrawal is manageable in this level.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's continued alcohol/other drug use places the client in imminent danger of serious damage to his or her physical health, or concomitant biomedical conditions (such as pregnancy); or

b. Biomedical complications require medical monitoring or concurrent biomedical illness requires medical monitoring but not acute medical care.

Enhanced Program

The client has a biomedical problem that requires a degree of staff attention that is provided directly by the program or by a Level I or Level II service outside of the Level III.1 program.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in Dimension 3 is characterized by one of the following:

a. *Dangerousness/Lethality:* The adolescent is at risk for dangerous consequences because of the lack of a stable living environment. He or she needs a stable residential setting for protection.

b. *Interference with Addiction Recovery Efforts:* The adolescent needs a stable living environment to promote a sustained focus on recovery tasks.

c. Social Functioning: The client's emotional, behavioral, or cognitive problem results in moderate impairment in social functioning. He or she therefore needs limited 24-hour supervision, which can be provided by program staff or in combination with a Level I or Level II program. This might involve protection from antisocial peer influences in a motivated client reinforcement of improving behavior self-management techniques, support of increasingly independent functions and the like.

d. Ability for Self-Care: the client has moderate impairment in his or her ability to manage the activities of daily



living and thus needs limited 24-hour supervision, which can be provided by program staff or through coordination with a Level I or Level II program. The client's impairments might require the provision of food and shelter, prompting for self-care, or supervised self-administration of medications.

e. *Course of Illness:* The client's history and present situation suggest that an emotional, behavioral or cognitive condition would become unstable without 24-hour supervision; or the client's emotional, behavioral or cognitive conditions suggests the need for low-intensity and/or longer-term reinforcement and practice of recovery skills in a controlled environment.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The lack of monitoring or supervision between treatment encounters at a less intensive level of care has been a major barrier to abstinence and achievement of recovery goals. The client's continued substance use poses a high risk of serious impairment in the absence of 24-hour monitoring and structured support; or

b. The client's recovery skills are not sufficient to overcome environmental triggers such as peer substance use or internal triggers such as craving; or

c. The client's history of chronic substance use, repeated relapse and/or resistance to treatment predicts continued use or relapse without residential treatment and a structured programmatic milieu; or

d. The client's likelihood of relapse and/or continued use poses a high risk of serious impairment in the absence of 24-hour monitoring and structured support. This client might be at a high risk of relapse/continued use due to ongoing exposure to substances in the context of trafficking, involvement with a gang or other delinquent or drug involved peers.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

- a. The client's environment is not conducive to successful treatment at less intensive levels of care; or
- b. The client's parents or legal guardian(s) are unable to provide the consistent participation necessary to support treatment at less intensive levels or care; or

c. Logistical impediments (e.g., lack of public transportation or parent's inability or refusal to provide transportation) preclude participation in treatment at less intensive levels of care; or

d. There is danger of physical, sexual and/or severe emotional attack or victimization in the client's current living environment, which make recovery unlikely. Thus, the client must be removed from that environment.

Dimension 6: Person-Centered Considerations

The client's status in Dimension 6 is characterized by both of the following:

a. The client is open to recovery but requires limited 24-hour supervision to promote or sustain progress through the stages of change; and

b. The client is cooperative and likely to engage in treatment at this level of care.

EXCLUSION CRITERIA

1. The individual is assessed as needing a more/less intensive level of care and:

- a. Such a program is available to the individual
- b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances
- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with emotional, behavioral, or cognitive conditions and complications to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admissions pursuant to Florida Statutes Chapter 397

CONTINUED STAY CRITERIA

Meets ASAM PPC-2 continued stay criteria for this level of care:



Must meet one of Dimensions 1-6.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Client is free from intoxication or withdrawal symptoms/risks.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions, if any, are stable or are being currently addressed and do not interfere with treatment; or

b. The client is responding to treatment for biomedical conditions that are not severe enough to warrant inpatient treatment yet distract from recovery efforts. Such conditions require medical monitoring and/or medical management, which can be provided by the program or through a concurrent arrangement with another treatment provider.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client is making progress toward resolution of an emotional, behavioral, or cognitive condition, but he or she has not resolved the condition(s) sufficiently to allow discharge or transfer to a less intensive level of care; or

b. The client continues to display significant depression, with thoughts of self-harm, but is making progress in achieving treatment objectives; or

c. The client is being held pending transfer within 72 hours to an acute psychiatric inpatient service; or

d. The client manifests continued recurrent impulsive behavior (angry outbursts, withdrawal from social contacts, violation of program expectations), which is slowing, but is not preventing progress in treatment; or e. The client manifests continued risk of severe self-defeating behaviors, such as running away, return to

victimization or a return to illegal drug activities; however, he/she is making progress in achieving treatment objectives.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client exhibits moderate intensification of addiction symptoms (such as difficulty postponing gratification and related drug seeking behaviors) which would jeopardize his or her ability to respond to treatment in a less intensive level of care.

b. The client recognizes relapse triggers or dysfunctional behaviors that previously have undermined sobriety but demonstrates minimal understanding of his/her self-defeating responses to such triggers or use of such dysfunctional behaviors; however, the client is progressing in treatment; or

c. The client recognizes relapse triggers or dysfunctional behaviors that previously have undermined sobriety but does not demonstrate the skills necessary to interrupt such behaviors and apply the alternative coping skills needed to maintain ongoing abstinence.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. Problem aspects of the client's social and interpersonal environment are responding to treatment but are not sufficiently resolved to support recovery. Thus, the client is not ready for discharge or transfer to a less intensive level of care; or

b. The client's social or interpersonal environment has not changed or has deteriorated, and the client needs additional treatment to learn to cope with the current situation or to take steps to secure an alternative environment.

Dimension 6: Person-Centered Considerations

The client recognizes that he/she has an alcohol/other drug problem and is responding to treatment but has not demonstrated behaviors indicative of the problem-solving or social skills necessary to cope with the problem.

DISCHARGE CRITERIA

Meets ASAM PPC-2 discharge criteria for this level of care:



Meets diagnostic criteria in one of Dimensions 1-6.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client exhibits symptoms of severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's biomedical conditions, if any, have diminished or stabilized to the extent they can be managed through outpatient appointments at a less intensive level of care, and the client **does not meet any of the continued stay criteria** in this or another dimension that indicates the need for further treatment; or

b. The client has a biomedical condition that is interfering with addiction treatment that requires treatment in another setting.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client's emotional, behavioral, or cognitive problems have diminished in severity to such an extent that regular monitoring of the behavior is no longer necessary, and the client **does not meet any of the continued stay criteria** for further treatment at ASAM Level III; or

b. The client has a psychiatric, emotional, behavioral, or cognitive condition that is interfering with addiction treatment and that should be addressed in another setting; or

c. The client has been unable to benefit from treatment due to the inability to function at least at the 11-year-old age level.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client is capable of following a specific and complete post-treatment recovery plan. The client's therapeutic gains in addressing craving and relapse issues have been integrated into the client's daily behavior to support an ongoing care program at a less intensive level of care, and the client **does not meet continued stay criteria** indicating the need for further treatment at ASAM Level III; or

b. The client is not committed to continuing care and has achieved maximum benefit from all attempts to have him or her accept the need for continuing care and relapse prevention.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. Problem aspects of the client's social and interpersonal environment are responding to treatment and the environment is sufficiently supportive of recovery to allow discharge or transfer to a less intensive level of care, and the client **does not meet any of the continued stay criteria** that indicate the need for further treatment at this level of care; or

b. The client's social or interpersonal environment has not changed or has deteriorated, but the client has learned skills adequate to cope with the current situation or has secured an alternative environment, and the client **does not meet any of the ASAM Level III continued stay criteria** that indicates the need for further treatment at this level of care; or

c. The client's social support system remains non-supportive or has deteriorated and the client is having difficulty coping with the environment and is at substantial risk of reactivating his/her addiction. An alternative environment is not feasible. An alternative environment has been identified but the parent(s)/guardian(s) or family does not accept the recommendation.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client's awareness and acceptance of his or her addiction problem and commitment to definitive treatment is sufficient to expect treatment compliance at a less intensive level of care, as evidenced by the



following: 1) The client recognizes the severity of his/her substance abuse problem; 2) the client has an understanding of his/her self-defeating relationship with substances; 3) the client is applying skills necessary to maintain recovery by accessing appropriate community supports or by continuing treatment in a less intensive level of care; and 4) the client **does not meet any of the continued stay criteria** for ASAM Level III; or

b. The client consistently has failed to achieve essential treatment plan objectives despite revisions to the treatment plan and advice concerning the consequences of continued alcohol/other drug use, to such an extent that further progress is not likely to occur.



SUBSTANCE ABUSE RESIDENTIAL TREATMENT LEVEL 2: Adult

Residential treatment provides a structured, live-in environment within a non-hospital setting on a 24-hours-aday, 7-days per week basis. Level 2 programs include therapeutic communities or some variation of therapeutic communities and are of longer duration than level 1 residential programs. This level is appropriate for persons characterized as having chaotic and often abusive interpersonal relationships, extensive criminal justice histories, prior treatment episodes in less restrictive levels of care, inconsistent work histories and educational experiences, and antisocial behavior. In addition to clinical services, considerable emphasis is placed on services that address the client's educational and vocational needs, socially dysfunctional behavior, and the need for stable housing upon discharge. It also includes services that assist the individual in remaining abstinent upon returning to the community.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

Meets ASAM PPC-2 admission criteria for treatment at this level:

Client meets criteria in each of the six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client's intoxication or withdrawal symptoms/risks can be managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. Biomedical conditions, if any, are stable and do not require availability of medical/nursing monitoring, and the client is capable of self administering any prescribed medications; or

b. Biomedical conditions are not severe enough to warrant inpatient treatment but are sufficient to distract from recovery efforts. Such conditions require medical monitoring, which can be provided by the program or through a concurrent agreement with another provider.

Biomedical Enhanced Services

The client who has a biomedical problem that requires a degree of staff attention that is not available in other Level III.3 programs are in need of Biomedical Enhanced services.

Dimension 3: Psychiatric and Cognitive Conditions

If any of the Dimension 3 conditions are present, the client must be admitted to a Dual Diagnosis Capable or Dual Diagnosis Enhanced program (depending on his or her level of function, stability and degree of impairment).

Dual Diagnosis Capable Programs

The client's status in Dimension 3 is characterized by (a) or (b) or (c) or (d) or (e) and (f):

e. The client's psychiatric condition is stabilizing. However, despite his or her best efforts, the resident is unable to control his or her use of alcohol or other drugs and/or antisocial behaviors, with attendant probability of harm to self or others. The resulting level of dysfunction is so severe that it precludes the resident's participation in a less structured and intensive level of care; or

f. The client demonstrates repeated inability to control his or her impulses to use alcohol or other drugs and/or to engage in antisocial behavior, and is in imminent danger of relapse, with attendant likelihood of harm to self, others or property. The resulting level of dysfunction is of such severity that it precludes participation in the absence of the 24-hour support and structure of a Level III.5 program.

g. The client demonstrates antisocial behavior patterns (as evidenced by criminal activity) that have led or could lead to significant criminal justice problems, lack of concern for others and extreme lack of regard for authority (expressed through distrust, conflict or opposition), and which precludes participation in a less structured and



intensive level of care; or

h. The client has significant functional deficits, which are likely to respond to staff interventions. These symptoms and deficits, when considered in the context of his or her home environment are sufficiently severe that the resident is not likely to maintain mental stability and/or abstinence if treatment is provided in a non-residential setting. The functional deficits are of a pervasive nature, requiring treatment that is primarily habilitative in focus; they do not require medical monitoring or management. The may include, but are not limited to, residual psychiatric symptoms, chronic addictive disorder, history of criminality, marginal intellectual ability, limited educational achievement, poor vocational skills, inadequate anger management skills, poor impulse control, and the sequelae of physical, sexual or emotional trauma. These deficits may be complicated by problems in Dimensions 2 through 6; or

i. The client's concomitant personality disorders are of such severity that the accompanying dysfunctional behaviors require continuous boundary setting interventions; *and*

j. The client's mental status is assessed as sufficiently stable to permit the client to participate in the therapeutic interventions provided at this level of care and to benefit from treatment.

Dual Diagnosis Enhanced Programs

A range of psychiatric symptoms that require active monitoring, such as poor anger management characterizes the client's status in Dimension 3. These are assessed as posing a risk of harm to self or others if the resident is not contained in a 24-hour structured environment. Although clients do not require specialized psychiatric nursing and close observation, they do need monitoring and interventions by mental health staff to limit and deescalate their behaviors. A 24-hour milieu is sufficient to contain such impulses in most cases, but enhanced staff and therapeutic interventions are required to manage unpredictable losses of impulse control. The treatment regimen should avoid highly confrontational strategies that are intended to induce submissive behavior or strong affect.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client does not recognize relapse triggers, is not committed to continuing care, and continued substance use poses an imminent danger to self or others, in the absence of 24-hour monitoring and structured support; or b. Despite previous active and recent participation in a less intensive level of care, the client has continued to use substances, with imminent serious consequences, and is at high risk of substance use without close 24hour monitoring and structured treatment; or

c. The client is experiencing addiction symptoms such as drug craving, difficulty postponing immediate gratification and other drug-seeking behaviors, with imminent serious consequences, in absence of close 24-hour monitoring and structured support; or

d. The client is in imminent danger of relapse, with dangerous emotional, behavioral or cognitive consequences, because of a crisis situation; or

e. Despite recent, active participation in treatment at a less intensive level of care, the client continues to use alcohol or other drugs or to deteriorate psychiatrically, with imminent serious consequences, an is at high risk of continued substance use or mental deterioration in the absence of close 24-hour monitoring and structured treatment.

Dual Diagnosis Enhanced Programs

The client status in Dimension 5 is characterized by psychiatric symptoms that pose a moderate to high risk of relapse to a substance dependence or mental disorder. The client demonstrates limited ability to apply relapse prevention skills, as well as poor skills in coping with mental disorders and/or avoiding or limiting relapse, with imminent serious consequences. The presence of relapse issues requires the intensity and types of services and 24-hour structure of a Level III.5 Dual Diagnosis Enhanced program. Case management and collaboration across levels of care may be needed to manage anti-craving, psychotropic or opioid maintenance medications. Preparation for transfer of the client to a less intensive level of care, a different type of service in the community, and/or reentry



into the community requires case management and staff exploration of supportive living environments, separately from their therapeutic work with the client.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. The client has been living in an environment in which there is a high risk of initiation or repetition of physical, sexual or emotional abuse, or in which substance use is so endemic that the client is assessed as being unable to achieve or maintain recovery; or

b. The client's social network involves living with an individual who is a regular user/abuser of alcohol/other drugs, or the client's living environment is so highly invested in drug use that recovery goals are assessed as unachievable; or

c. The client's social/interpersonal network is characterized by significant social isolation or withdrawal, such that recovery goals are assessed as unachievable in a non-residential treatment setting; or

d. Criminal behavior, victimization, and other antisocial norms and values characterize the client's living environment; or

e. The client is unable to cope, for even limited periods of time, outside of 24-hour care. He or she needs staff monitoring to learn to cope with Dimension 5 problems before being transferred safely to a less intensive setting.

Dual Diagnosis Enhanced Programs

The client status in Dimension 5 is characterized by severe and persistent mental illness. He or she may be too ill to benefit from skills training to learn to cope with problems in the recovery environment. The client requires planning for assertive community treatment, intensive case management or other community outreach and support services. The client's living, working, social and/or community environment is not supportive of good mental health functioning. He or she has insufficient resources and skills to deal with this situation. This client needs the support and structure of a Level III.5 Dual Diagnosis Enhanced program to achieve stabilization and prevent further deterioration.

Dimension 6: Person-Centered Considerations

The client meets one of the following:

a. Because of the intensity and chronicity of the addictive disorder or the client's mental health problems, he or she has little awareness of the need for continuing care or the existence of his or her substance use or mental health problem and need for treatment, and thus has limited readiness to change; or

b. Despite experiencing serious consequences or effects of the addictive disorder or mental health problem, the client has marked difficulty in understanding the relationship between his or her substance use, addiction,

mental health or life problems and his or her impaired coping skills and level of functioning, often blaming others for his or her substance dependence problems; or

c. The client demonstrates passive or active opposition to addressing the severity of his or her mental or addiction problem or does not recognize the need for treatment. Such continued substance use or inability to follow through with mental health treatment poses a danger of harm to self or others. However, assessment indicates that treatment interventions available at Level III.5 may increase the client's degree of readiness to change; or

d. The client requires structured therapy and a 24-hour programmatic milieu to promote treatment progress and recovery, because motivational interventions have failed at less intensive levels of care and are assessed a snot likely to succeed in the future at a less intensive level of care; or

e. The client's perspective impairs his or her ability to make behavior changes without repeated, structured, clinically directed motivational interventions, delivered in a 24-hour milieu. Interventions are adjudged as not feasible or likely to succeed at a less intensive level of care.

Dual Diagnosis Enhanced Programs

The client's status in Dimension 6 is characterized by a lack of commitment to change and reluctance to engage in activities necessary to address a co-occurring mental health problem. Similarly, the client who is not



consistently able to follow through with treatment, or who demonstrates minimal awareness of a problem, or who is unaware of the need to change, requires active interventions with family, significant others and other external systems to create leverage and align incentives so as to promote engagement in treatment is appropriately placed in Level III.5 Dual Diagnosed Enhanced program.

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances
- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with Psychiatric and Cognitive Conditions to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admission pursuant to Florida Statutes, Chapter 397
- 6. The individual refuses agreement to follow program structure/rules to such a degree as to render treatment at this level of care ineffective/unsafe.

CONTINUED STAY CRITERIA

Meets ASAM PPC-2 continued stay criteria for this level of care:

Client meets criteria in Dimension 1 and at least one of the Dimensions 2, 3, 4, 5 or 6.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Client is free from intoxication or withdrawal symptoms/risks.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. Biomedical conditions, if any, continue but are stable and do not require medical monitoring and the client is capable of self-administration of prescription medications; or

b. Biomedical conditions continue but are not so severe as to warrant inpatient treatment; however, they are sufficient to distract from recovery efforts. Such conditions may require medical monitoring which can be provided by the program or through a concurrent arrangement with another treatment provider.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client recognizes his/her repeated inability to control impulses to use alcohol or other drugs and to prevent harm to self of others. However, the client is gaining skills to control such impulses and behaviors. A 24-hour structure remains necessary to maintain and reinforce treatment progress; or

b. The client has begun to understand his/her anti-social behavior as self-defeating but continues to require intensive daily program interventions to recognize these behaviors when they occur; or

c. The client has begun to understand the concept and purpose of boundaries but continues to require boundary setting from an external source; or

d. The client's understanding of his/her self-defeating behaviors has not yet been converted to behavior change.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. Addiction symptoms while stabilized have not been sufficiently reduced to allow functioning outside of a structured treatment program; or

b. The client may or may not recognize relapse triggers, but he/she has not yet developed coping skills sufficient to interrupt or postpone gratification or to control related impulsive behavior outside of a highly structured and controlled residential setting.

Dimension 5: Recovery Environment Interactions



The client's status in this dimension is characterized by one of the following:

a. The client's social network/recovery environment continues to manifest the non-supportive features present at admission and, despite active efforts of the client and professional staff, adequate recovery environment alternatives have not yet been secured; or

b. The client's interpersonal and social environment has remained the same or deteriorated, and continued care at ASAM Level III.5 is indicated to assist the client with the development of coping skills to deal with the current situation or to secure an alternative environment; or

c. There are logistical impediments in the recovery environment (distance/transportation problems) which preclude this level of treatment in a non-residential setting.

Dimension 6: Person-Centered Considerations

The client is progressing in treatment, as evidenced by recognition of the severity of the substance-related problem; however, he/she still requires the intensity of motivating strategies found only at ASAM Level III.5 to sustain personal responsibility in treatment.

DISCHARGE CRITERIA

Meets ASAM PPC-2 discharge criteria for this level of care:

The client meets criteria in at least one of the six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one or the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client exhibits symptoms of severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. Biomedical conditions, if any, can be managed through outpatient care, and the client **does not meet any of the continued service criteria** in this or another dimension that indicates the need for continued treatment at ASAM Level III.5: or

b. The client's biomedical condition has deteriorated sufficiently to meet the criteria for admission to a more intensive level of care.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. Emotional, behavioral or cognitive problems, if any, have diminished to a degree that daily availability of 24hour monitoring is no longer necessary, and the client **does not meet criteria in this or another dimension that indicates the need for continued treatment at ASAM Level III.5**; or

b. The client has experienced a worsening of Dimension 3 problems, which are interfering with treatment at ASAM Level III.5, and meets criteria for a more intensive level of care; or

The client has not responded to treatment in this dimension and has achieved maximum benefit from attempts for positive behavior change.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The risk of relapse is assessed as low as evidenced by 1) the client's ability to follow/complete a specific continuing care plan; 2) demonstration of sufficient recovery skills to allow successful participation in a less intensive recovery environment; and 3) the client **does not meet the criteria in this or another dimension indicating the need for continued service at ASAM Level III.5**; or

b. The client is not committed to continuing care and has achieved maximum benefits from all attempts to help him/her accept the need for continuing care and relapse prevention.

Dimension 5: Recovery Environment Interactions

The client's status meets (a) and (b) or (c):

a. The client is functioning adequately in life task areas of work, social and primary relationships, and does not



meet criteria in this or another dimension for continued care at ASAM Level III.5; and b. The client is prepared to live independently in the community or in a less structured environment, as evidenced by one of the following: 1) the client's social and interpersonal environment is sufficiently supportive to permit adherence to a self-directed recovery plan without substantial risk of relapse; 2) the client's usual environment is not supportive of recovery, but the client has acquired the necessary coping skills to maintain recovery in that environment; or 3) the client has secured an alternative environment that is supportive of recovery; or

c. Problems related to the client's social and interpersonal environment continue or have intensified; the client has not learned the coping skills necessary to deal with the situation and the **client meets the criteria for referral to a more appropriate level of care**.

Dimension 6: Person-Centered Considerations

The client meets (a) and (b) or (c):

a. The client no longer requires clinically directed interventions in this dimension, as evidenced by: 1) recognition of the severity of the substance related problem, an understanding of the self-defeating relationship with substances and of the triggers and dysfunctional behaviors related to continued to use; 2) application of the skills necessary to meet the treatment objectives of the treatment plan; and 3) acceptance of the concept of continued care and participation in the development of an ongoing recovery plan; and

b. The client does not meet criteria for continued treatment at ASAM Level III.5; or

c. The client has consistently failed to meet treatment objectives and further progress is not likely to occur, despite persistent therapeutic efforts and treatment plan revisions. Thus, the client is being referred to a more appropriate level of care.



SUBSTANCE ABUSE RESIDENTIAL TREATMENT LEVEL 3: Adult

Residential treatment provides a structured, live-in environment within a non-hospital setting on a 24-hours-aday, 7-days per week basis. Level 3 programs include those that are referred to as domiciliary care and are generally longer term than level 2 residential programs. This level of care is appropriate for persons whose cognitive functioning has been severely impaired from the chronic use of substances, either temporarily or permanently. This would include persons who have varying degrees of organic brain disorder or brain injury or other problems that require extended care. The emphasis is on providing services that work on cognitive problems and activities of daily living, socialization, and specific skills to restore and maintain independent living. The services are typically slower paced, more concrete and repetitive. There is considerable emphasis on relapse prevention and reintegration into the community. This involves considerable use of case management and networking residents into ancillary or wrap-around services such as housing, vocational services, transportation, and self-help meetings.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

Meets ASAM PPC-2 admission criteria for this level of care:

Client meets criteria in all six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's situation in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks.

b. The client's intoxication or withdrawal symptoms/risks can be managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. Biomedical conditions, if any, are stable and do not require availability of medical/nursing monitoring, and the client is capable of self administering any prescribed medications; or

b. Biomedical conditions are not severe enough to warrant inpatient treatment but are sufficient to distract from recovery efforts. Such conditions require medical monitoring, which can be provided by the program or through a concurrent agreement with another provider.

Biomedical Enhanced Services

The client who has a biomedical problem that requires a degree of staff attention that is not available in other Level III.3 programs are in need of Biomedical Enhanced services.

Dimension 3: Psychiatric and Cognitive Conditions

If any of the Dimension 3 conditions are present, the client must be admitted to a Dual Diagnosis Capable or Dual Diagnosis Enhanced program (depending on his or her level of function, stability, and degree of impairment).

Dual Diagnosis Capable Programs

The client's status in Dimension 3 is characterized by (a) or (b) or (c) or (d):

a. The client's psychiatric condition is stabilizing, but he or she is assessed as in need of a 24 hour structured environment, as evidenced by one of the following; [1] depression or other emotional, behavioral or cognitive conditions significantly interfere with activities of daily living and recovery; or [2] the client exhibits violent or disruptive behavior when intoxicated and is assessed as posing a danger to self or others; or [3] the client exhibits stress behaviors related to recent or threatened losses in work, family or social arenas, such that activities of daily living are significantly impaired and the resident requires a secure environment to focus on the substance dependence or mental health

problem: or [4] concomitant personality disorders are of such severity that the accompanying dysfunctional behaviors require continuing structured interventions; or

b. The client's symptoms and functioning deficits, when considered in the context of his or her home



environment are assessed as sufficiently severe that the client is not likely to maintain mental stability and/or abstinence if treatment is provided in a non-residential setting. Functional deficits may include, but are not limited to, cognitive impairment, developmental disability, manifest chronicity and intensity of the primary addictive disease process, residual psychiatric symptoms, cognitive deficits resulting from traumatic brain injury, limited educational achievement, poor vocational skills, inadequate anger management skills, and other equivalent indications that services need to be presented at a pace that is slower and/or more repetitive and concrete than is found at other levels of care. These deficits may be complicated by problems in Dimensions 2 through 6; or

c. The client is at mild risk of behaviors endangering self, others, or property, and is in imminent danger of relapse without the 24-hour support and structure of a Level III.3 program; and

d. The client's mental status is assessed as sufficiently stable to permit the client to participate in the therapeutic interventions provided at this level of care and to benefit from treatment.

Dual Diagnosis Enhanced Programs

The client's status in Dimension 3 is characterized by (a) or (b):

a. The client has a diagnosed emotional, behavioral, or cognitive disorder that requires active management. Such disorders complicate treatment of the client's Substance Dependence or Substance-Induced disorder and require differential diagnosis. The client thus is in need of stabilization of psychiatric symptoms concurrent with addiction treatment. Because cognitive deficits are commonly seen in clients treated at Level III.3, such clients may require treatment that is delivered at a slower pace or in a more concrete or repetitive fashion; or b. The client is assessed as at mild to moderate risk of behaviors endangering self, others or property.

During the stabilization period, expectations for the client's involvement in group, community and activities therapy are limits. A more highly individualized regimen of individual, group and activities involvement may be required.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client does not recognize relapse triggers and has little awareness of the need for continuing care. Because of the chronicity and intensity of the addiction or the client's cognitive limitations, the client is at high risk of continued substance use with imminent dangerous consequences in the absence of 24-hour monitoring and structured support; or

b. Despite previous active and recent participation in a less intensive level of care, the client has continued to use substances, with imminent serious consequences, and is at high risk of substance use without close 24-hour monitoring and structured treatment.

Dual Diagnosis Enhanced Programs

The client status in Dimension 5 is characterized by psychiatric symptoms that pose a moderate risk of relapse to a substance dependence or mental disorder. Such a client demonstrates limited ability to apply relapse prevention skills, as well as poor skills in coping with mental disorders and/or avoiding or limiting relapse, with imminent serious consequences. The presence of these relapse issues requires the types of services and 24-hour structure of a Level III.3 Dual Diagnosis Enhanced program. Case management and collaboration across levels of care may be needed to manage anti-craving, psychotropic or opioid maintenance medications. Preparation for transfer of the client to a less intensive level of care, a different type of service in the community, and/or reentry into the community requires case management and staff exploration of supportive living environments, separately from their therapeutic work with the client.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. The client has been living in an environment in which there is a high risk of initiation or repetition of physical, sexual or emotional abuse, or

in which substance use is so endemic that the client is assessed as being unable to achieve or maintain recovery; or



b. The client's social network involves living with an individual who is a regular user/abuser of alcohol/other drugs, or the client's living environment is so highly invested in drug use that recovery goals are assessed as unachievable; or

c. The client's social/interpersonal network is characterized by significant social isolation or withdrawal, such that recovery goals are assessed as unachievable in a non-residential treatment setting.

Dual Diagnosis Enhanced Programs

The client's status in Dimension 5 is characterized by severe and persistent mental illness. He or she may be too ill to benefit from skills training to learn to cope with problems in the recovery environment. This client requires planning for assertive community treatment, intensive case management or other community outreach and support services. The clients living, working, social and/or community environment is not supportive of good mental health functioning. He or she has insufficient resources and skills to deal with this situation. This client needs the support and structure of Level III.3 Dual Diagnosis Enhanced program to achieve stabilization and prevent further deterioration.

Dimension 6: Person-Centered Considerations

The client meets one of the following:

a. Despite experiencing serious consequences or effects of the addiction, the client has marked difficulty in understanding the relationship between his/her substance use, addiction or life problems, and impaired coping skills and level of functioning; or

b. The client is in danger of harm to self or others through continued substance use, demonstrates no awareness of the need to address the severity of the addiction problem or does not recognize the need for treatment. However, assessment indicates that treatment interventions available at ASAM Level III.3 may increase the client's level of motivation for change.

Dual Diagnosis Enhanced Programs

The client's status in Dimension 6 is characterized by ambivalence in his or her commitment to change and reluctance to engage in activities necessary to address a co-occurring mental health problem. Similarly, the client who is not consistently able to follow through with treatment, or who demonstrates minimal awareness of a problem, or who is unaware of the need to change, requires active interventions with family, significant others and other external systems to create leverage and align incentives so as to promote engagement in treatment is appropriately placed in a Level III.3 Dual Diagnosis Enhanced program.

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances
- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with emotional, behavioral, or cognitive conditions and complications to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admission pursuant to Florida Statutes, Chapter 397
- 6. The individual refuses agreement to follow program structure/rules to such a degree as to render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

Meets ASAM PPC-2 continued stay criteria for this level of care:

Client meets criteria in at least one of six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Client is free from intoxication or withdrawal symptoms/risks.

Dimension 2: Biomedical Conditions



The client's status in this dimension is characterized by one of the following:

a. Biomedical conditions, if any, continue but are stable and do not require medical monitoring and the client is capable of self-administration of prescription medications; or

b. The client is assessed as continuing to be appropriately placed at ASAM Level I or II and is receiving ASAM Level III.3 services concurrently.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client is making progress toward the resolution of emotional, behavioral, or cognitive conditions but has not made sufficient progress to allow discharge or transfer to a less intensive level of care; or

b. The client's mental status continues to be sufficiently stable to permit participation at this level of care; or

c. The slower pace of treatment at this level of care continues to be necessary because of the client's cognitive impairments.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client continues to exhibit intensive addiction symptoms, as evidenced by persistent alcohol/drug cravings; or

b. The client is progressing in treatment, as evidenced by recognition of specific relapse triggers or dysfunctional behaviors but the client

demonstrates minimal understanding of their role in relapse; or

c. The client is assessed as being at medium or high risk for relapse at a less intensive level of care.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. The client's social network/recovery environment continues to manifest the non-supportive features present at admission and, despite active efforts of the client and professional staff, adequate recovery environment alternatives have not yet been secured; or

b. The client's interpersonal and social environment has remained the same or deteriorated, and continued care at ASAM Level III.3 is indicated to assist the client with the development of coping skills to deal with the current situation or to secure an alternative environment; or

c. There are logistical impediments in the recovery environment (distance/transportation problems) which preclude this level of treatment in a non-residential setting.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The potential for danger to self or others continues due to the client's lack of recognition of the severity of the substance-related problem or the need for treatment; or

b. The client recognizes the severity of the substance related problem but demonstrates minimal understanding of his/her self-defeating pattern of use; or

c. The client recognizes the severity of the substance related problem and understands the nature of its relationship with psychoactive substances but does not apply learned skills, indicating that he/she has not yet been able to develop the skills necessary to cope with the problem.

DISCHARGE CRITERIA

Meets ASAM PPC-2 discharge criteria for this level of care:

The client meets criteria in at least one of the six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characteristic of one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client exhibits symptoms of severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

Dimension 2: Biomedical Conditions



The client's status in this dimension is characterized by one of the following:

a. Biomedical conditions, if any, can be managed through outpatient care, and the client **does not meet any of the continued service criteria** in this or another dimension that indicates the need for further treatment at ASAM Level III.3; or

b. The client's biomedical condition has deteriorated sufficiently to meet the criteria for admission to a more intensive level of care.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. Emotional, behavioral or cognitive conditions, if any, have diminished to a degree that daily availability of 24hour monitoring is no longer necessary, and the client **does not meet any criteria in this or another**

dimension that indicates the need for continued treatment at ASAM Level III.3; or

b. The client has experienced a worsening of Dimension 3 problems, which are interfering with treatment at ASAM Level III.3, and meets criteria for a more intensive level of care; or

c. The client has not responded to treatment in this dimension and has achieved maximum benefit from attempts to evoke behavior change.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The risk of relapse is assessed as low as evidenced by: 1) the client's ability to follow/complete a specific continuing care plan; 2) demonstration of sufficient recovery skills to allow successful participation in a less intensive recovery environment; and 3) the client **does not meet the criteria in this or another dimension indicating the need for continued service at ASAM Level III.3**; or

b. The client is not committed to continuing care and has achieved maximum benefits from all attempts to help him/her accept the need for continuing care and relapse prevention.

Dimension 5: Recovery Environment Interactions

The client meets (a) and (b) or (c):

a. The client is functioning adequately in life task areas of work, social and primary relationships, and **does not meet criteria in this or another dimension for continued care at ASAM Level III.3**; and

b. The client is prepared to live independently in the community or in a less structured environment, as evidenced by one of the following: 1) the client's social and interpersonal environment is sufficiently supportive to permit adherence to a self-directed recovery plan without substantial risk of relapse; 2) the client's usual environment is not supportive of recovery; but the resident has acquired the necessary coping skills to maintain recovery in that environment; or 3) the client has secured an alternative environment that is supportive of recovery; or

c. Problems related to the client's social and interpersonal environment continue or have intensified. The client has not learned the coping skills necessary to deal with the situation; and the client meets the criteria for referral to a more appropriate level of care.

Dimension 6: Person-Centered Considerations

The client meets (a) and (b) or (c):

a. The client no longer requires clinically directed interventions in this dimension, as evidenced by: 1) recognition of the severity of the substance related problem, an understanding of the self-defeating relationship with substances and of the triggers and dysfunctional behaviors related to continued to use; 2) application of the skills necessary to meet the objectives of the treatment plan; and 3) acceptance of the concept of continued care and participation in the development of an ongoing recovery plan; and

b. The client does not meet criteria for continued treatment at ASAM Level III.3; or

c. The client has consistently failed to meet treatment objectives and further progress is not likely to occur, despite persistent therapeutic efforts and treatment plan revisions. Thus, the client is being referred to a more appropriate level of care.



SUBSTANCE ABUSE RESIDENTIAL TREATMENT LEVEL 4: Adult

Residential treatment provides a structured, live-in environment within a non-hospital setting on a 24-hours-aday, 7-days per week basis. Level 4 programs include transitional care and are generally short-term. This level is appropriate for persons who have completed other levels of residential treatment, particularly levels 2 and 3. This includes individuals who have demonstrated problems in applying recovery skills, preventing relapse, improving emotional functioning, promoting personal responsibility, and reintegrating the individual into the worlds of work, education, and family life. Although clinical services are provided, the main emphasis is on services that are low-intensity and typically emphasize a supportive environment. This would include services that would focus on recovery skills, preventing relapse, improving emotional functioning, promoting personal responsibility and reintegrating the individual into the worlds of work, education, and family life.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

Meets ASAM PPC-2 admission criteria for this level of care:

Client meets criteria in all six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's situation in this dimension is characterized by one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks.

b. The client's intoxication or withdrawal symptoms/risks can be managed at this level of care.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. Biomedical conditions, if any, are stable and do not require availability of medical/nursing monitoring, and the client is capable of self administering any prescribed medications; or

b. Biomedical conditions are not severe enough to warrant inpatient treatment but are sufficient to distract from recovery efforts. Such conditions require medical monitoring, which can be provided by the program or through a concurrent agreement with another provider.

Biomedical Enhanced Services

The client who has a biomedical problem that requires a degree of staff attention (such as monitoring of medications or assistance with mobility) that is not available in other Level III.I programs are in need of Biomedical Enhanced Services.

Dimension 3: Psychiatric and Cognitive Conditions

The client may not have any significant problems in this dimension. However, if *any* of the Dimension 3 conditions are present, the resident must be admitted to a Dual Diagnosis Capable or Dual Diagnosis Enhanced program (depending on his or her level of function, stability and degree of impairment).

Dual Diagnosis Capable Programs

The client status in Dimension 3 is characterized by (a) or (b) or (c) or (d):

a. The client's psychiatric condition is stable, and he or she is assessed as having minimal problems in this area, as evidenced by both of the following: [1] the client's thought disorder, anxiety, guilt and/or depression may be related to substance use problems or to a stable co-occurring emotional, behavioral or cognitive condition, with dangerous consequences outside of a structured environment; and [2] the client is assessed as not posing a risk to self or others; or

b. The client's symptoms and functional deficits, when considered in the context of his or home environment, are sufficiently severe that he or she is assessed as not likely to maintain mental stability and/or abstinence if treatment is provided in a non-residential setting. Functional deficits may include but are not limited to: residual psychiatric symptoms, chronic addictive disorder, history of criminality, marginal intellectual ability, limited educational achievement, poor vocational skills, inadequate anger management skills, and the sequelae of physical, sexual or emotional trauma. These deficits may be complicated by problems in Dimensions 2 through



6; or

c. The client demonstrates (through distractibility, negative emotions, or generalized anxiety) an inability to maintain stable behavior over a 24-hour period without the structure and support of a 24-hour setting; or d. The client co-occurring psychiatric, emotional, behavioral, or cognitive conditions are being addressed concurrently through appropriate psychiatric services; or

e. The client's mental status (including emotional stability and cognitive functioning) is assessed as sufficiently stable to allow the client to participate in the therapeutic interventions provided at this level of care and to benefit from treatment.

Dual Diagnosis Enhanced Programs

The client's status in Dimension 3 is characterized by (a) or (b) and (c):

a. The client has a diagnosed emotional, behavioral, or cognitive disorder that requires monitoring of medications or assessment of psychiatric symptoms or behavioral management techniques, because the client's history suggest that these disorders are likely to distract him or her from treatment efforts; or b. The client needs monitoring of psychiatric symptoms concurrent with addictions treatment (as may occur in a client with borderline or compulsive personality disorder, anxiety or mood disorder, or persistent schizophrenic disorder in addition to a stabilizing Substance Dependence or Substance-Induced Disorder); and c. The client is assessed as able to safely access the community for work, education, and other community resources.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The client understands his or her addiction problems but is at risk of relapse in a less structured level of care because of inability to apply recovery skills; or

b. The client is at high risk of substance use without close 24-hour monitoring and structured support (as evidenced, for example, by lack of awareness of relapse triggers, difficulty postponing immediate gratification or ambivalence/resistance to treatment), and these issues are being addressed concurrently in a ASAM Level I and II.2 programs; or

c. The client needs staff support to maintain engagement in his or her recovery program while transitioning to life in the community; or

d. The client is at high risk of substance use or deteriorated mental functioning with dangerous emotional, behavioral or cognitive consequences, in the absence of close 24-hour structured support (as evidenced, by lack of awareness of relapse triggers, difficulty in postponing immediate gratification or ambivalence toward or resistance to treatment,) and these issues are being addressed concurrently in a Level II program.

Dual Diagnosis Enhanced Programs

The client status in Dimension 5 is characterized by psychiatric symptoms that pose a moderate risk of relapse to a substance dependence or mental disorder. Such a resident demonstrates limited ability to apply relapse prevention skills, as well as deteriorating psychiatric functioning, which increases his or her risk of serious consequences and requires the types of service and 24-hour structure of a Level III.1 Dual Diagnosis Enhanced program in order to maintain an adequate level of functioning.

The client who is receiving concurrent Level II and Level III.I services requires case management to coordinate the services across level of care may be necessary in managing anti-craving, psychotropic or opioid maintenance medications. Case management and collaboration across levels of care may be needed to manage anti craving, psychotropic or opioid maintenance medications. Preparation for transfer of the resident to a less intensive level of care and/or reentry into the community requires case management and staff exploration of supportive living environments, separately from their therapeutic work with the resident.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. The client has been living in an environment in which there is a high risk of initiation or repetition of physical, sexual or emotional abuse, or in which substance use is so endemic that the client is assessed as being unable



to achieve or maintain recovery; or

b. The client's social network involves living with an individual who is a regular user/abuser of alcohol/other drugs, or the client's living environment is so highly invested in drug use that recovery goals are assessed as unachievable; or

c. The client's social/interpersonal network is characterized by significant social isolation or withdrawal, such that recovery goals are assessed as unachievable in a level of care less intensive than ASAM Level III.I; or d. Continued exposure to the client's school, work or living environment makes recovery unlikely, and the resident has insufficient resources and skills to maintain an adequate level of functioning outside of a 24 hour supportive environment; or

e. The client is in danger of victimization by another and thus requires 24-hour supervision; or

f. The client is able to cope, for limited period of time, outside the 24-hour structure of a Level III.I program in order to pursue clinical, vocational, educational and community activities.

g. Dual Diagnosis Enhanced Programs

The client's status in Dimension 5 is characterized by severe and persistent mental illness. He or she may be too ill to benefit from skills training to learn to cope with problems in the recovery environment. Such a client requires planning for assertive community treatment, intensive case management or other community outreach and support services. The client's living working, social and/or community environment is not supportive of good mental health functioning. He or she has insufficient resources and skills to deal with this situation. Such a client needs the support and structure of a Level III.I Dual Diagnosis Enhanced program to achieve stabilization and prevent further deterioration.

Dimension 6: Person-Centered Considerations

The client meets one of the following:

a. The client recognizes and verbalizes specific relapse triggers and dysfunctional behaviors and their role in relapse, and is sufficiently cooperative to respond to treatment at this level of care; or

b. The client is assessed as appropriately placed at ASAM Level I (Outpatient) or ASAM Level II.1 (Intensive Outpatient) and is receiving ASAM Level III.I services concurrently; or

c. The client requires a 24-hour structured milieu to promote treatment progress and recovery, because motivating interventions have failed in the past and are assessed as not likely to succeed in the future in an outpatient setting; or

d. The client's perspective impairs his or her ability to make behavior changes without the support of a structured environment. For example, the client attributes his or her alcohol, drug or mental health problem to other persons or external events, rather than to a substance dependence or mental disorder. Interventions are assessed as not likely to succeed in an outpatient setting.

Dual Diagnosis Enhanced Programs

The client's status in Dimension 6 is characterized by ambivalence in his or her commitment to change a cooccurring mental health problem. Similarly, the client who is not consistently able to follow through with treatment, or who demonstrates minimal awareness of a problem, or who is unaware of the need to change requires active interventions with family, significant others and other external systems to create leverage and align incentives so as to promote engagement in treatment is appropriately placed in a Level III.1 Dual Diagnosis Enhanced program.

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances
- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with Psychiatric and Cognitive Conditions to a degree that render treatment at



- this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admission pursuant to Florida Statutes, Chapter 397
- 6. The individual refuses agreement to follow program structure/rules to such a degree as to render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

Meets ASAM PPC-2 continued stay criteria for this level of service:

Client meets criteria in at least one of six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Client is free from intoxication or withdrawal symptoms/risks.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by the following:

a. Biomedical conditions, if any, continue but are stable and do not require medical monitoring and the client is capable of self-administration of prescription medications.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. The client is making progress toward the resolution of emotional, behavioral, or cognitive conditions but has not made sufficient progress to allow discharge or transfer to a less intensive level of care; or

b. The client's mental status continues to be sufficiently stable to permit participation at this level of care.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by the following:

a. The client recognizes relapse triggers but cannot yet reliably apply sufficient coping skills to interrupt or postpone gratification, control impulsive behavior or avoid relapse-prone situations.

Dimension 5: Recovery Environment Interactions

The client's status in this dimension is characterized by one of the following:

a. The client's social network/recovery environment continues to manifest the non-supportive features present at admission and, despite active efforts of the client and professional staff, adequate recovery environment alternatives have not yet been secured; or

b. The client's interpersonal and social environment has remained the same or deteriorated, and continued care at ASAM Level III.3 is indicated to assist the client with the development of coping skills to deal with the current situation or to secure an alternative environment; or

c. There are logistical impediments in the recovery environment (distance/transportation problems) which precludes this level of treatment in a non-residential setting.

Dimension 6: Person-Centered Considerations

The client's status in this dimension is characterized by one of the following:

a. The client accepts responsibility for addressing his or her substance-related problems but continues to require professional interventions to sustain motivation in treatment; these are being provided concurrently in a ASAM Level I or II program; or

b. The client continues to be sufficiently cooperative to participate in treatment at this level of care.

DISCHARGE CRITERIA

Meets ASAM PPC-2 discharge criteria for this level of care:

The client meets criteria in at least one of the six dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characteristic of one of the following:

a. Client is free from intoxication or withdrawal symptoms/risks; or

b. The client exhibits symptoms of severe intoxication and/or withdrawal, which **can not** be safely managed at this level of care.

Dimension 2: Biomedical Conditions



The client's status in this dimension is characterized by one of the following:

a. Biomedical conditions, if any, can be managed through outpatient care, and the client **does not meet any of the continued service criteria** in this or another dimension that indicates the need for further treatment at ASAM Level III.I; or

b. The client's biomedical condition has deteriorated sufficiently to meet the criteria for admission to a more intensive level of care.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. Emotional, behavioral or cognitive conditions, if any, have diminished to a degree that daily availability of 24hour monitoring is no longer necessary, and the client **does not meet any criteria in this or another dimension that indicates the need for continued treatment at**

ASAM Level III.I; or

b. The client has experienced a worsening of Dimension 3 problems, which are interfering with treatment at ASAM Level III.I, and meets criteria for a more intensive level of care; or

c. The client has not responded to treatment in this dimension and has achieved maximum benefit from attempts to evoke behavior change.

Dimension 4: Substance Use-Related Risks

The client's status in this dimension is characterized by one of the following:

a. The risk of relapse is assessed as low as evidenced by 1) the client's ability to follow/complete a specific continuing care plan; 2) demonstration of sufficient recovery skills to allow successful participation in a less intensive recovery environment; and 3) the client **does not meet the criteria in this or another dimension indicating the need for continued service at ASAM Level III.I**; or

b. The client is not committed to continuing care and has achieved maximum benefits from all attempts to help him/her accept the need for continuing care and relapse prevention.

Dimension 5: Recovery Environment Interactions

The client meets (a) and (b) or (c):

a. The client is functioning adequately in life task areas of work, social and primary relationships, and **does not meet criteria in this or another dimension for continued care at ASAM Level III.I**; and

b. The client is prepared to live independently in the community or in a less structured environment, as evidenced by one of the following: 1) the client's social and interpersonal environment is sufficiently supportive to permit adherence to a self-directed recovery plan without substantial risk of relapse; 2) the client's usual environment is not supportive of recovery; but the resident has acquired the necessary coping skills to maintain recovery in that environment; or 3) the client has secured an alternative environment that is supportive of recovery; or

c. Problems related to the client's social and interpersonal environment continue or have intensified. The client has not learned the coping skills necessary to deal with the situation; and the client meets the criteria for referral to a more appropriate level of care.

Dimension 6: Person-Centered Considerations

The client meets (a) and (b) or (c):

a. The client no longer requires clinically directed interventions in this dimension, as evidenced by: 1) recognition of the severity of the substance related problem, an understanding of the self-defeating relationship with substances and of the triggers and dysfunctional behaviors related to continued to use; 2) application of the skills necessary to meet the objectives of the treatment plan; and 3) acceptance of the concept of continued care and participation in the development of an ongoing recovery plan; and

b. The client does not meet criteria for continued treatment at ASAM Level III.I; or

c. The client has consistently failed to meet treatment objectives and further progress is not likely to occur, despite persistent therapeutic efforts and treatment plan revisions. Thus, the client is being referred to a more appropriate level of care.



SUBSTANCE ABUSE RESIDENTIAL TREATMENT LEVEL 5: Adult

Residential treatment provides a structured, live-in environment within a non-hospital setting on a 24-hours-aday, 7-days per week basis. Level 5 programs are those that provide only housing and meals to individuals who are mandated to receive services at alternative locations in facilities that are owned and operated by the same provider. This level is appropriate for persons who need room and board while undergoing treatment. This level would utilize clinical services and other services that would be largely oriented and directed toward the individual's lifestyle and the individual's attitudinal and behavioral issues.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

- 1. Evidence of substance abuse/dependence
 - a. Member has been assessed by a trained professional(s) and
 - b. Symtomology meets criteria for ICD-10 substance abuse diagnosis and
- 2. There is reasonable expectation that the individual will be able to respond to intervention at this level of care

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances
- 3. The individual has medical impairments/conditions that renders treatment at this level of care ineffective/unsafe
- 4. The individual presents with Psychiatric and Cognitive Conditions to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admission pursuant to Florida Statutes, Chapter 397
- 6. The individual refuses agreement to follow program structure/rules to such a degree as to render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

The following criteria must all be met in order for treatment to continue at this level of care:

- 1. Admission criteria continues to be met
- 2. The individual's needs can not be better met by either a higher or lesser level of care
- 3. Need for continued intervention at this level of service is required to address lack of progress toward treatment goals or although progress is evident, specified goals of treatment have not yet been met
- 4. Continued intervention at this level of care is necessary to alleviate identified problems
- 5. Continued intervention at this level of care is required to maintain the individual so that the risk of needing a higher level of service is reduced

DISCHARGE CRITERIA

Discharge occurs when any one of the following criteria are met **and** there is no evidence that the individual is at risk for admission to services at a higher level of care:

- 1. Admission criteria for this level of service no longer met
- 2. Admission criteria for a lower level of care are met and is available/accessible
- 3. Admission criteria for a more acute level of care are met
- 4. Consent for treatment is withdrawn
- 5. Level of functioning shows improvement
- 6. The individual demonstrates the ability to maintain recovery without the need for services at this level of



care

- 7. Support systems are available that allow for a termination of services or for referral to a lower level of care
- 8. Maximum therapeutic progress has been achieved
- 9. Treatment goals and objectives have been met to significant degree
- 10. The individual/family is not meeting treatment goals as outlined on the treatment plan, and there is no reasonable expectation of progress at this level of care
- 11. Physical condition is such that individual is unable to participate in services at this level of care
- 12. The individual refuses to participate in treatment to such a degree that that continued treatment at this level of care is ineffective and/or unsafe. Documentation of attempts to address this issue is found in the medical record
- 13. The individual refuses to follow program rules and regulations to such a degree that continued treatment at this level of care is ineffective and/or unsafe



SUBSTANCE ABUSE ADDICTIONS RECEIVING FACILITY: Adolescent

An addiction receiving facility is a community-based facility designated by the Department of Children and Families to receive, screen, and assess individuals found to be substance abuse impaired, in need of emergency treatment for substance abuse impairment, or impaired by substance abuse to such an extent as to meet criteria for involuntary admission in s. 397.675, and to provide detoxification and stabilization. Addiction receiving facilities are designated as secure facilities to provide an intensive level of care.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

- 1. Evidence of substance abuse/dependence
 - a. Member has been assessed by a trained professional(s) and
 - b. Symtomology meets criteria for ICD-10 substance abuse diagnosis and
- 2. There is reasonable expectation that the individual will be able to respond to intervention at this level of care and
- 3. Must meet ASAM Admission criteria for adolescent addictions receiving facility as outlined below:
- ASAM Requirements Meets criteria in dimension one.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. The client is experiencing signs and symptoms of withdrawal, or there is evidence that withdrawal is evident. The client is assessed as not being at risk for severe withdrawal, and moderate withdrawal syndrome is safely manageable at this level of care; or

b. The client is assessed as not requiring medication, but requires this level of service to complete detoxification and enter into continued treatment or self-help recovery because of inadequate home supervision or support structure, as evidenced by meeting [1], [2], or [3]:

[1] The client's recovery environment is not supportive of detoxification and entry into treatment, and the client does not have sufficient coping skills to safely deal with the problems in the recovery environment; or

[2] The client has a recent history of detoxification at less intensive levels of service that is marked by inability to complete detoxification or to enter into continuing addiction treatment, and the client continues to have insufficient skills to complete detoxification; or

[3] The client recently has demonstrated an inability to complete detoxification at a less intensive level of service, as exhibited by continued use of other-than-prescribed drugs or other mind-altering substances.

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances
- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with emotional, behavioral, or cognitive conditions and complications to a degree that render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

ASAM Requirements Client meets criteria in Dimension 1.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. The client continues in ASAM Level III.2-D until withdrawal signs and symptoms are sufficiently resolved that the client can safely be managed at a less intensive level of care; or



b. Signs and symptoms of withdrawal have failed to respond to treatment and have intensified, such that transfer to a more intensive level of detoxification service is indicated.

DISCHARGE CRITERIA

ASAM Requirements Meets diagnostic criteria in Dimension 1.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client's withdrawal signs and symptoms are sufficiently resolved that the client can be managed at a less intensive level of care; or

b. Signs and symptoms of withdrawal have failed to respond to treatment and have intensified, such that a transfer to ASAM Level IV-D is indicated.



SUBSTANCE ABUSE ADDICTIONS RECEIVING FACILITY: Adult

An addiction receiving facility is a community-based facility designated by the Department of Children and Families to receive, screen, and assess individuals found to be substance abuse impaired, in need of emergency treatment for substance abuse impairment, or impaired by substance abuse to such an extent as to meet criteria for involuntary admission in s. 397.675, and to provide detoxification and stabilization. Addiction receiving facilities are designated as secure facilities to provide an intensive level of care.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

- 1. Evidence of substance abuse/dependence
 - a. Member has been assessed by a trained professional(s) and
 - b. Symtomology meets criteria for ICD-10 substance abuse diagnosis and
- 2. There is reasonable expectation that the individual will be able to respond to intervention at this level of care and
- 3. Must meet ASAM Admission criteria for adult addictions receiving facility as outlined below:

ASAM Requirements Admission to this level of care requires that the client meet the criteria in Dimension 1. **Dimension 1:** Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. The client is experiencing signs and symptoms of withdrawal, or there is evidence that withdrawal is evident. The patient is assessed as not being at risk for severe withdrawal, and moderate withdrawal syndrome is safely manageable at this level of care; or

b. The client is assessed as not requiring medication but requires this level of service to complete detoxification and enter into continued treatment or self-help recovery because of inadequate home supervision or support structure.

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is abusing substances
- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with Psychiatric and Cognitive Conditions to a degree that render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

Meets ASAM continued stay criteria:

Client meets criteria in Dimension 1.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. The client continues in ASAM Level III.2-D until withdrawal signs and symptoms are sufficiently resolved that the client can safely be managed at a less intensive level of care; or

b. Signs and symptoms of withdrawal have failed to respond to treatment and have intensified, such that transfer to a more intensive level of detoxification service is indicated.

DISCHARGE CRITERIA

Meets ASAM discharge criteria:

The client meets criteria in Dimensions 1, 2, and 3 for discharge or transfer.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications



The client's status in this dimension is characterized by one of the following:

a. Client's withdrawal signs and symptoms are sufficiently resolved that the client can be safely managed at a less intensive level of care; or

b. Signs or symptoms of withdrawal have failed to respond to treatment and have intensified, such that a transfer to a more intensive level is indicated.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. Biomedical conditions, if any, have diminished or stabilized, and the client does not meet criteria that indicates the need for continued service at Level III.7-D level of care; or

b. A biomedical condition is complicating the detoxification process, such that a transfer to a more intensive level of detoxification is indicated.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. Emotional, behavioral, or cognitive conditions, if any, have diminished or stabilized, and the client does not meet criteria in this dimension that indicates the need for continued service at Level III.7-D; or

b. A psychiatric, emotional, behavioral, or cognitive condition is complicating the detoxification process, such that a transfer to a more intensive level is indicated.



SUBSTANCE ABUSE DETOXIFICATION: Adolescent

Detoxification programs utilize medical and psychological procedures and a supportive counseling regimen to assist individuals in managing toxicity and withdrawing and stabilizing from the physiological and psychological effects of substance abuse impairment. Adolescent detoxification is a medically-monitored inpatient program.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

Meets ASAM criteria for admission as outlined below:

Client meets criteria of at least one of the three dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Severe withdrawal but manageable in this level of care requires the client meet a or b:

a. The client is experiencing signs and symptoms of severe withdrawal, or there is evidence that severe withdrawal symptoms are imminent. The severe withdrawal syndrome is assessed as manageable at this level of care; or

b. There is a strong likelihood that the client, who requires medication, will not complete detoxification at another level of service and enter into continued treatment or self-help recovery.

[1] The client requires medication and has a recent history of detoxification at a less intensive level of care, marked by past and current inability to complete detoxification and enter into continuing addiction treatment. The client continues to have insufficient skills or supports to complete detoxification; or

[2] The client has a recent history of detoxification at less intensive levels of service that is marked by the inability to complete detoxification or to enter into continuing addiction treatment, and the client continues to have insufficient skills to complete detoxification; or

[3] The client has a comorbid physical, emotional, behavioral, or cognitive condition that is manageable in a Level III.7-D setting but which increases the clinical severity of the withdrawal and complicates detoxification.

Dimension 2: Biomedical Conditions

The client's co-morbid physical condition, if any, is manageable in an ASAM Level III.7-D setting but increases the clinical severity of the withdrawal and complicates detoxification.

Dimension 3: Psychiatric and Cognitive Conditions

The client's co-morbid emotional, behavioral or cognitive condition, if any, is manageable in an ASAM Level III.7-D setting but increases the clinical severity of the withdrawal and complicates detoxification.

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is intoxicated or in withdrawal
- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with emotional, behavioral, or cognitive conditions and complications to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admissions pursuant to Florida Statutes Chapter 397
- 6. The individual/caregiver refuses agreement to follow program structure/rules to such a degree to render treatment at this level of care ineffective/unsafe

CONTINUED STAY CRITERIA

Meets ASAM continued stay criteria as outlined below: Meets criteria in Dimension 1.



Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Continues in this level of care until withdrawal signs and symptoms are sufficiently resolved that the client can be safely managed at a less intensive level of care; or

b. Signs and symptoms of withdrawal have failed to respond to treatment and have intensified, such that transfer to a less intensive level of service is indicated.

DISCHARGE CRITERIA

Meets ASAM discharge criteria as outlined below:

The client meets criteria in Dimensions 1, 2, and 3 for discharge or transfer.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client's withdrawal signs and symptoms are sufficiently resolved that the client can be safely managed at a less intensive level of care; or

b. Signs or symptoms of withdrawal have failed to respond to treatment and have intensified, such that a transfer to a less intensive level of care is indicated.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

a. Biomedical conditions, if any, have diminished or stabilized, and the client does not meet criteria that indicates the need for continued service at ASAM Level III.7-D level of care; or

b. A biomedical condition is complicating the detoxification process, such that a transfer to a less intensive level of service is indicated.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

a. Emotional, behavioral or cognitive conditions, if any, have diminished or stabilized, and the client does not meet criteria in this dimension that indicates the need for continued service at ASAM Level III.7-D; or

b. A psychiatric, emotional/ behavioral condition is complicating the detoxification process, such that a transfer to less intensive level of service is indicated.



SUBSTANCE ABUSE DETOXIFICATION: Adult

Detoxification is a process involving sub-acute care that is provided to assist individuals to withdraw from the physiological and psychological effects of substance abuse.

ICD-10 DIAGNOSIS

F10.10 through F19.99

ADMISSION CRITERIA

Meets ASAM admission criteria as outlined below:

Client meets criteria of at least one of the three dimensions.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

Severe withdrawal but manageable in this level of care requires the client meet a or b:

a. The client is experiencing signs and symptoms of severe withdrawal, or there is evidence that severe withdrawal symptoms are imminent. The severe withdrawal syndrome is assessed as manageable at this level of care; or

b. There is a strong likelihood that the client, who requires medication, will not complete detoxification at another level of service and enter into continued treatment or self-help recovery.

[1.] The client requires medication and has a recent history of detoxification at a less intensive level of care, marked by past and current inability to complete detoxification and enter into continuing addiction treatment. The client continues to have insufficient skills or supports to complete detoxification; or

[2.] The client has a recent history of detoxification at less intensive levels of service that is marked by the inability to complete detoxification or to enter into continuing addiction treatment, and the client continues to have insufficient skills to complete detoxification; or

[3.] The client has a comorbid physical emotional, behavioral, or cognitive condition that is manageable in a level III.7-D setting but which increases the clinical severity of the withdrawal and complicates detoxification.

Dimension 2: Biomedical Conditions

The client's co-morbid physical condition, if any, is manageable in an ASAM Level III.7-D setting but increases the clinical severity of the withdrawal and complicates detoxification.

Dimension 3: Psychiatric and Cognitive Conditions

The client's co-morbid emotional, behavioral, or cognitive condition, if any, is manageable in an ASAM Level III.7-D setting but increases the clinical severity of the withdrawal and complicates detoxification.

EXCLUSION CRITERIA

- 1. The individual is assessed as needing a more/less intensive level of care and:
 - a. Such a program is available to the individual
 - b. Such a program is accessible to the individual
- 2. There is no evidence that the individual is intoxicated or at risk of substance withdrawal
- 3. The individual has medical impairments/conditions that render treatment at this level of care ineffective/unsafe
- 4. The individual presents with emotional, behavioral, or cognitive conditions and complications to a degree that render treatment at this level of care ineffective/unsafe
- 5. The individual refuses agreement to follow program structure/rules to such a degree as to render treatment at this level of care ineffective/unsafe
- 6. The individual does not give voluntary consent for treatment at this level of care or there is no order to treatment for involuntary admission pursuant to Florida Statutes, Chapter 397

CONTINUED STAY CRITERIA

Meets continued stay criteria as outlined below: Meets criteria in Dimension 1. Dimension 1: Intoxication, Withdrawal, and Addiction Medications



The client's status in this dimension is characterized by one of the following:

a. Continues in this level of care until withdrawal signs and symptoms are sufficiently resolved that the client can be safely managed at a less intensive level of care; or

b. Signs and symptoms of withdrawal have failed to respond to treatment and have intensified, such that transfer to a more intensive level of service is indicated.

DISCHARGE CRITERIA

Meets ASAM discharge criteria as outlined below:

The client meets criteria in Dimensions 1, 2, and 3 for discharge or transfer.

Dimension 1: Intoxication, Withdrawal, and Addiction Medications

The client's status in this dimension is characterized by one of the following:

a. Client's withdrawal signs and symptoms are sufficiently resolved that the client can be safely managed at a less intensive level of care; or

b. Signs or symptoms of withdrawal have failed to respond to treatment and have intensified, such that a transfer to a more intensive level of care is indicated.

Dimension 2: Biomedical Conditions

The client's status in this dimension is characterized by one of the following:

c. Biomedical conditions, if any, have diminished or stabilized, and the client does not meet criteria that indicates the need for continued service at ASAM Level III.7-D level of care; or

d. A biomedical condition is complicating the detoxification process, such that a transfer to a more intensive level of care is indicated.

Dimension 3: Psychiatric and Cognitive Conditions

The client's status in this dimension is characterized by one of the following:

c. Emotional, behavioral, or cognitive conditions, if any, have diminished or stabilized, and the client does not meet criteria in this dimension that indicates the need for continued service at ASAM Level III.7-D; or

d. A psychiatric, emotional, behavioral, or cognitive condition is complicating the detoxification process, such that a transfer to a more intensive level of care is indicated.