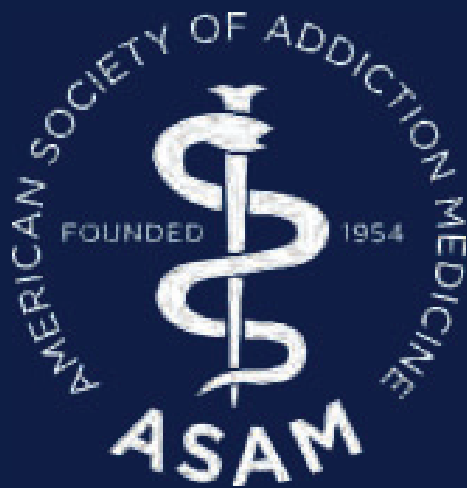




ASAM

American Society *of*
Addiction Medicine



ABOUT ASAM

ASAM, founded in 1954, is a professional medical society representing over 7,500 physicians, clinicians, and associated professionals in the field of addiction medicine. ASAM is dedicated to increasing access and improving the quality of addiction treatment, educating physicians and the public, supporting research and prevention, and promoting the appropriate role of physicians in the care of patients with addiction.

Nomenclature

Patient vs Client vs Individual

The ASAM Criteria uses the term "patient" when referring to individuals receiving addiction treatment. The term patient is predominantly used in healthcare settings across the country and emphasizes that addiction is an illness that requires treatment. ASAM recognizes that the term patient is often used interchangeably with client/consumer/recipient/individual, which is used more commonly in nonmedical settings.

SESSION 1

INTRODUCTION TO THE FOURTH EDITION OF THE ASAM CRITERIA

70 minutes

Session 1

Learning Objectives

- 01 | Employ the underlying principles and concepts of *The ASAM Criteria*.
- 02 | Identify key components of *The ASAM Criteria* Fourth Edition and implement them into practice.

ASAM Definition of Addiction

“ Addiction is a **treatable, chronic medical** disease involving complex interactions among brain circuits, genetics, the environment, and an individual's life experiences. People with addiction use substances or engage in behaviors that become compulsive and often continue despite harmful consequences.

Prevention efforts and treatment approaches for addiction are generally as successful as those for other chronic diseases.”

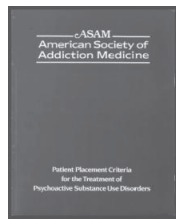
- Adopted by the ASAM Board of Directors, September 15, 2019

An Introduction to *The ASAM Criteria*

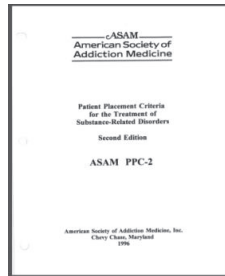
The ASAM Criteria is the most widely used and comprehensive set of standards for level of care recommendations, continued service, and care transitions for individuals with addiction and co-occurring conditions.

History of *The ASAM Criteria*

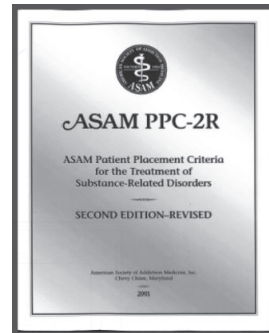
1991



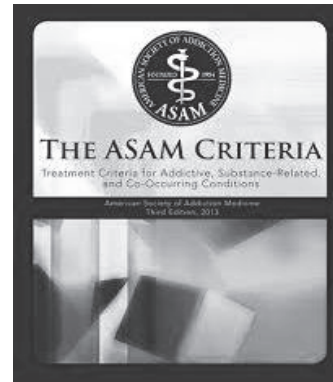
1996



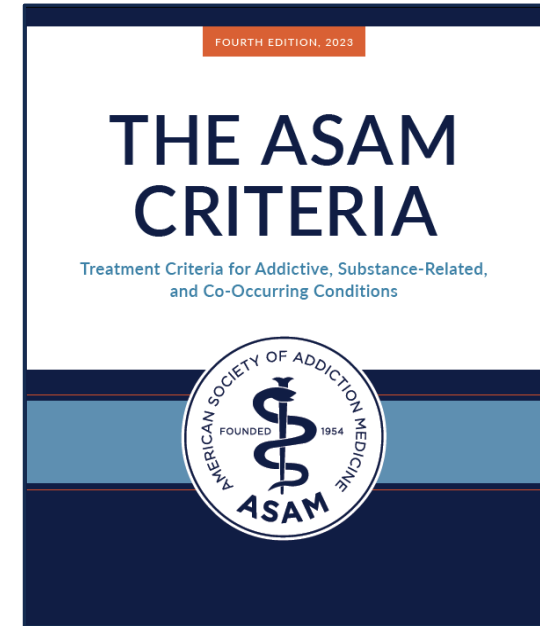
2001



2013



2023



Principles

of The ASAM Criteria

- Admission into treatment is based on patient needs.
- Multidimensional assessment addresses the broad biological, psychological, social, and cultural factors that contribute to addiction and recovery.
- Treatment plans are individualized based on patient needs and preferences.
- Care is interdisciplinary, evidence-based, patient-centered, and delivered from a place of empathy.
- Co-occurring conditions are an expectation, not an exception.
- Patients move along the continuum of care based on their progress.
- Informed consent and shared decision-making accompany treatment decisions.

Purpose

of The ASAM Criteria

- Promote individualized and holistic treatment planning.
- Guide clinicians and care managers in making objective decisions about patient admission, continuing care, and movement along the continuum of care.
- Provide a consistent way to:
 - Assess patients' biopsychosocial circumstances to identify the appropriate level of care.
 - Develop comprehensive, individualized, and patient-centered treatment plans.
 - Define the services that should be available at each level of care.

Notable Fourth Edition Updates

Goals of the Fourth Edition



Update the standards to reflect the current state of science and practice.



Further promote a chronic care model that supports seamless movement along the care continuum.



Facilitate patient-centered, holistic, integrated care.



Improve clarity and simplify where possible to support more effective implementations.

Changes to *The ASAM Criteria* Dimensions in the Fourth Edition

Third Edition

1 Acute Intoxication and/or Withdrawal Potential

2 Biomedical Conditions and Complications

3 Emotional, Behavioral, or Cognitive Conditions and Complications

4 Readiness to Change

5 Relapse, Continued Use, or Continued Problem Potential

6 Recovery/Living Environment

Fourth Edition

1 Intoxication, Withdrawal, and Addiction Medications

2 Biomedical Conditions

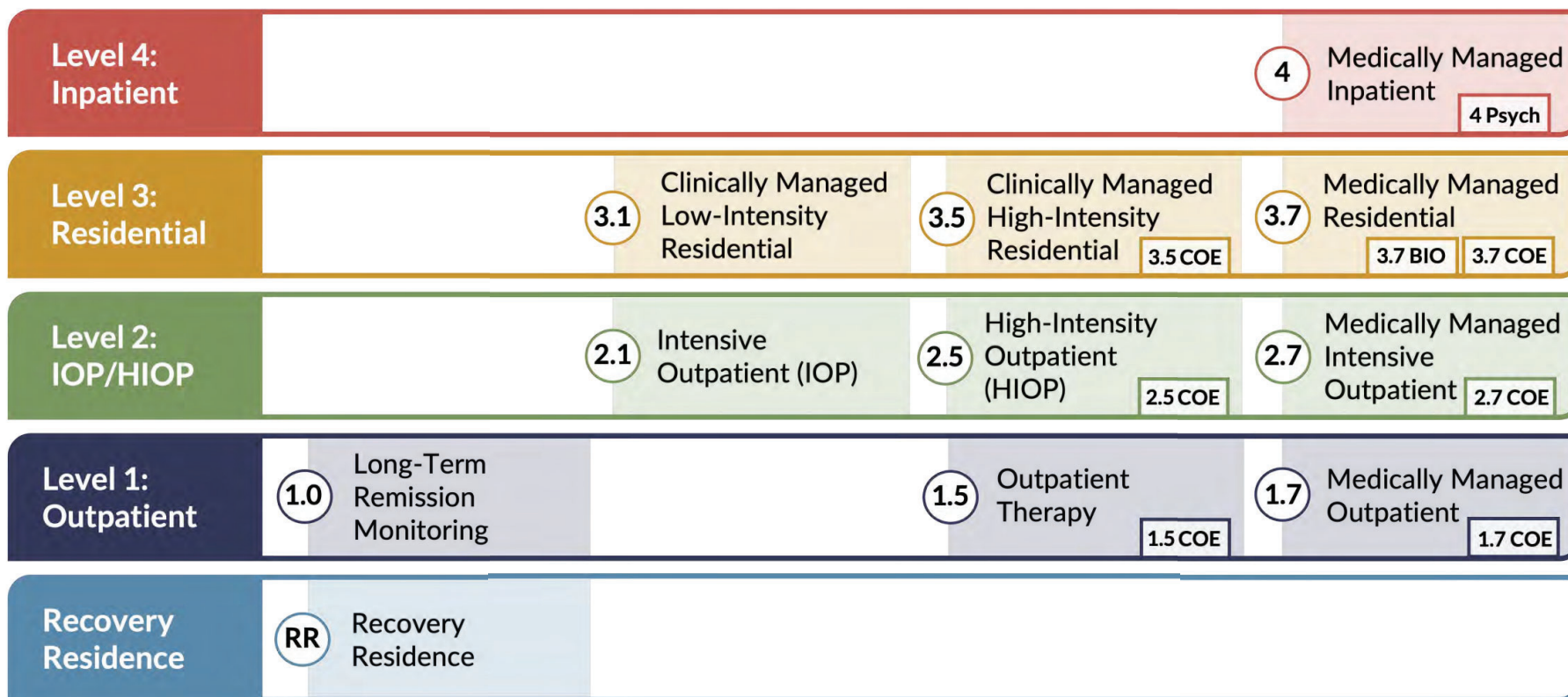
3 Psychiatric and Cognitive Conditions

4 Substance Use-Related Risks

5 Recovery Environment Interactions

NEW 6 Person-Centered Considerations

The ASAM Criteria Continuum of Care for Adult Addiction Treatment



Level of Care Changes



Removing Level 0.5. Early intervention and prevention are addressed in a new chapter.



Removing Level 3.3. Reflecting that cognitive deficits should be addressed in all levels of care.



Level 3.2 withdrawal management services integrated into Level 3.5.



Recovery support service expectations at each level of care.



Expectation that all levels of care be co-occurring capable at minimum.

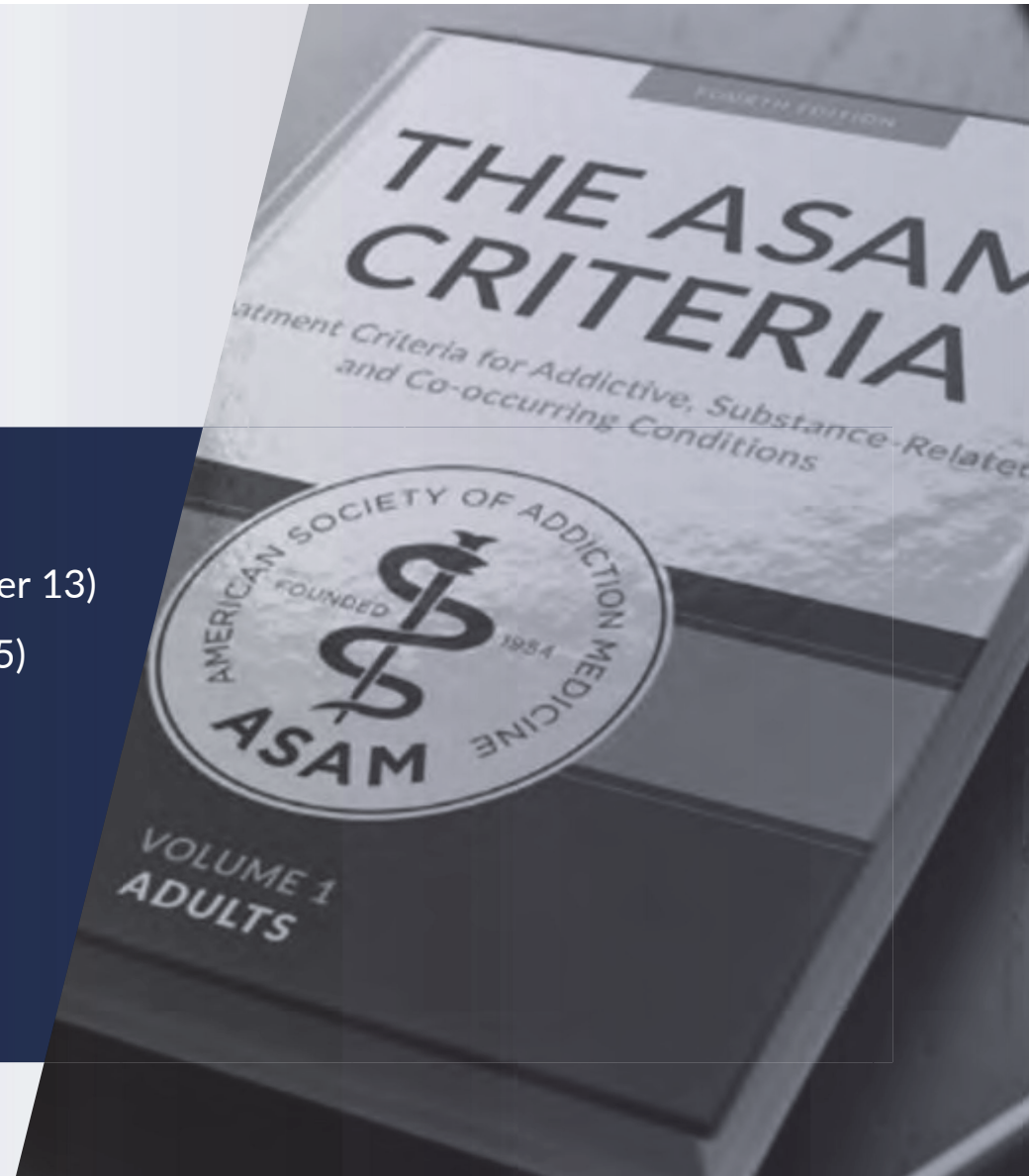


Adding harm reduction as a component of individualized care.

New Content

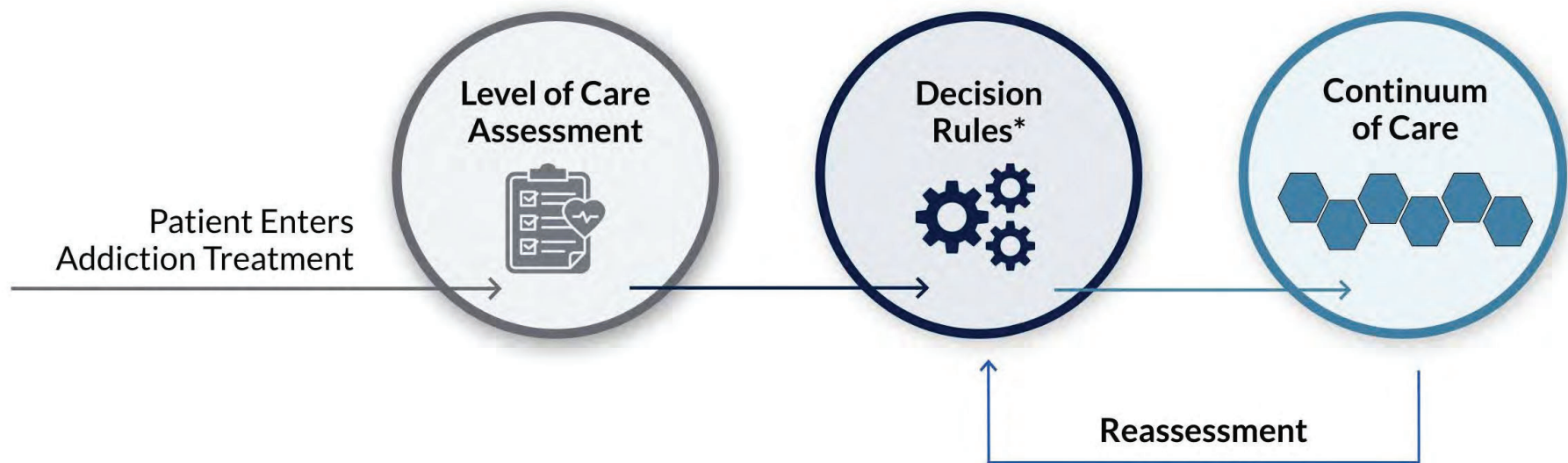
Textbook Chapters

- Treatment Planning (Chapter 9)
- Telehealth and Other Health Technologies (Chapter 13)
- Integrating Recovery Support Services (Chapter 15)
- Integrating Trauma-Sensitive Practices, Culturally Humble Care, and Social Determinants of Health (Chapter 16)
- Addressing Pain (Chapter 18)
- Addressing Cognitive Impairment (Chapter 19)



Components of *The ASAM Criteria*

Core Components of *The ASAM Criteria*



* Decision Rules include the Dimensional Admission Criteria and the transition and continued service criteria

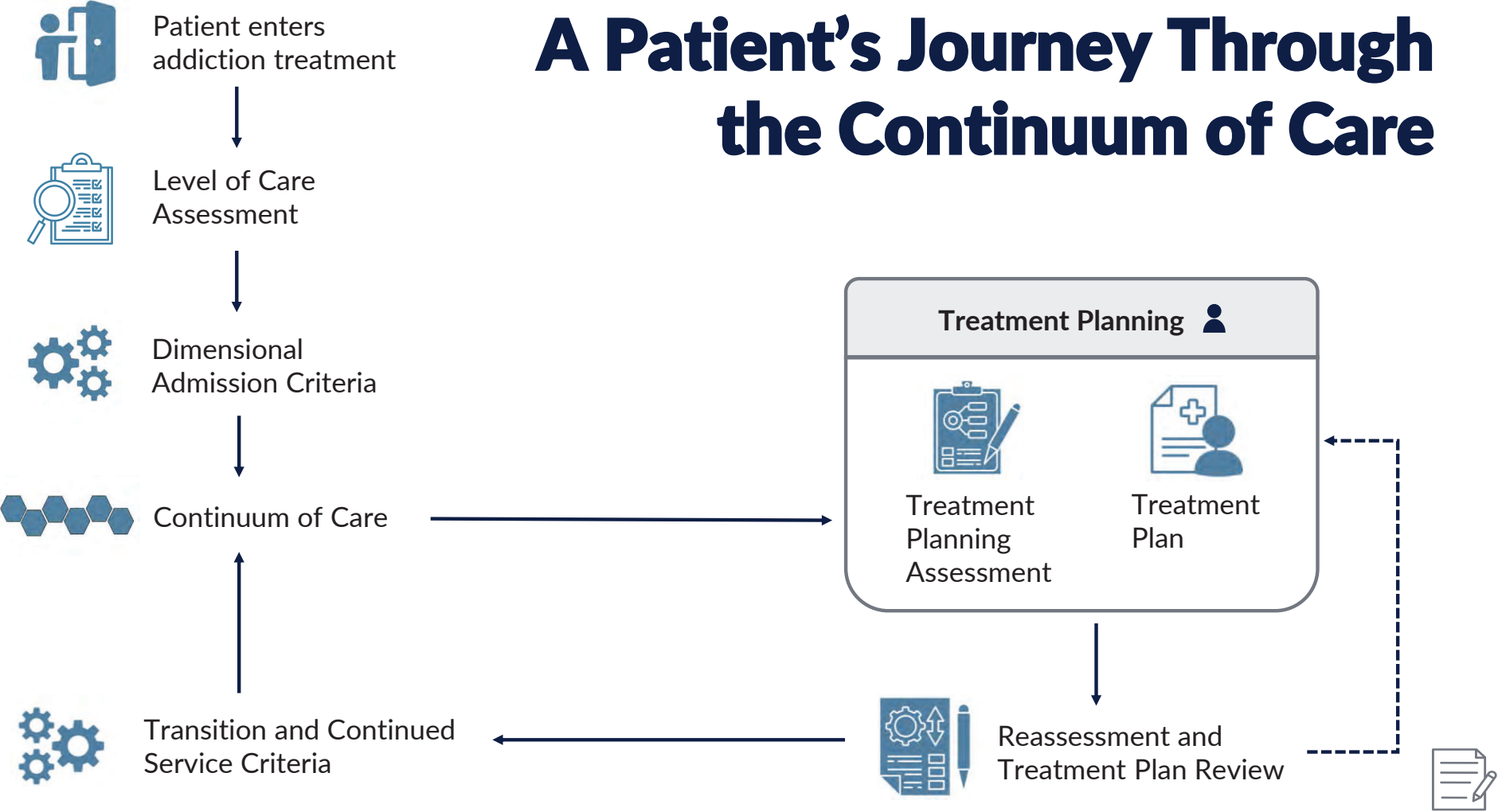
ASAM Criteria Assessments

The Fourth Edition describes separate standards for:

- *The ASAM Criteria Level of Care Assessment*
- *The ASAM Criteria Treatment Planning Assessment*

Both assessments are multidimensional and consider the patient's full biological, psychological, and sociocultural context.

A Patient's Journey Through the Continuum of Care



Level of Care Assessment



Patient enters
addiction
treatment



Assess
Dimensions 1-5



Apply Dimensional
Admission Criteria

Level of Care Recommendation



Assess
Dimension 6

Level of Care selection



Continuum
of Care

- Level of care recommendations are based on the assessment of Dimensions 1-5.
- Dimension 6 involves a shared decision-making process to determine where the patient is able and willing to engage in treatment.



Treatment Planning Assessment


Patient admitted to treatment


Continuum of Care Level of Care Selection


Transition and Continued Service Criteria

Every patient should be regularly reassessed to determine if any treatment needs have changed and if they need to transition to a new level of care.


Treatment Planning Assessment


Treatment Plan


Reassessment and Treatment Plan Review



Speaking the Same Language



PAYERS



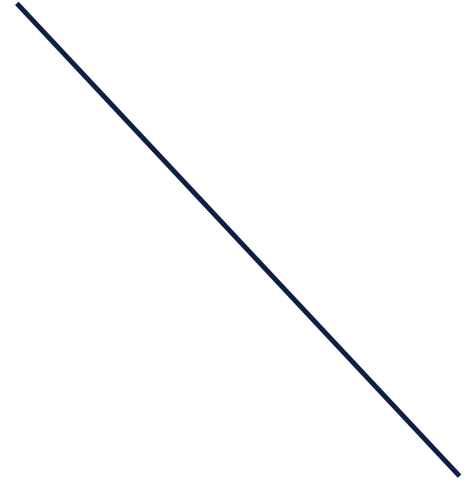
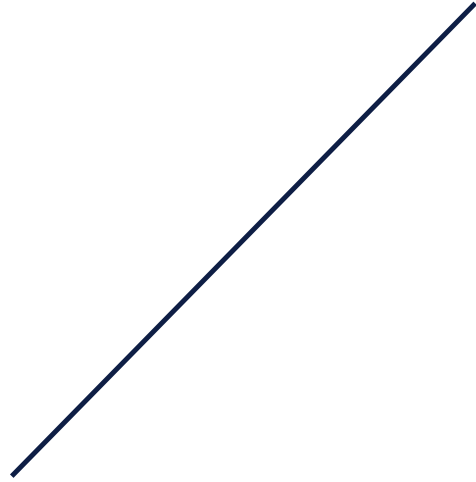
PATIENT



PROVIDERS



POLICY MAKERS



Defining Medical Necessity

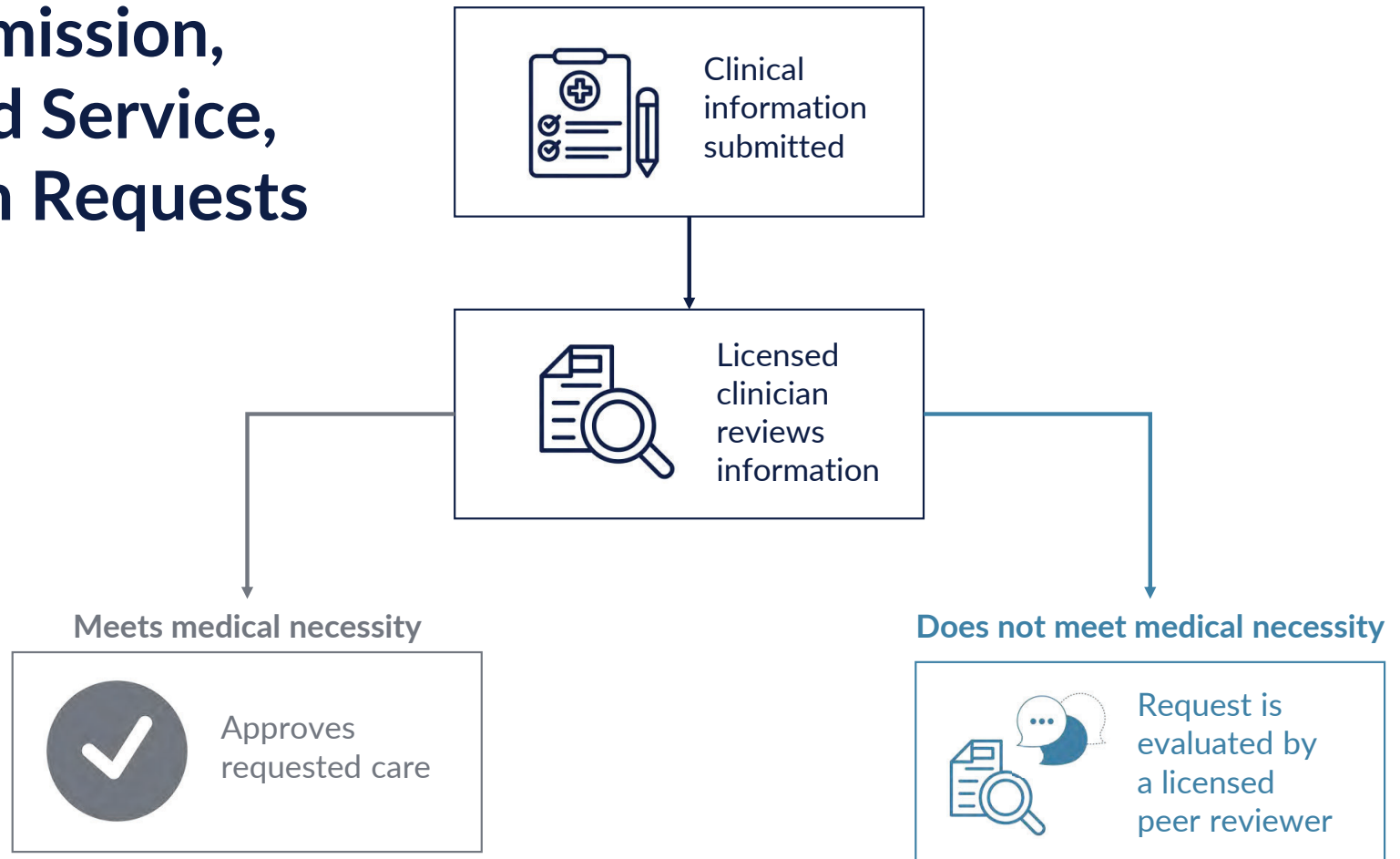
- Healthcare services in which a clinician exercises prudent clinical judgment to provide treatment services to a patient.
- Healthcare services are in accordance with the general standards of addiction medicine.
- Medical necessity criteria is inclusive of clinical necessity criteria.
- Medical necessity refers to patient care needs across **all dimensions**.



Utilization Management

- **Dimensional Admission Criteria**
Used for the initial clinical case review
- **Transition and Continued Service Criteria**
Used for making determinations regarding when a patient should be transitioned to a more or less intensive level of care

Initial Admission, Continued Service, Transition Requests



The ASAM Criteria facilitates the capacity for the utilization management process to be collaborative while also identifying specific areas where additional information may be needed, allowing for bi-directional feedback between peer reviewers and providers.