ASAM PLACEMENT TOOL OVERVIEW AND DEMONSTRATION

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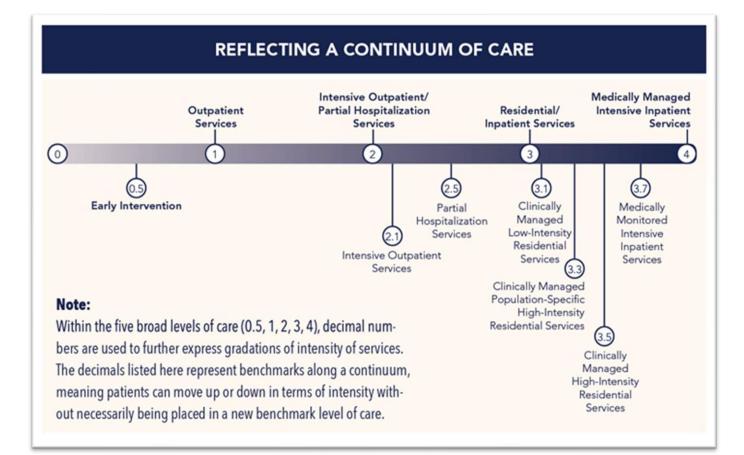
Oklahoma Department of Mental Health and Substance Abuse Services





ASAM OVERVIEW

- The American Society of Addiction Medicine (ASAM) categorizes services for substance use disorders into five broad levels of services, ranging from Level 0.5 (early intervention) to Level 4 (inpatient). Within those levels, decimal numbers are used to further specify the service continuum.
- With the implementation of the State's IMD Waiver, alignment with ASAM is required for residential level of care services (ASAM Level 3) that are newly eligible for Medicaid reimbursement.





ASAM Level 3 is the broad level of care that refers to residential services and encompasses ASAM levels 3.1, 3.3, 3.5 and 3.7.

- **ASAM Level 3.1** is called Clinically Managed Low-Intensity Residential Services for adolescents and adults. The corresponding service description for this level of care is Halfway House Services.
- **ASAM Level 3.3** is called Clinically Managed Population-Specific High-Intensity Residential Services. The corresponding service description for this level of care is Residential Treatment for Adults with Co-Occurring Disorders.
- **ASAM Level 3.5** is called Clinically Managed Medium-Intensity Residential Services for adolescents and Clinically Managed High-Intensity Residential Services for adults. The corresponding service descriptions for this level of care are Residential Treatment and Intensive Residential Treatment.
- **ASAM Level 3.7** is called Medically Monitored High-Intensity Inpatient Services for adolescents and Medically Monitored Intensive Inpatient Withdrawal Management for adults. The corresponding service description for this level of care is Medically Supervised Withdrawal Management.

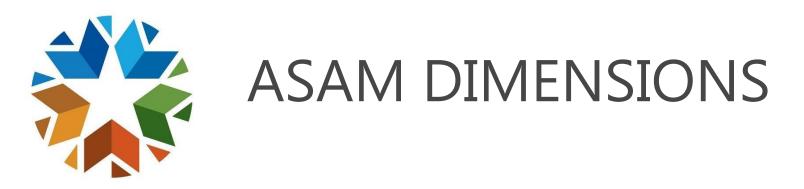
PURPOSE OF ASAM PLACEMENT TOOL

- When an individual presents at an outpatient provider agency, and it appears they may need residential level of care substance use disorder treatment, the ASAM Placement Tool is completed. This tool may also be completed by the residential level of care provider for walk-ins.
- The ASAM placement tool determines if the individual is appropriate for residential level of care services and what specific ASAM level of care of is most aligned with the individual's needs: ASAM 3.1 (Halfway House), ASAM 3.3 (Co-Occurring Residential), ASAM 3.5 (Residential/Intensive Residential), or ASAM 3.7 (Medically Supervised Withdrawal Management).
- This tool and process supports the goal of the least restrictive/lowest level of care for consumers while also aligning with federal Medicaid requirements and best practice. The tool also provides an objective prior authorization process for higher levels of care.
- The new tool replaces the ODASL (Oklahoma Determination of ASAM Service Level) for referral to substance use disorder services.



The tool is generally completed at outpatient SUD facilities and is used to refer clients to higher levels of care if needed. Residential providers may also complete the tool for walk-ins, if necessary, in conjunction with an Addiction Severity Index (ASI) completed by an LBHP.

- The ASAM Tool may be completed with or without the ASI.
- Residential level of care providers must utilize an ASI Assessment completed by an LBHP when administering the ASAM.



There are six dimensions with risk levels 0-4 for each. With the exception of Dimension IV, an initial indication of a risk level 2 or greater will require additional information to be entered.

Dimension I – Acute Intoxication and/or Withdrawal Potential

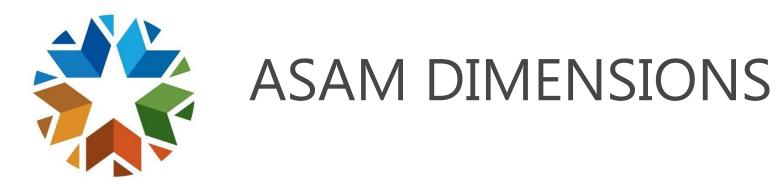
- \circ Length of sobriety
- Substance used
- Presence of withdrawal symptoms/intoxication

Dimension II – Biomedical Conditions and Complications

- Acute or chronic medical conditions
- Need for medical care

Dimension III – Emotional, Behavioral, or Cognitive Conditions and Complications

 $\circ~$ Mental health needs



Dimension IV – Readiness to Change

- o Engagement in treatment
- Recognition of problem areas

Dimension V – Relapse, Continued Use, or Continued Problem Potential

- \circ Risk of relapse
- Ability to recognize triggers

Dimension VI – Recovery/Living Environment

- How the individual's environment/resources do or do not support recovery
- Relationships/school/employment
- \circ Use of free time



REFERRAL TO TREATMENT

- To determine if an individual meets the appropriate ASAM level for residential treatment, the outpatient provider goes to PICIS, clicks on the ASAM link, searches for the client's CDC, and inputs scores.
- ASAM placement can be attached to transaction types 21, 23, 27, 40, 41, or 42. The transaction date must not be more than 30 days old and only one ASAM can be added to a CDC. Providers are allowed one edit to an ASAM if a correction is needed.
- Once the ASAM placement is completed in PICIS, the ASAM level of care score will be generated. If residential treatment is for appropriate the individual, the outpatient provider will be taken to the bed availability list and find a bed at a residential treatment facility with the appropriate ASAM level.
- Once a release of information is obtained from the individual, the outpatient provider will make a referral to the residential treatment provider.



REFERRAL TO TREATMENT

- The residential treatment provider can enter the Member ID in the PICIS reports (Residential TX Reports > Residential Treatment Providers > ASAM Placements For Admissions) and see the ASAM scores to ensure the client is appropriate for that level of care.
- For outpatient providers to view completed ASAMs placements they can either view the completed ASAM using the ASAM record search in PICIS, or it can be viewed in PICIS reports (Residential TX Reports > Outpatient Providers > Completed ASAM Placements).
- If an individual presents at the residential treatment facility, the provider will search for the member ID in the PICIS reports (Residential TX Reports > Residential Treatment Providers > ASAM Placements For Admissions) to see if an ASAM placement has been completed within the last 30 days. If no scores are found or the scores are more than 30 days old, the residential treatment provider will do a transaction type 21 and complete ASAM and ASI. The ASAM scores will be entered into PICIS, and if residential treatment is appropriate for the individual, a transaction type 23 will be done to admit the client.

ASAM PLACEMENT TOOL AND PRIOR AUTHORIZATION

- If it the ASAM placement tool is completed and determines the individual is appropriate for residential level of care treatment, the placement tool will allow for a prior authorization for treatment of up to 30 days to be submitted starting at time of admission to the residential level of care facility.
- Residential level of care providers may request extensions of this initial prior authorization in 30 day increments by completing the ASAM placement tool again for each extension.
- The Institutions for Mental Disease (IMD) Waiver requires a statewide 30-day average length of stay for Medicaid stays within residential level of care providers. ODMHSAS will monitor this regularly and the new prior authorization process will support this goal.
 - While there is no individual maximum length of stay, how long an individual stays in a particular facility/treatment level should be regularly evaluated to ensure he or she is at the least restrictive, most appropriate level of care for the right length of time.



ACCESSING THE ASAM PLACEMENT TOOL

- An ASAM link has been added in PICIS. Providers will utilize the online system to complete the tool.
- Providers can also access necessary ASAM placement information for clients they are serving through PICIS.

	Navigation
	Home
	CDC Search
	PA Adjustment
_	10C/LOT
	ASAM
	Reports
	View LOT Approval

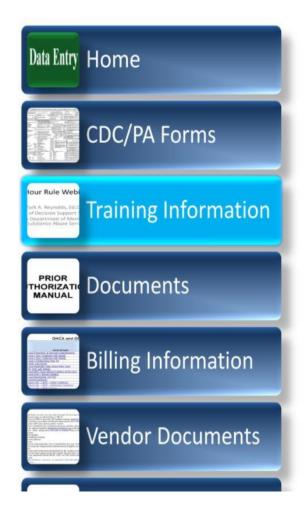


TRAINING DOCUMENTS

• ASAM Placement Instructions and a video tutorial are available on the ODMHSAS ARC website.

ODMHSAS Contracted/Operated Residential Treatment Provider

- ASAM Placement Intructions
- Full Verison ASAM Placement Video
- ODMHSAS Bed Availability List





Presented by the Oklahoma Department of Mental Health and Substance Abuse Services