

LEVEL 3.7 MEDICALLY MONITORED INTENSIVE INPATIENT CO-OCCURRING ENHANCED SERVICES BY SERVICE CHARACTERISTICS ¹

I. SETTING

No additional sub-service characteristics.

II. SUPPORT SYSTEMS (4 sub-service characteristics)

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

II.1. Level 3.7 enhanced co-occurring programs offer appropriate psychiatric services, medication evaluation, and laboratory services (*The ASAM Criteria, p 267*).

Patients admitted to Level 3.7 co-occurring enhanced programs meet the diagnostic criteria for both a mental disorder and substance use disorder. Providing active psychiatric services, including medication evaluation and laboratory services, is a defining service characteristic of the co-occurring intensity of service.

II.2. A psychiatrist assesses the patient within 4 hours of admission by telephone and within 24 hours following admission in person, or sooner, as appropriate to the patient's behavioral health condition, and thereafter as medically necessary (the services of another physician may be required for biomedical concerns) (*The ASAM Criteria, p 267*).

Patients presenting at Level 3.7 co-occurring enhanced programs typically have urgent mental and substance use related needs that require timely psychiatric and biomedical assessment.

II.3. A registered nurse or licensed mental health clinician conducts a behavioral health-focused assessment at the time of admission. If not done by an RN, a separate nursing assessment must be done (*The ASAM Criteria, p 267*).

Behavioral health focused assessments are to be done by a licensed mental health clinician or registered nurse at the time of admission to identify mental or biomedical concerns that require immediate attention. A separate nursing assessment must be done if the initial assessment was not conducted by a registered nurse.

II.4. A registered nurse is responsible for monitoring the patient's progress and administering or monitoring the patient's self-administration of psychotropic medications (*The ASAM Criteria, p 267*).

Monitoring patient progress, medication administration or monitoring of the patient's self-administration of psychotropic medications is a function of a registered nurse. All Level 3.7 programs have registered nurses on site.

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

III. STAFF (4 sub-service characteristics)

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

III.1. Level 3.7 co-occurring enhanced programs are staffed by addiction psychiatrists and appropriately credentialed behavioral health professionals, who are able to assess and treat co-occurring psychiatric disorders and who have specialized training in behavior management techniques and evidence-based practices (*The ASAM Criteria, p 268*).

Patients presenting for treatment at Level 3.7 co-occurring enhanced services require a set of treatment services that are provided by mental health clinicians and addiction psychiatrists who are able to assess and treat co-occurring psychiatric disorders.

¹ This document provides an overview of the characteristics of co-occurring enhanced programs at Level 3.7 Medically Monitored Intensive Inpatient Services. Medically Monitored Intensive Inpatient co-occurring enhanced programs should review *The ASAM Criteria 2013, 3rd edition*, for criteria specific to Level 3.7.

III.2. Level 3.7 co-occurring enhanced programs are ideally staffed by a certified addiction specialist physician along with a general psychiatrist, or by a physician certified as an addiction psychiatrist (*The ASAM Criteria, p 269*).

The complexity of patients with co-occurring mental and substance use disorders admitted to this intensity of care requires expert psychiatric and medical care. Depending on program circumstances, that care can be directed by an addiction psychiatrist, or the pairing of an addiction specialist physician and general psychiatrist.

III.3. Some (if not all) of the addiction treatment professionals should have sufficient cross-training to understand the signs and symptoms of psychiatric disorders and to understand and explain to the patient the purposes of psychotropic medications and their interactions with substance use (*The ASAM Criteria, p 269*).

In order to provide optimal clinical services to patients with a mental and substance use disorder, addiction professionals working in a Level 3.7 co-occurring enhanced program must be competent to recognize the signs and symptoms of mental disorders and be able to be a resource to patients to explain the purpose of psychotropic medications and their interactions with substance abuse.

III.4. The intensity of nursing care and observation is sufficient to meet the patient's needs (*The ASAM Criteria, p 269*).

Level 3.7 co-occurring enhanced programs have sufficient nursing staff and flexible use of staff, to match the intensity of nursing care and observation to meet the patient's needs.

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

IV. THERAPIES (3 sub-service characteristics)

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

IV.1. Level 3.7 co-occurring enhanced programs offer planned clinical activities designed to promote stabilization of the patient's behavioral health needs and psychiatric symptoms, and to promote such stabilization (*The ASAM Criteria, p 269*).

Level 3.7 co-occurring enhanced programs provide a regular schedule of planned clinical activities (individual counseling, group counseling, medication management and education) that work to stabilize the patient's behavioral health needs, and psychiatric symptoms and promote such stabilization.

IV.2. The goals of therapy apply to both the substance use disorder and any co-occurring mental health disorder (*The ASAM Criteria, p 269*).

Level 3.7 co-occurring enhanced programs provide integrated mental health and substance use disorder treatment, and as such, develop and implement a unified treatment plan with a single set of therapy goals.

IV.3. Specific attention is given to medication education and management, to motivational and engagement strategies and other evidence-based practices, which are used in preference to confrontational approaches (*The ASAM Criteria, p 269 – 270*).

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

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

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

Addresses assessment of the patient for withdrawal management services, addiction treatment, and patient's recent psychiatric history.

V.1. Level 3.7 co-occurring enhanced programs provide a review of the patient's recent psychiatric history and mental status examination. (If necessary, this review is conducted by a psychiatrist.) A comprehensive examination and psychodiagnostic assessment are performed within a reasonable time, as determined by the patient's needs and progress in treatment (*The ASAM Criteria, p 271*).

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

V.2. Level 3.7 co-occurring enhanced programs also provide active reassessments of the patient's mental status, at a frequency determined by the urgency of the patient's psychiatric conditions. The treatment plan will be adjusted accordingly. The patient's history of follow through with behavioral health treatment and adherence with psychotropic medications is also assessed and addressed in the treatment plan (*The ASAM Criteria, p 271*).

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

Goal: Provides a review of the patient's recent psychiatric history and mental status examination.

VI. DOCUMENTATION (1 sub-service characteristic)

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

VI.1. Level 3.7 co-occurring enhanced programs document the patient's mental health problems, the relationship between the mental and substance use disorders, and the patient's overall assessment of functioning and mental status (*The ASAM Criteria, p 271*).

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