

This document includes:

- ASAM criteria for adolescents
- ASAM criteria for adults

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The ASAM Criteria

Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions



Third Edition

The Change Companies

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ASAM Criteria - Adolescent Levels of Care

Adult Levels of Care	DIMENSION 1 Acute Intoxication and/or Withdrawal Potential	DIMENSION 2 Biomedical Conditions and Complications	DIMENSION 3 Emotional, Behavioral or Cognitive Conditions and Complications A) Dangerousness/Lethality, B) Interference with Addiction and/or Mental Health Recovery Efforts, C) Social Functioning, D) Ability for Self-Care, E) Course of Illness	DIMENSION 4 Readiness to change	DIMENSION 5 Relapse, Continued Use Or Continued Problem Potential	DIMENSION 6 Recovery/Living Environment
Level 0.5 Early Intervention	No withdrawal risk	None or very stable	None or very stable. Any Dimension 3 issues are being addressed through concurrent mental health services and do not interfere with early intervention addiction treatment services	Willingness to explore how current alcohol, tobacco, medication, other drug use, and/or high-risk behaviors may affect achievement of personal goals	Needs an understanding of, or skills to change current alcohol, tobacco, other drug or medication use patterns, and/or high- risk behaviors	Adolescents risk of initiation of or progression in substance use and/or high-risk behaviors is increased by substance use or values about use. High-risk behaviors of family, peers, or others in adolescent's social support system
Level 1 Outpatient Services	No withdrawal risk	None or very stable, or is receiving concurrent medical services	The adolescents status in dimension 3 features one of more of the following: A) the adolescents is not at risk of harm, B) There is minimal interference, C) Minimal to mild impairment, D) the adolescent is experiencing mild to moderate difficulties with activities of daily living, but there is significant risk of deterioration E) The adolescent is at minimal imminent risk, which predicts a need for some monitoring or interventions	Willing to engage in treatment, and is at least contemplating change, but needs motivating and monitoring strategies	Able to maintain abstinence or control use and pursue recovery or motivational goals with minimal support	Family and environment can support recovery with limited assistance

<p>Level 2.1 Intensive Outpatient Services</p>	<p>Experiencing minimal withdrawal Experiencing mild withdrawal, or is at risk of withdrawal</p>	<p>None are stable or distracting from treatment at a less intensive level of care. Such problems are manageable at Level 2.5</p>	<p>The adolescent's status in dimension 3 features one or more of the following: a) the adolescent is at low risk of harm, and he or she is safe between sessions, b) mild interference requires the intensity of this level of care to support treatment engagement, c) mild to moderate impairment but he or she can sustain responsibilities) the adolescent is experiencing moderate difficulties with activities of daily living and requires near/daily monitoring or interventions, e) the adolescent history (combined with the present situation) predicts the need for near daily monitoring or interventions</p>	<p>Requires close monitoring or support several times a week to promote progress through the stages of change because of variable treatment engagement, or no interest in getting assistance</p>	<p>Significant risks of relapse or continued use or continued problems and deterioration in level of functioning. Has poor prevention skills and needs monitoring or support</p>	<p>Adolescent environment is impeding his or her recovery, and adolescent requires close monitoring or support to overcome that barrier</p>
<p>LEVEL 2.5 Partial Hospitalization Services</p>	<p>Experiencing mild withdrawal, or is at risk of withdrawal</p>	<p>None are stable or distracting from treatment at a less intensive level of care. Such problems are manageable at Level 2.5</p>	<p>The adolescent's status in Dimension 3 features one or more of the following: A) The adolescent is at low risk of harm, and he or she is safe overnight, B) Moderate interference requires the intensity of this level of care to support treatment engagement, C) Moderate impairment but can sustain responsibilities, D) The adolescent is experiencing moderate difficulties with activities of daily living and requires near/daily monitoring or interventions, E) The adolescent's history (combined with the</p>	<p>Requires a near daily structured program to promote progress through the stages of change because of little treatment engagement or escalating use or impairment, or no awareness of the role of alcohol, tobacco and/or other drugs play in his/her present problems</p>	<p>High risk of relapse or continued use or continued problems in deterioration in level of functioning. Has minimal prevention skills and needs near daily monitoring and support</p>	<p>Adolescent's environment renders recovery unlikely without near/daily monitoring or support, or frequent relief from his or her home environment</p>

			present situation) predicts the need for near daily monitoring or interventions			
LEVEL 3.1 Clinically Managed Low- Intensity Residential Services	The adolescent state of withdrawal (or risk of withdrawal) is being managed concurrently at another level of care	None or stable, or receiving concurrent medical monitoring as needed	The adolescents status in Dimension 3 features one of more of the following: A) The adolescent needs a stable living environment, B) Moderate interference requiring limited 24-hour supervision to support treatment engagement, C) Moderate impairment needing limited 24-hour supervision to sustain responsibilities, D) Moderate difficulties with activities of daily living requiring 24-hour supervision and prompting, E) The adolescent's history (combined with the present situation) predicts instability without limited 24-hour supervision	Open to recovery, but needs limited 24-hour supervision to promote or sustain change	Understand the potential for continued use and/or has emerging recovery skills but needs supervision to reinforce recovery and relapse prevention skills, limited exposure to substances and/or environmental triggers or maintain therapeutic gains	Environment poses a risk to his or her recovery so that he or she requires alterative residential, secure placement or support
LEVEL 3.5 Clinically Managed Medium Intensity Residential Service	Adolescent is experiencing mild to moderate to severe withdrawal (or is at risk of withdrawal), but does not need pharmaco-logical management or nursing monitoring	None or stable, or receiving concurrent medical monitoring as needed	The adolescents status in Dimension 3 features one of more of the following: A) Moderate but stable risk of harm, B) Moderate to severe interference requiring medium-intensity residential treatment to support engagement, C) Moderate to severe impairment that cannot be managed at a less intensive level of care, D) Moderate to severe difficulties with activities of daily living requiring 24-hour supervision and medium-intensity staff assistance, E) The	The adolescent needs intensive motivating strategies in a 24-hour structured program to address minimal engagement in, or opposition to, treatment, or to address his or her lack of recognition of current severe impairment	High risk or relapse or continued use, or continued problems and deterioration in level of functioning. Has minimal prevention skills and needs near daily monitoring and support	Environment is dangerous to his or her recovery, so that he or she requires residential treatment to promote recovery goals, or for protection

			adolescent's history (combined with the present situation) predicts destabilization without medium-intensity residential treatment			
LEVEL 3.7 Clinically Managed Population Specific High Intensity Residential Service	Adolescent is experiencing moderate to severe withdrawal (or is at risk of withdrawal), but this is manageable at Level 3.7	Requires a 24-hour medical monitoring, but not intensive treatment	The adolescents status in Dimension 3 features one of more of the following: A) Moderate risk of harm, needing high-intensity 24-hour monitoring or treatment, B) Severe interference requiring high-intensity residential treatment to support engagement, C) Severe impairment that cannot be managed at a less intensive level of care, D) Severe difficulties with activities of daily living requiring 24-hour supervision and high-intensity staff assistance, E) The adolescent's history (combined with the present situation) predicts destabilization without high-intensity residential treatment	The adolescent needs motivating strategies in a 24-hour medically monitored program due to no treatment engagement associated with a biomedical, emotional or behavioral condition, or because he or she actively opposes treatment, requiring secure placement remain safe; or because he or she needs high-intensity case management to create linkages that would support outpatient treatment	Unable to interrupt high-severity or high-frequency pattern of use/or behaviors and avoid dangerous consequences without high-intensity 24-hour interventions (because of an emotional, behavioral, or cognitive condition; severe impulse control problems; withdrawal symptoms; and the like)	Environment is dangerous to his or her recovery, and he or she requires residential treatment to promote recovery goals, or for protection, and to help him or her establish a successful transition to a less intensive level of care
LEVEL 4 Medically Monitored Intensive Inpatient Services	Adolescent is experiencing severe withdrawal (or is at risk of withdrawal) and requires intensive active medical management	Requires 24-hour medical and nursing care and the full resources of a licensed hospital	The adolescent's status in Dimension 3 features one of more of the following: A) The adolescent is at severe risk of harm, B) Very severe, almost overwhelming interference renders the adolescent incapable of participating in treatment at a less intensive level of care, C) Very severe, dangerous impairment requiring frequent medical and nursing interventions, D)	Problems in this dimension do not qualify the patient for Level 4 services. If the patient's only severity is in Dimension 4, 5, and /or 6 without high severity in Dimensions 1,2 and/or 3, then the patient does not qualify for Level 4	Problems in this dimension do not qualify the patient for Level 4 services. If the patient's only severity is in Dimension 4, 5, and /or 6 without high severity in Dimensions 1,2 and/or 3, then the patient does not qualify for Level 4	Problems in this dimension do not qualify the patient for Level 4 services. If the patient's only severity is in Dimension 4, 5, and /or 6 without high severity in Dimensions 1,2 and/or 3, then the patient does not qualify for Level 4

			Very severe difficulties with activities of daily living requiring frequent medical and nursing interventions, E) The adolescent's history (combined with the present situation) predicts destabilization without medical management			
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ASAM Criteria - Adult Levels of Care

Adult Levels of Care	DIMENSION 1 Acute Intoxication and/or Withdrawal Potential	DIMENSION 2 Biomedical Conditions and Complications	DIMENSION 3 Emotional, Behavioral or Cognitive Conditions or Complications	DIMENSION 4 Readiness to change	DIMENSION 5 Relapse, Continued Use Or Continued Problem Potential	DIMENSION 6 Recovery/Living Environment
Level 0.5 Early Intervention	No withdrawal risk	None or very stable	None or very stable	Willing to explore how current alcohol, tobacco, other drug or medication use and/or other high risk behaviors may affect personal goals	Needs an understanding of skills, or skills to change, current alcohol, tobacco, or other drug or medication use patterns and/or high risk behavior	Social support system or significant others increase the risk of personal conflict about alcohol, tobacco or other drug use
OTP – LEVEL 1 Opioid Treatment program	Physiologically dependent on opioids and requires OTP to prevent withdrawal	None or manageable with outpatient medical monitoring	None or manageable in an outpatient structured environment	Ready to change the negative effects of opioid use, but is not ready for total abstinence from illicit prescription or non-prescription drug use	At high risk of relapse or continued use without OTP and structured therapy to promote treatment progress	Recovery environment is supportive and/or the patient has skills to cope
LEVEL 1 Outpatient Services	Not experiencing significant withdrawal, or at minimal risk of severe withdrawal. Manageable at level 1 -WM (See Withdrawal Management Criteria)	None or very stable, or is receiving concurrent medical monitoring	None or very stable, or is receiving concurrent medical health monitoring	Ready for recovery but needs motivating and monitoring strategies to strengthen readiness. Or needs on-going monitoring and disease management. Or high severity in this dimension but not in other dimensions. Needs Level 1 motivational enhancement strategies	Able to maintain abstinence or control use and/or addictive behaviors and pursue recovery or motivational goals with minimal support	Recovery environment is supportive and/or the patient has skills to cope
LEVEL 2.1 Intensive Outpatient Services	Minimal risk of severe withdrawal. Manageable at level 2-WM (See withdrawal management criteria)	None or not a distraction from treatment. Such problems are manageable at Level 2.1	Mild severity, with potential to distract from recovery; needs monitoring	Has variable engagement in treatment, ambivalence, or lack of awareness of the substance use or mental health problems, and requires a structured program several times a week to promote progress through the stages of change	Intensification of addiction or mental health symptoms indicate a high likelihood or relapse or continued problems without close monitoring and support several times a week	Recovery environment is not supportive but with structure and support and relief from the home environment, the patient can cope
LEVEL 2.5 Patient Hospitalization Services	Moderate risk of severe withdrawal. Manageable at level 2-WM (See withdrawal management criteria)	None or not sufficient to distract from treatment. Such problems are manageable at Level 2.5	Mild or moderate severity, with potential to distract from recovery, needs stabilization	Open to recovery, but needs a structured environment to maintain therapeutic gains	Understands relapse but needs structure to maintain therapeutic gains	Environment is dangerous, but recovery is achievable if Level 3.1 24-hour structure is achievable

LEVEL 3.1 Clinically Managed Low Intensity Residential Service	No withdrawal risk, or minimal or stable withdrawal. Concurrently receiving Level 1-WM (minimal) or Level 2-WM (moderate) services. (See withdrawal management criteria)	None or stable, or receiving concurrent medical monitoring	None or minimal, not distracting to recovery. If stable, a co-occurring capable program is appropriate. If not, a co-occurring enhanced program is required	Open to recovery, but needs a structured environment to maintain therapeutic gains	Has little awareness and needs interventions available only at Level 3.3 to prevent continued use, with imminent dangerous consequences, because of cognitive deficits or comparable dysfunction	Environment is dangerous and patient needs 24-hour structure to learn to cope
LEVEL 3.3 Clinically Managed Population Specific High Intensity Residential Service	At minimal risk of severe withdrawal. If withdrawal is present, manageable at Level 3.2 WM. (See withdrawal management criteria)	None or stable, or receiving concurrent medical monitoring	Mild to moderate severity; needs structure to focus on recovery. Treatment should be designed to address significant cognitive deficits. If stable, a co-occurring capable program is appropriate, If not, a co-occurring enhanced program is required.	Has little awareness and needs interventions available at Level 3.3 to engage and stay in treatment. If there is high severity in Dimension 4 but not in any other dimension, motivational enhancement strategies should be provided in Level 1	Has no recognition of the skills needed to prevent continued use, with imminently dangerous consequences	Environment is dangerous and the patient has skills to cope outside of a highly structured 24-hour setting
LEVEL 3.5 Clinically Managed High Intensity Residential Service	At minimal risk of severe withdrawal. If withdrawal is present, manageable at Level 3.2 WM. (See withdrawal management criteria)	None or stable, or receiving concurrent medical monitoring	Demonstrates repeated inability to control impulses, or unstable and dangerous signs/symptoms require stabilization. Other functional; deficits require stabilization and a 24-hour setting to prepare for community integration and continuing care. A co-occurring enhanced setting is required for those with severe and chronic mental illness	Has marked difficulty with, or opposition to, treatment with dangerous consequences. If there is a severity in Dimension 4 but not in any other dimension, motivational enhancement strategies should be provided in Level 1	Unable to control use, with imminently dangerous consequences, despite active participation at less intensive levels of care	Environment is dangerous, but recovery is achievable if Level 3.1 24-hour structure is achievable
LEVEL 3.7 Medically Monitored Intensive Inpatient Services	At high risk of withdrawal, but manageable at Level 3.7 WM and does not require the full resources of a licensed hospital. (See withdrawal management criteria)	Requires 24-hour medical monitoring but not intensive treatment	Moderate severity; needs a 24-hour structured setting. If the patient has a co-occurring mental disorder, requires concurring mental health services in a medically monitored setting	Low interest in treatment and impulsive control is poor, despite negative consequences; needs motivating strategies only safely available in a 24-hour structured setting. If there is high severity in Dimension 4 but not in any other	Unable to control use, with imminently dangerous consequences, despite active participation at less intensive levels of care	Environment is dangerous, but recovery is achievable if Level 3.1 24-hour structure is achievable

				dimension, motivational enhancement strategies should be provided in Level 1		
LEVEL 4 Medically Monitored Intensive Inpatient Services	At high risk of withdrawal and requires Level 4 – WM and the full resources of a licensed hospital (See withdrawal management criteria)	Requires 24-hour medical and nursing care and the full resources of a licensed hospital	Because of severe and unstable problems, requires 24 hour psychiatric care with concomitant addiction treatment (co-occurring enhanced)	Problems in this dimension do not qualify the patient for Level 4 services. If the patient's only severity is in Dimension 4, 5, and /or 6 without high severity in Dimensions 1,2 and/or 3, then the patient does not qualify for Level 4	Problems in this dimension do not qualify the patient for Level 4 services. See further explanation in Dimension 4	Problems in this dimension do not qualify the patient for Level 4 services. See further explanation in Dimension 4