

Adolescent ASAM Placement Criteria Crosswalk

Adolescent ASAM Crosswalk	Level 0.5: Early Intervention	Level 1: Outpatient Services	Level 2.1: Intensive Outpatient Treatment	Level 2.5: Partial Hospitalization	Level 3.1: Clinically – Managed Low-intensity Residential Services	Level 3.5: Clinically Managed High Intensity Residential Services	Level 3.7: Medically Monitored Intensive Inpatient Services	Level 4: Medically Managed Intensive Inpatient Services
Dimension 1: Acute Intoxication and/or Withdrawal Potential	No withdrawal risk	No withdrawal risk.	Experiencing minimal withdrawal, or is at risk of withdrawal	Experiencing minimal withdrawal, or is at risk of withdrawal	The adolescent’s state of withdrawal (or risk of withdrawal) is being managed concurrently at another level of care	Adolescent is experiencing mild to moderate withdrawal (or is at risk of withdrawal) but does not need pharmacological management or frequent medical or nursing monitoring	Adolescent is experiencing moderate to severe withdrawal (or is at risk of withdrawal) but this is manageable at Level 3.7	Adolescent is experiencing severe withdrawal (or is at risk for withdrawal) and requires intensive active medical management
Dimension 2: Biomedical Conditions and Complications	None or very stable	None or very stable, or is receiving concurrent medical monitoring	None or stable, or distracting from tx at a less intensive LOC.	None or stable, or distracting from tx at a less intensive LOC	None or stable, or receiving concurrent medical monitoring	None or stable, or receiving concurrent medical monitoring as needed	Requires 24 hours medical monitoring but not intensive treatment	Requires 24 hour medical and nursing care and the full resources of a licensed hospital
Dimension 3: Emotional, Behavioral or Cognitive Conditions and Complications	None or very stable. Any Dimension 3 issues are being addressed through concurrent MH services and do not interfere with early intervention addiction tx services	The adolescent’s status in Dimension 3 is characterized by all of the following; A) The adolescent is not at risk of harm. B) There is minimal interference. C) Minimal to mild impairment, D) Minimal current difficulties with activities of daily living, but there is significant risk of deterioration, E) Minimal imminent risk, which predicts a need for some monitoring or interventions	The adolescent’s status features one or more of the following: A) at low risk of harm, and he/she is safe between sessions, B) Mild interference requires the intensity of this LOC to support tx engagement C) Mild to moderate impairment, but can sustain responsibilities, D) Mild to moderate difficulties with activities of daily living, and requires frequent monitoring or interventions, E) hx (combined with present situation) predicts the need for frequent monitoring/interventions	The adolescent’s status features one or more of the following: A) at low risk of harm, and he/she is safe overnight, B) Moderate interference requires the intensity of this LOC to support tx engagement C) Moderate impairment, but can sustain responsibilities, D) Moderate difficulties with activities of daily living, and requires near daily monitoring or interventions, E) hx (combined with present situation) predicts the need for near-daily monitoring/interventions	The adolescent’s status in Dimension 3 is characterized by one or more of the following: A) needs a stable living environment for safety B) Moderate interference requiring 24 hour supervision to support tx engagement C) Moderate impairment needing limited 24 hour supervision to sustain responsibilities D) Moderate difficulties with activities of daily living requiring limited 24 hours supervision and frequent prompting E) hx (combined with present situation) predicts instability without 24 hour supervision	The adolescent’s status in Dimension 3 is characterized by one or more of the following: A) moderate but stable risk of harm, thus needing medium intensity 24-hour monitoring or tx for safety B) Moderate to severe interference requiring medium intensity residential tx 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 adolescent’s hx (combined with the present situation) predicts destabilization without medium-intensity residential tx	The adolescent’s status in Dimension 3 is characterized by one or more of the following: A) moderate risk of harm, needing high intensity 24-hour monitoring or tx B) Severe interference requiring high intensity residential tx 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 hx (combined with the present situation) predicts destabilization without high-intensity residential tx	The adolescent’s status in Dimension 3 is characterized by one or 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 tx at a less intensive level of care C) Very severe dangerous requiring frequent medical and nursing interventions D) Very severe difficulties with activities of daily living requiring frequent medical and nursing intervention, E) the adolescent’s hx (combined with the present situation) predicts destabilization without inpatient medical management
Dimension 4: Readiness to Change	Consumer is willing to explore how current alcohol, tobacco, other drug or medication use and/or high risk behaviors may affect achievement of personal goals	Willing to engage in tx and is at least contemplating change, but needs motivation and monitoring strategies	Requires close monitoring and support several times a week to promote progress through the stages of changes because of variable tx engagement, or no interest in getting assistance	Requires a near-daily structured program to promote progress through the stages of change because of little tx engagement or escalating use and impairment, or no awareness of the role alcohol, tobacco, and/or other drugs play in his/her present problems	Open to recovery, but needs 24 hour supervision to promote or sustain progress	The adolescent needs intensive motivating strategies in a 24 hours structured program to address minimal engagement in , or opposition to, tx, or to address his/her lack of recognition of current severe impairment	The adolescent needs motivating strategies in a 24 hour medically monitored program due to no tx engagement associated with a biomedical, emotional, or bx condition; or because he/she actively opposes tx, requiring secure placement to remain safe; or because he/she needs high intensity case management to create linkages that would support outpatient tx	Problems in this dimension do not qualify the consumer for Level 4 services. If the consumer’s only severity is in Dimension 4,5 and/or 6 without high severity in Dimensions 1,2, and/or 3, then the consumer does not qualify for Level 4

Dimensions 5 and 6 on next page

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Dimension 5: Relapse, Continued Use or Continued Problem Potential	Needs an understanding of, or skills to change, current alcohol, tobacco, other drug, or medication use patterns and/or high risk behavior	Able to maintain abstinence or control use and/or addictive behaviors and pursue recovery or motivational goals with minimal support	Significant risk of lapse or continued use, or continued problems and deterioration in level of functioning. Has poor prevention skills and needs close monitoring and support	High risk of relapse or continued use, or continued problems and deterioration in level of functioning. Has minimal prevention skills and needs near-daily monitoring and support	Understands the potential for continued use and/or has emerging recovery skills, but needs supervision to reinforce recovery and relapse prevention skills, limit exposure to substances and /or environmental triggers, or maintain therapeutic gains	Unable to control use and/or behaviors and avoid dangerous consequences without a 24-hour structured program. He/she is unable to overcome environmental triggers, or cravings, has insufficient supervision between encounters at a less intensive level of care, or has high chronicity and /or poor response to tx	Unable to interrupt high-severity or high-frequency pattern of use and/or behaviors and avoid dangerous consequences without high-intensity 24-hour interventions (because of an emotional, bx, or cognitive condition; severe impulse control problems; withdrawal sx; and the like)	Problems in this dimension do not qualify the consumer for Level 4 services. See further explanation in Dimension 4
Dimension 6: Recovery Environment	Adolescent's risk of initiation of or progression in substance use and/or high risk behaviors is increased by substance use of values about use. High risk behaviors of family, peers or others in the adolescent's social support system	Family and environment can support recovery with limited assistance	Adolescent's environment is impeding his/her recovery, and adolescent requires close monitoring and support to overcome that barrier	Adolescent's environment renders recovery unlikely without near-daily monitoring and support, or frequent relief from his/her home environment	Environment poses a risk to his or her recovery so that he/she requires alternative residential secure placement or support	Environment is dangerous to his/her recovery so that he/she requires residential tx to promote recovery goals, or for protection	Environment is dangerous to his/her recovery and he or she requires residential tx o promote recovery goals or for protection, and to help him or her establish a successful transition to a less intensive level of care	Problems in this dimension do not qualify the consumer for Level 4 services. See further explanation in Dimension 4

To select the correct level of care, choose the highest level of care that has two or more criteria met. Review admission criteria for chosen level of care to ensure proper clinical fit.

NAME or SM ID#: _____

CURRENT ASAM LEVEL: _____

RECOMMENDED LEVEL OF CARE AND SUBSTANCE ABUSE SERVICES: _____

CLINICIAN SIGNATURE: _____

DATE: _____