

# Level 4: Medically Managed Intensive Inpatient Services

Aligning Service Delivery  
to *The ASAM Criteria, 2013*

# Transition Status

- Began transition from PCPC to *The ASAM Criteria, 2013 in 2017*
- Use of the criteria as a Level Of Care Assessment (LOCA) tool January 1, 2019

# Next Steps

## Alignment of Service Delivery

- Setting
- Supports
- Staff
- Therapies
- Assessment/Treatment Plan
- Documentation

# Next Steps

ASAM Alignment = a continued **PROCESS**

- Goals and Target Dates
- Support and Assistance

# Level 4: Medically Managed Intensive Inpatient Services

## LEVEL 4 MEDICALLY MANAGED INTENSIVE INPATIENT SERVICES BY SERVICE CHARACTERISTICS SELF ASSESSMENT CHECKLIST

### I. Setting

- 1. May be offered in any appropriately licensed acute care setting that offers addiction treatment services in concert with other medical and/or psychiatric services.
- 2. May be offered in any appropriate facility that addresses the handling of items brought into the program including illegal substances, legal medications, controlled substances, weapons, tobacco products, gambling paraphernalia, and pornography.
- 3. Implements procedures that reasonably ensure the safety of patients and staff, including but not limited to searches of persons served, of belongings, and the physical facility, communications, including mail, telephone use, and use of personal electronic devices, visitation, and emergency evacuation.
- 4. Evidence of a written policy or criteria for program entry/admission, transition, and exit. Patient-centered variable length of stay. Admission criteria include ASAM dimensional criteria as well as DSM diagnosis.
- 5. Evidence of a written 24-hour staff schedule that includes weekends and holidays.
- 6. Evidence of a written daily schedule of activities that includes weekends and holidays.

### I. SETTING (1 sub-service characteristic)

I.1. Level 4 program services may be offered in any appropriately licensed acute care setting that offers addiction treatment services in concert with intensive biomedical and/or psychiatric services (The ASAM Criteria, p. 281).

The organization implements written procedures that address the handling of items brought into the program, including:

- Illegal substances
- Legal medication
- Prescription medication
- Weapons
- Tobacco products
- Gambling paraphernalia
- Pornography

The program implements procedures that reasonably ensure the safety of patients and staff, including but not limited to:

- Searches of persons served, of belongings, and of the physical facility. Searches will be done to preserve privacy and dignity, and will be sensitive to potential trauma of persons served.
- Communications, including mail, telephone use, and use of personal electronics.
- Visitation.
- Emergency evacuation.

Evidence of a written policy or criteria for program entry/admission, transition, and exit. Patient-centered variable length of stay. Admission criteria include ASAM dimensional criteria as well as DSM diagnosis.

Evidence of a 24-hour staff schedule that includes weekends and holidays.

Evidence of a written daily schedule of activities that includes weekends and holidays.

### II. SUPPORT SYSTEMS (1 sub-service characteristic)

II.1. In Level 4, necessary support systems include a full range of acute care services, specialty consultation and intensive care (The ASAM Criteria, p. 281-282).

The program has written procedures describing the utilization of and access for:

- Specialty medical services.

### II. Support Systems

- 1. Include a full range of acute care services, specialty consultation and intensive care.
- 2. Have written procedures describing the utilization of and access for specialty medical services, intensive care services, pharmacy services, lab services, psychiatric services, and psychiatric medications.

8/21/2020

## LEVEL 4 MEDICALLY MANAGED INTENSIVE INPATIENT SERVICES BY SERVICE CHARACTERISTICS

Level 4, Medically Managed Intensive Inpatient Services is an organized service delivered in an acute inpatient setting. It is appropriate for patients whose acute biomedical and emotional, behavioral, and cognitive problems are so severe that they require primary medical and nursing care. (The ASAM Criteria, p. 280)

### I. SETTING (1 sub-service characteristic)

Level 4 programs typically are housed in three types of settings: an acute care general hospital, an acute psychiatric hospital or psychiatric unit within an acute general hospital, and a licensed addiction treatment specialty hospital with acute care medical and nursing staff.

I.1. Level 4 program services may be offered in any appropriately licensed acute care setting that offers addiction treatment services in concert with intensive biomedical and/or psychiatric services (The ASAM Criteria, p. 281).

Level 4 programs offer medically directed acute withdrawal management and related treatment designed to alleviate acute emotional, behavioral, cognitive, and/or biomedical distress resulting from, or co-occurring with, a patient's use of alcohol, tobacco, and/or other drugs.

### I. Setting

Typically housed in three types of settings: an acute care general hospital, an acute psychiatric hospital or psychiatric unit within an acute general hospital, and a licensed addiction treatment specialty hospital with acute care medical and nursing staff.

I.1. May be offered in any appropriately licensed acute care setting that offers addiction treatment services in concert with intensive biomedical and/or psychiatric services.

NOTE: Offer medically directed acute withdrawal management and related treatment designed to alleviate acute emotional, behavioral, cognitive, and/or biomedical distress resulting from, or co-occurring with, a patient's use of alcohol, tobacco, and/or other drugs.

### II. SUPPORT SYSTEMS (1 sub-service characteristic)

ASAM support systems standards address those services which need to be readily available to the program. Support systems provide services, beyond the capacity of the staff of the program, which will not be needed by patients on a routine basis or services to augment those provided by staff.

II.1. In Level 4, necessary support systems include a full range of acute care services, specialty consultation, and intensive care (The ASAM Criteria, p. 281-282).

### II. Support Systems

Services which need to be readily available to the program.

II.1. Include a full range of acute care services, specialty consultation and intensive care.

NOTE: Provide services, beyond the capacity of the staff of the program, which will not be needed by patients on a routine basis or services to augment those provided by staff.

Treatment is provided 24 hours a day in a permanent facility with inpatient beds. The full resources of a general acute care or psychiatric hospital are available. Although treatment is specific to substance use and other addictive disorders, the skills of the interdisciplinary team and the availability of support services, including medical consultation services, allow the joint treatment of any co-occurring biomedical conditions and mental disorders that need to be addressed.

8/19/2020

# Level 4: Medically Managed Intensive Inpatient Services

## IN GENERAL:

- Services are provided in an acute care inpatient setting
- 24-hour treatment setting
- Services are managed by a physician

# Level 4: Medically Managed Intensive Inpatient Services

## SETTING:

- Acute care general hospital
- Acute psychiatric hospital
- Licensed facilities

# Level 4: Medically Managed Intensive Inpatient Services

## SUPPORTS:

- Medical, Psychiatric, Psychological, Laboratory and Toxicology Services
- Direct affiliation less intensive Level of Care providers
- Pharmacotherapy
- Withdrawal Management
- Case Management / Care Coordination



# Level 4: Medically Managed Intensive Inpatient Services

## STAFF:

- Must Meet Licensing Requirements
- Minimum Education and Training Requirements (METs)
- Appropriately and Adequately Trained
- Staff:Client Ratios (1:7)

# Level 4: Medically Managed Intensive Inpatient Services

## STAFF:

- Appropriately Licensed or Credentialed by the Pennsylvania Certification Board (PCB)

# Level 4: Medically Managed Intensive Inpatient Services

## THERAPIES:

- Use of Evidence-Based Programs and Interventions (EBPs and EBIs)
- Motivational Interviewing and Motivational Enhancement Strategies
- Therapies vs. Psycho-Education

# Level 4: Medically Managed Intensive Inpatient Services

## THERAPIES:

- Integration of Care
- Counseling with Family Members
- Pharmacotherapy
- Case Management

# Level 4: Medically Managed Intensive Inpatient Services

## ASSESSMENT / TREATMENT PLANNING:

- Level of Care Assessment (LOCA) Independent or Evidence of Neutrality
- Initial & Ongoing 6-Dimensional Assessment
- Individualized Tx Planning:  
Collaborative  
Focused on Strengths & Needs  
Prioritized by Risk  
Driven by Client Preference & Choice

# Level 4: Medically Managed Intensive Inpatient Services

## ASSESSMENT / TREATMENT PLANNING:

- Include Short-Term
- Focus on Overall Progress of Goals & Objectives
- Services Regularly Updated to Ensure Relevance & Appropriateness for Level 4
- Coordination of Services

# Level 4: Medically Managed Intensive Inpatient Services

## DOCUMENTATION:

- Progress Notes: Individualized & Reflect Tx Plan
- Notes Should Reflect any Need for Tx Plan Updates
- Notes Should be Current & Written in a Timely Manner

# Level 4: Medically Managed Intensive Inpatient Services

“Level 4 Self Assessment Checklist”



# Level 4 Self Assessment Checklist

## Setting:

### I. Setting

#### *Self Assessment Checklist*

1. May be offered in any appropriately licensed acute care setting that offers addiction treatment services in concert with intensive biomedical and/or psychiatric services. ●
2. Implements written procedures that address the handling of items brought into the program including illegal substances, legal medication, prescription medication, weapons, tobacco products, gambling paraphernalia, and pornography. ●
3. Implements procedures that reasonably ensure the safety of patients and staff, including but not limited to searches of persons served, of belongings, and the physical facility; communications, including mail, telephone use, and use of personal electronics; visitation; and emergency evacuation. ●
4. Evidence of a written policy or criteria for program entry/admission, transition, and exit; patient-centered variable length of stay. Admission criteria include ASAM dimensional criteria as well as DSM diagnosis. ●
5. Evidence of a 24-hour staff schedule that includes weekends and holidays. ●
6. Evidence of a written daily schedule of activities that includes weekends and holidays. ●

# Level 4 Self Assessment Checklist

## Support Systems:

### II. Support Systems

#### *Self Assessment Checklist*

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1. Include a full range of acute care services, specialty consultation and intensive care. ●
2. Has written procedures describing the utilization of and access for specialty medical services, intensive care services, pharmacy services, lab services, psychiatric services, and psychological services. ●

# Level 4 Self Assessment Checklist

## Staff:

### III. Staff

#### *Self Assessment Checklist*

1. Staffed by an interdisciplinary team of appropriately credentialed clinical staff who assess and treat patients with severe substance use disorders, or addicted patients with concomitant acute biomedical, emotional, behavioral, and cognitive disorders.
2. Has a written policy and procedures on clinical staff responsibility for treatment plan coordination.
3. Has a written policy on credentials for clinical staff.
4. Has a written job description and qualifications for the program director.
5. Has a written position description for a medical director.
6. Has a daily schedule of appropriately trained and credentialed professionals who provide medical management by a physician 24 hours a day and primary nursing care and observation 24 hours a day, and professional counseling services 16 hours a day.
7. Has facility-approved addiction counselors, or licensed, certified, or registered addiction clinicians who administer planned interventions according to the assessed needs of the patient.
8. Has a written policy and procedure on privileging for addiction clinicians.
9. Has a written policy and procedure for periodic and regular review of addiction clinicians' status to continue a clinical practice within the facility.

# Level 4 Self Assessment Checklist

## Therapies:

### IV. Therapies

#### *Self Assessment Checklist*

1. Offer an individualized array of treatment services for substance use disorders, as well as any concurrent biomedical, emotional, behavioral, or cognitive problems, delivered by an interdisciplinary team.
2. Has a daily schedule of activities that includes medical, nursing, and other clinical services.
3. Has a staff schedule documenting interdisciplinary involvement in activities.
4. Has a program description that describes services and objectives of services.
5. Cognitive, behavioral, motivational, pharmacologic, and other therapies are provided on an individual or group basis, depending on the patient's needs. For the patient who has a severe biomedical disorder, physical health interventions are available to supplement addiction treatment.
6. Has a schedule that show individual and group programs that cover the full range of therapies and educational activities matched to the population served.
7. Has a written policy on staff training on a range of evidence-based cognitive and behavioral therapies on addiction and on psychiatric pharmacotherapies.
8. Has a schedule of individualized treatment services to manage a patient's biomedical disorder.
9. Health education services are provided for patients.
10. Has planned clinical interventions that are designed to enhance the patient's understanding of his or her addiction illness.
11. Has a schedule of clinical activities to enhance patients' understanding of their addiction disorder.

# Level 4 Self Assessment Checklist

## Assessment/Tx Plan Review:

### V. Assessment/Treatment Plan Review

#### *Self Assessment Checklist*

1. There is a comprehensive nursing assessment performed at the time of admission.
2. Has written procedures that a nursing assessment is conducted by a Registered Nurse at admission.
3. There are written procedures for ongoing nursing monitoring, 24 hours/day, 7 days/week.
4. Has a 24 hours/day, 7 days/week nursing schedule and credentials of the staff in the schedule.
5. Has nursing assessments in the patient record.
6. There is physician approval of the admission.
7. Includes a comprehensive history and physical examination, performed by a physician within 12 hours of admission.
8. Has a written policy on which medical needs/conditions would prevent admission to the program.
9. Has a written procedure that details when and how a physical exam is done.
10. Patient records include a copy of the medical evaluation completed within the timeframe specified in the program's procedures.
11. Treatment plan addresses and integrates co-occurring biomedical or mental disorders/disabilities (should a patient have them) into the plan.
12. There is a comprehensive biopsychosocial assessment begun at the time of admission.

13. Has a written policy that all patients receive an assessment that addresses the six dimensions of The ASAM Criteria.
14. Has an independent process for conducting the assessment.
15. Has a written procedure on ASAM Criteria training for personnel doing assessments, and/or other qualifications of the personnel conducting the assessment.
16. Has written procedures identifying timeframes for reviewing and modifying treatment plans to ensure that the plan for each patient served reflects current issues, maintains relevance, and is reviewed formally once a week (more often if the person is quite unstable).
17. Includes an individualized treatment plan that includes formulation and articulation of short-term, measurable treatment goals, and activities designed to achieve those goals. The plan is developed in collaboration with the patient, reflects the patient's personal goals.
18. Treatment plan reviews are conducted at specified times, as noted in the treatment plan.
19. Implements written procedures identifying timeframes for initial development of, and review of, treatment plans to ensure that the plan for each patient served reflects current issues, maintains relevance, is reviewed formally at least once a week (and more often if the person is quite unstable), and patient consent for treatment.

# Level 4 Self Assessment Checklist

## Documentation:

### VI. Documentation

#### *Self Assessment Checklist*

1. There are personalized and individualized progress notes in the patient's record that clearly reflect implementation of the treatment plan, the patient's response to therapeutic intervention for all disorders treated, as well as subsequent amendments to the plan.
2. Has written policies and procedures on progress note documentation.

# PA Expectations Addendum

## Clinical Staffing Requirements After 7/1/2021

- Licensed or PA Certification Board (PCB) Certified Counselors and Allied Professionals (Case Managers)
- Can be “Working Toward” Certification After Hire

# PA Expectations Addendum

## Motivational Enhancement/Stages of Change

- All assessors are expected to have an immediate foundational awareness of the Stages of Change and Motivational Interviewing
- All Clinical Supervisors must complete DDAP approved MI training by 7/1/2023.
- All Clinical Staff must have DDAP approved MI training by 7/1/2026.



# PA Expectations Addendum

## Independent Assessment

- Wherever possible an Independent Level of Care Assessment (LOCA) should occur
- Where assessments occur at a treatment provider, there must be evidence of neutrality with validation by the Single County Authority or 3<sup>rd</sup> party

# Need additional help?

Please be sure to review ASAM alignment resources on the DDAP website [ASAM Transition \(pa.gov\)](https://www.pa.gov/ASAM-Transition).

Questions or requests for technical assistance can be emailed to [ra-daasam@pa.gov](mailto:ra-daasam@pa.gov).