



# ASAM

American Society of  
Addiction Medicine

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## ADULT DIAGNOSTIC ADMISSION CRITERIA

The patient who is appropriately placed in a Level 1 program is assessed as meeting the diagnostic criteria for a substance use, substance-induced, and/or other addictive disorder as defined in the current *Diagnostic and Statistical Manual of Mental Disorders (DSM)* of the American Psychiatric Association or other standardized and widely accepted criteria, as well as the dimensional criteria for admission.

If the patient's presenting alcohol, tobacco, and/or other drug use or addictive behavior history is inadequate to substantiate such a diagnosis, the probability of such a diagnosis may be determined from information appropriately submitted or obtained from collateral parties (such as family members, legal guardians, and significant others) when there is valid authorization to obtain this information.

### Co-Occurring Capable Programs

At Level 1, some patients have co-occurring mental disorders that meet the stability criteria for a co-occurring capable program. Other patients have difficulties in mood, behavior, or cognition as the result of other psychiatric or substance-induced disorders, or the patient's emotional, behavioral, or cognitive symptoms are troublesome but not sufficient to meet the criteria for a diagnosed mental disorder.

### Co-Occurring Enhanced Programs

In contrast to the diagnostic criteria described above for co-occurring capable programs, the patient who is identified as in need of Level 1 co-occurring enhanced program services is assessed as meeting the diagnostic criteria for a mental disorder as well as a substance use or induced disorder, as defined in the current *Diagnostic and Statistical Manual of Mental Disorders (DSM)* of the American Psychiatric Association or other standardized and widely accepted criteria, as well as the dimensional criteria for admission.

If the patient's presenting history is inadequate to substantiate such a diagnosis, the probability of such a diagnosis may be determined from information submitted by collateral parties (such as family members, legal guardians, and significant others).



## ADULT DIMENSIONAL ADMISSION CRITERIA

### All Services

The patient who is appropriately admitted to Level 1 is assessed as meeting specifications in **all** of the following six dimensions.

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### DIMENSION 1:

Acute Intoxication and/or  
Withdrawal Potential

#### All Programs

The patient has no signs or symptoms of withdrawal, or his or her withdrawal needs can be safely managed in a Level 1 setting. See separate withdrawal management chapter for how to approach “unbundled” withdrawal management for adults.

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### DIMENSION 2:

Biomedical Conditions and  
Complications

#### All Programs

The patient's status in Dimension 2 is characterized by biomedical conditions and problems, if any, that are sufficiently stable to permit participation in outpatient treatment. Examples include uncomplicated pregnancy or asymptomatic HIV disease.

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### DIMENSION 3:

Emotional, Behavioral, or  
Cognitive Conditions and  
Complications

#### All Programs

The patient's status in Dimension 3 is characterized by (a) **or** (b); **and** both (c) **and** (d):

- a. The patient has no symptoms of a co-occurring mental disorder, or any symptoms are mild, stable, fully related to a substance use or other addictive disorder, and do not interfere with the patient's ability to focus on addiction treatment issues;
- or**
- b. The patient's psychiatric symptoms (such as anxiety, guilt, or thought disorders) are mild, mostly stable, and primarily related to either a substance use or other addictive disorder, or to a co-occurring cognitive, emotional, or behavioral condition. Mental health monitoring is needed to maintain stable mood, cognition, and behavior. For example, fluctuations in mood only recently stabilized with medication, substance-induced depression that is resolving but still significant, or a patient with schizophrenic disorder recently released from the hospital;
- and**
- c. The patient's mental status does not preclude his or her ability to: (1) understand the information presented and (2) participate in treatment planning and the treatment process;
- and**
- d. The patient is assessed as not posing a risk of harm to self or others and is not vulnerable to victimization by another.

#### Co-Occurring Enhanced Programs

In addition to the above criteria, the patient's status in Dimension 3 is characterized by either (a); **or** all of (b) **and** (c) **and** (d):

- a. The patient has a severe and chronic mental illness that impairs his or her ability to follow through consistently with mental health appointments and psychotropic medication. However, the patient has the ability to access services such as assertive community treatment and intensive case management or supportive living designed to help the patient remain engaged in treatment;
- or**
- b. The patient has a severe and chronic mental disorder or other emotional, behavioral, or cognitive problems, or substance-induced disorder;
- and**
- c. The patient's mental health functioning is such that he or she has impaired ability to: (1) understand the information presented, and (2) participate in treatment planning and the treatment process. Mental health management is required to stabilize mood, cognition, and behavior;
- and**
- d. The patient is assessed as not posing a risk of harm to self or others and is not vulnerable to victimization by another.

## ADULT DIMENSIONAL ADMISSION CRITERIA (CONTINUED)

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### DIMENSION 4:

Readiness to Change

#### All Programs

The patient's status in Dimension 4 is characterized by (a); **and** one of (b) **or** (c) **or** (d):

- a. The patient expresses willingness to participate in treatment planning and to attend all scheduled activities mutually agreed upon in the treatment plan;  
**and**
- b. The patient acknowledges that he or she has a substance-related or other addictive disorder and/or mental health problem and wants help to change;  
**or**
- c. The patient is ambivalent about a substance-related or other addictive disorder and/or mental health condition. He or she requires monitoring and motivating strategies, but not a structured milieu program. For example: (a) the patient has sufficient awareness and recognition of a substance use or addictive disorder and/or mental health problems to allow engagement and follow through with attendance at intermittent treatment sessions as scheduled; (b) The patient acknowledges that he or she has a substance-related and/or mental health problem but is ambivalent about change. He or she is invested in avoiding negative consequences and is in need of monitoring and motivating strategies to engage in treatment and progress through stages of change;  
**or**
- d. The patient may not recognize that he or she has a substance-related or other addictive disorder and/or mental health problem. For example, he or she is more invested in avoiding a negative consequence than in the recovery effort. Such a patient may require monitoring and motivating strategies to engage in treatment and to progress through stages of change.

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### DIMENSION 5:

Relapse, Continued Use, or Continued Problem Potential

#### All Programs

In Dimension 5, the patient is assessed as able to achieve or maintain abstinence and related recovery goals. Or the patient is able to achieve awareness of a substance or other addiction problem and related motivational enhancement goals, only with support and scheduled therapeutic contact. This is to assist him or her in dealing with issues that include (but are not limited to) concern or ambivalence about preoccupation with alcohol, tobacco, and/or other drug use; other addictive behavior; cravings to use or gamble; peer pressure; and lifestyle and attitude changes.

#### Co-Occurring Programs

In addition to the above criteria for all programs, the patient is assessed as able to achieve or maintain mental health functioning and related goals only with support and scheduled therapeutic contact to assist him or her in dealing with issues that include (but are not limited to) impulses to harm self or others and difficulty in coping with his or her affects, impulses, or cognition.

While such impulses and difficulty in coping may apply to patients in both co-occurring capable and co-occurring enhanced programs, patients in need of co-occurring enhanced program services are more unstable and require the outreach and support of assertive community treatment and intensive case management to maintain their mental health function. For example, such a patient may be unable to reliably keep mental health appointments because of instability in cognition, behavior, or mood.

LEVEL 1

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## ADULT DIMENSIONAL ADMISSION CRITERIA (CONTINUED)

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### DIMENSION 6: Recovery Environment

#### All Programs

The patient's status in Dimension 6 is characterized by (a) **or** (b) **or** (c):

a. The patient's psychosocial environment is sufficiently supportive that outpatient treatment is feasible (for example, significant others are in agreement with the recovery effort; there is a supportive work environment or legal coercion; adequate transportation to the program is available; and support meeting locations and non-alcohol/drug-centered work are near the home environment and accessible);

**or**

b. The patient does not have an adequate primary or social support system, but he or she has demonstrated motivation and willingness to obtain such a support system;

**or**

c. The patient's family, guardian, or significant others are supportive but require professional interventions to improve the patient's chance of treatment success and recovery. Such interventions may involve assistance in limit-setting, communication skills, a reduction in rescuing behaviors, and the like.

#### Co-Occurring Enhanced Programs

In addition to the above criteria, the patient's status in Dimension 6 is characterized by (a) **or** (b) **or** (c):

a. The patient does not have an adequate primary or social support system and has mild impairment in his or her ability to obtain a support system. For example, mood, cognition, and impulse control fluctuate and distract the patient from focusing on treatment tasks;

**or**

b. The family, guardian, or significant others require active family therapy or systems interventions to improve the patient's chances of treatment success and recovery. These may include family enmeshment issues, significant guilt or anxiety, or passivity or disengaged aloofness or neglect;

**or**

c. The patient's status in Dimension 6 is characterized by **all** of the following: (1) the patient has a severe and chronic mental disorder or an emotional, behavioral, or cognitive condition, and (2) the patient does not have an adequate family or social support system, and (3) the patient is chronically impaired, but not in imminent danger, and has limited ability to establish a supportive recovery environment. However, he or she does have access to intensive outreach and case management services that can provide structure and allow him or her to work toward stabilizing both the substance use or other addictive disorder and mental disorders.

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LEVEL 1