



Mountain-Pacific
Quality Health

ASAM in MCG 2.0

February 2020

Agenda

- Introduction
- ASAM State Forms Effective 8/2/18 – a review
- ASAM MCG 1.0 Effective 1/1/20 – a summary
- ASAM MCG 2.0 Effective 2/10/20 – a demo
- Questions



Mountain-Pacific
Quality Health

INTRODUCTION

Who is here?

- Telligen:
 - Jean McClurken, LCSW
 - Behavioral Health Program Manager
- Mountain-Pacific Quality Health:
 - Michelle Lingenfelter
 - Customer Support Supervisor
- DPHHS:
 - Isaac Coy, LAC
 - Treatment Program Manager, Addictive and Mental Disorders Division
 - Melissa Higgins
 - Bureau Chief, Addictive and Mental Disorders Division
 - Jackie Jandt
 - Medicaid Reform Specialist
- Providers:
 - All Providers who have submitted ASAM authorization requests
 - Rimrock Foundation
 - MT Chemical Dependency Center
 - Gateway Community Services
 - Glacier Hope Homes
 - Western MT MH Center
 - Southwest Chemical Dependency
 - Eastern MT Community MH Center
 - Florence Crittenton Home
 - New Day, Inc
 - Alcohol/Drug Services of Gallatin
 - Boyd Andrew Community Services

What are we talking about?

- Creating a better method for documenting ASAM criteria through the Qualitrac system
- Suggestions for changes were made based on 1 month of reviewing 585 ASAM service authorization requests across 11 different providers
- Intention is to reduce the frequency of confusing RFIs and improve efficiency and timeliness of reviews by creating a detailed and comprehensive clinical checklist through MCG

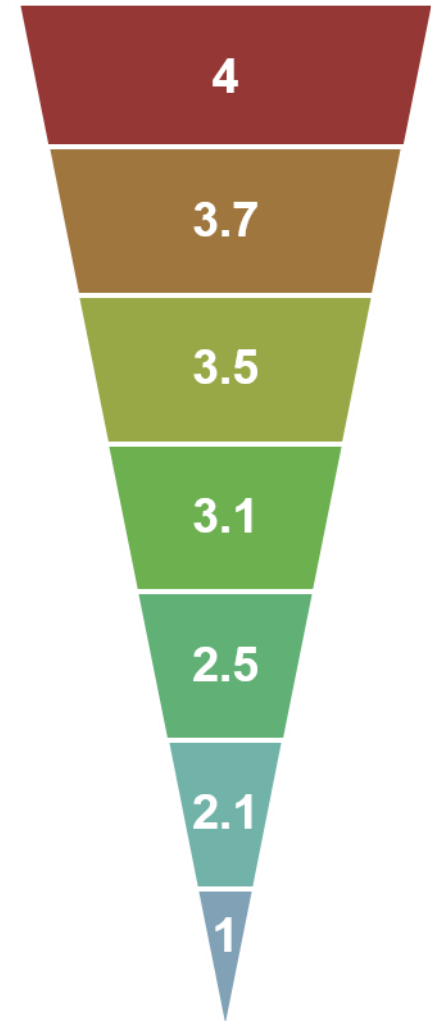
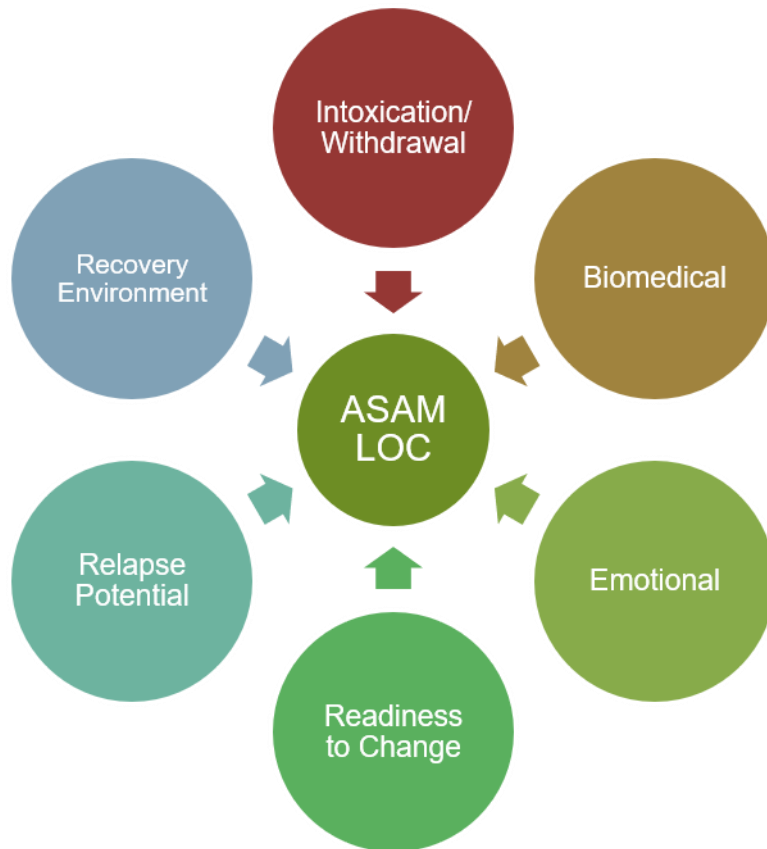
Background before we get started

- The clinical guidelines presented here today are based in criteria detailed in the most current version of ASAM criteria (3rd edition, first published in 2013)



- Developed in partnership between Telligen, Mountain-Pacific, and clinical staff at MT DPHHS

ASAM Basics



Evaluate each dimensional area independently for best fit criteria to arrive at most comprehensive, appropriate, and least restrictive level of care



**ASAM STATE
FORMS
EFFECTIVE
8/2/18**

AMDD Substance Use Disorder (SUD) **Prior Authorization** Request Form for Residential and Inpatient Services

Refer to the AMDD Medicaid Services Provider Manual for SUD and Adult Mental Health for information pertaining to Utilization Management process and requirements. Information must be typed and handwritten documents will not be accepted.

ASAM Recommended Level of Care

ASAM 3.1 (Complete Page 1 & Form 3.1) ASAM 3.5 (Complete Page 1 & Form 3.5) ASAM 3.7 (Complete Page 1 & Form 3.7)

This worksheet must be completed and signed by a Licensed Behavioral Health Professional (Licensed Addictions Counselor (LAC) or other Mental Health Professional with SUD in their scope) except for ASAM 3.7 which must be completed and signed by a Licensed Physician, Physician's Assistant, or Nurse Practitioner.

Demographics

Member Name:	<u>Enter text.</u>	Birthdate:	<u>Enter text.</u>	Medicaid #	<u>Enter text.</u>
Address:	<u>Enter text.</u>	City:	<u>Enter text.</u>	Zip:	<u>Enter text.</u>
Email:	<u>Enter text.</u>	Phone:	<u>Enter text.</u>	Social Security #:	<u>Enter text.</u>
Does member have a legal guardian/power of attorney? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Guardian Name:	<u>Enter text.</u>	Relationship to member:	<u>Enter text.</u>		
Address:	<u>Enter text.</u>	City:	<u>Enter text.</u>	Zip:	<u>Enter text.</u>
Phone:	<u>Enter text.</u>	Cell	<u>Enter text.</u>		
Professional Completing Form:	<u>Enter text.</u>	Credentials:	<u>Enter text.</u>	Phone:	<u>Enter text.</u>
Agency Name & NPI:	<u>Enter text.</u>	Fax:	<u>Enter text.</u>		
Requested Start Date:	<u>Enter text.</u>	Projected Discharge Date:	<u>Enter text.</u>		
Primary & Subsequent ICD-10 Diagnosis Code (up to 5): <u>Enter text.</u>					
Licensed Professional Signature:	<u>Enter text.</u>	Credentials:	<u>Enter text.</u>	Date:	<u>Enter text.</u>

Risk Rating Criteria (Use on Risk Rate 0-4 tables below)

4 – Severe Risk - Indicates issues of utmost severity. The member would present with critical impairments in coping and functioning, with signs and symptoms, indicating an "imminent danger".

3 – Significant Risk - Indicates a serious issue or difficulty coping within a given dimension. A member presenting at this level of risk may be considered in or near "imminent danger".

2 – Moderate Risk - Indicates moderate difficulty in functioning. However, even with moderate impairment, or somewhat persistent chronic issues, relevant skills, or support systems may be present.

1 – Mild Risk - Indicates a mildly difficult issue, or present minor signs and symptoms. Any existing chronic issues or problems would be able to be resolved in a short period of time.

0 – Minimal or No Risk - Indicates a non-issue or very low-risk issue. The member would present no current risk and any chronic issues would be mostly or entirely stabilized.

Risk Rating (0-4)

ASAM Dimensions		0	1	2	3	4	Considerations - <i>Check all that apply</i>
1	Acute Intoxication and/or Withdrawal Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Recent Use <input type="checkbox"/> Withdrawal Problems <input type="checkbox"/> Other: Enter text.
2	Biomedical Conditions and Complications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Medical Problems <input type="checkbox"/> Physical Health <input type="checkbox"/> Pregnancy <input type="checkbox"/> Other: Enter text.
3	Emotional, Behavioral, or Cognitive Conditions or Complications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Co-occurring Mental Disorder <input type="checkbox"/> Psychological Health <input type="checkbox"/> Psychiatric Symptoms <input type="checkbox"/> Emotional Problems <input type="checkbox"/> Behavioral Problems <input type="checkbox"/> Cognitive Problems <input type="checkbox"/> Other: Enter text.

4	Readiness to Change	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Awareness of Problem <input type="checkbox"/> Understanding of Use as it Relates to Problems <input type="checkbox"/> Commitment to Treatment <input type="checkbox"/> Other: Enter text.
5	Relapse, Continued Use, or Continued Problem Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Coping skills <input type="checkbox"/> Strengths <input type="checkbox"/> Deficits/Impairments <input type="checkbox"/> Risk of Relapse (triggers, cravings, etc.) <input type="checkbox"/> Other: Enter text.
6	Recovery Environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Community Support System <input type="checkbox"/> Family Relationships <input type="checkbox"/> Peer Relationships <input type="checkbox"/> Romantic Relationships <input type="checkbox"/> Living Environment <input type="checkbox"/> School, Work, Legal Issues <input type="checkbox"/> Other: Enter text.

This section is used to document clinical rationale in each dimension for admission to the requested level of care.

Substance Use Disorder (SUD) Admission	
Dimension 1 – Acute intoxication and or Withdrawal Potential	Enter text.
Dimension 2 – Biomedical Conditions and Complications	Enter text.
Dimension 3 – Emotional Behavioral or Cognitive Conditions and Complications	Enter text.
Dimension 4 – Readiness to Change	Enter text.
Dimension 5 – Relapse, Continued Use, or Continued Problem Potential	Enter text.
Dimension 6 – Recovery Environment	Enter text.

This section is used to document clinical rationale in each dimension for continued service at the current level of care.

Dimensions for Continued Service at the Current Level of Care	
Dimension 1 – Acute intoxication and or Withdrawal Potential <input type="checkbox"/> Criteria A <input type="checkbox"/> Criteria B <input type="checkbox"/> Criteria C	Enter text.
Dimension 2 – Biomedical Conditions and Complications <input type="checkbox"/> Criteria A <input type="checkbox"/> Criteria B <input type="checkbox"/> Criteria C	Enter text.
Dimension 3 – Emotional Behavioral or Cognitive Conditions and Complications <input type="checkbox"/> Criteria A <input type="checkbox"/> Criteria B <input type="checkbox"/> Criteria C	Enter text.
Dimension 4 – Readiness to Change <input type="checkbox"/> Criteria A <input type="checkbox"/> Criteria B <input type="checkbox"/> Criteria C	Enter text.
Dimension 5 – Relapse, Continued Use, or Continued Problem Potential <input type="checkbox"/> Criteria A <input type="checkbox"/> Criteria B <input type="checkbox"/> Criteria C	Enter text.
Dimension 6 – Recovery Environment <input type="checkbox"/> Criteria A <input type="checkbox"/> Criteria B <input type="checkbox"/> Criteria C	Enter text.

Criteria A - The member is making progress, but has not yet achieved the goals articulated in the individualized treatment plan. Continued treatment at the present level of care is assessed as necessary to permit the member to continue to work his or her treatment goals; or

Criteria B - The member is not yet making progress, but has the capacity to resolve his or her problems. He or she is actively working toward the goals articulated in the individualized treatment plan. Continued treatment at the present level of care is assess as necessary to permit the member to continue to work toward his or her goals; and/or

Criteria C - New problems have been identified that are appropriately treated at the present level of care. The new problem or priority requires services, the frequency and intensity of which can only safely be delivered by the continued stay in the current level of care. The level of care in which the member is receiving treatment is therefore the least intensive level at which the member's problems can be addressed effectively.



**ASAM MCG 1.0
EFFECTIVE
1/1/20**

Authorization Request



Patient : PAT-00018718 **Name :** Doede, Alex **DOB :** 9/25/1948 **Gender :** Female

[▼ show more](#)

Authorization : EPS-00019246 **Type :** Admission authorization **Status :** NoDecisionYet

[▼ show more](#)

Diagnosis Codes : F10.10(ICD-10 Diagnosis) *primary* **Procedure Codes :** H2034(CPT/HCPCS) *primary*

Diagnosis Code: F10.10 (ICD-10 Diagnosis)

Description : ALCOHOL ABUSE UNCOMPLICATED

MT_ASAM 3.1 Adult - MT_ASAM 3.1 Adult - (BHG)

Inpatient level of care is/was needed for appropriate care of the patient because ...

- Member meets SUD criteria as described in the Montana Medicaid Provider Manual [🔗](#)
- Member meets ASAM 3.1 criteria [🔗](#)
- Member assessed to meet specs in ...
 - Acute intoxication and/or withdrawal potential [🔗](#)
 - Biomedical conditions and complications [🔗](#)
 - Emotioanl, behavioral, or cognitive conditions or complications [🔗](#)
 - Readiness to change [🔗](#)
 - Relapse, continued use, or continued problem potential [🔗](#)
 - Recovery environment [🔗](#)
- Member has atleast moderate ratings in ...
 - Readiness to change [🔗](#)
 - Relapse, continued use, or continued problem potential [🔗](#)
 - Recovery environment [🔗](#)

[✔ Save](#)

[✖ Cancel](#)



**ASAM MCG 2.0
EFFECTIVE
2/10/20**

Combining Risk and Criteria Dimension by Dimension

RISK RATING	4	This rating would indicate issues of utmost severity. The patient would present with critical impairments in coping and functioning, with signs and symptoms, indicating an "imminent danger" concern.	HIGH ↑ MODERATE ↑ LOW
	3	This rating would indicate a serious issue or difficulty coping within a given dimension. A patient presenting at this level of risk may be considered in or near "imminent danger."	
	2	This rating would indicate moderate difficulty in functioning. However, even with moderate impairment, or somewhat persistent chronic issues, relevant skills or support systems may be present.	
	1	This rating would indicate a mildly difficult issue, or present minor signs and symptoms. Any existing chronic issues or problems would be able to be resolved in a short period of time.	
	0	This rating would indicate a non-issue or very low-risk issue. The patient would present no current risk and any chronic issues would be mostly or entirely stabilized.	

ADOLESCENT CRITERIA: CROSSWALK OF LEVELS 0.5 THROUGH IV

Criteria Dimensions	Levels of Service				
	Level 0.5 Early Intervention	Level I Outpatient Treatment	Level II Intensive Outpatient Treatment	Level III Medically-Monitored Intensive Inpatient Treatment	Level IV Medically-Managed Intensive Inpatient Treatment
DIMENSION 1: Acute Intoxication and/or Withdrawal Potential	No withdrawal risk	No withdrawal risk	Manifests no overt symptoms of withdrawal risk	Risk of withdrawal syndrome is present but manageable in Level III	Severe withdrawal risk
DIMENSION 2: Biomedical Conditions and Complications	None or very stable	None or very stable	None or, if present, does not distract from addiction treatment; manageable at Level II	Require medical monitoring but not intensive treatment	Requires 24-hour medical and nursing care
DIMENSION 3: Emotional/Behavioral Conditions and Complications	None or very stable	None or manageable in an outpatient structured environment	Mild severity, with the potential to distract from recovery efforts	Moderate severity; requires a 24-hour structured setting	Severe problems require 24-hour psychiatric care, with concomitant addiction treatment
DIMENSION 4: Treatment Acceptance/Resistance	Willing to understand how current use may affect personal goals	Willing to cooperate but needs motivating and monitoring strategies	Resistance high enough to require structured program but not so high as to render outpatient treatment ineffective	Resistance high despite negative consequences; needs intensive motivating strategies in a 24-hour structured setting	Problems in this dimension do not qualify patient for Level IV treatment
DIMENSION 5: Relapse/Continued Use Potential	Needs understanding of, or skills to change, current use patterns	Able to maintain abstinence and recovery goals with minimal support	Intensification of addiction symptoms; high likelihood of relapse without close monitoring and support	Unable to control use despite active participation in less intensive care; needs 24-hour structure	Problems in this dimension do not qualify patient for Level IV treatment
DIMENSION 6: Recovery Environment	Social support system or significant others increase risk of personal conflict about alcohol/other drug use	Supportive recovery environment and/or patient has skills to cope	Environment unsupportive but, with structure or support, patient can cope	Environment dangerous for recovery, necessitating removal from the environment; logistical impediments to outpatient treatment	Problems in this dimension do not qualify patient for Level IV treatment

This overview of the Adolescent Admission Criteria is an approximate summary to illustrate the principal concepts and structure of the criteria.

Fig. 4. ASAM Patient Placement Criteria 2. (Courtesy of the American Society of Addiction Medicine)

Revised MCG language for all ASAM levels of care

1. Current Intoxication and/or Imminent Withdrawal Symptoms (select best fit option from each section)

- Intoxication (select best fit option):
 - No current intoxication, nor demonstrating active withdrawal symptoms
 - Current intoxication as evident by patient report, BAL, or drug screen results
- Imminent Withdrawal Risk (select best fit option):
 - Imminent risk of mild to moderate withdrawal symptoms based on reported/observed history
 - Imminent risk of moderate to severe withdrawal symptoms based on reported/observed history (if seizure history, note last seizure date)
 - Severe risk of withdrawal and requires full resources of a licensed hospital
 - No imminent withdrawal risk identified based on reported/observed history
- Withdrawal Symptoms (select best fit option):
 - Stable to moderate withdrawal symptoms present (provide CIWA/COWS score as applicable)
 - Moderate to severe withdrawal symptoms present, but manageable at residential level with medical supervision (provide CIWA/COWS score as applicable)
 - Severe risk withdrawal symptoms present requiring full resources of a licensed hospital
 - No withdrawal symptoms currently present as reported/observed

Revised MCG language for all ASAM levels of care

2. Physical Health or Medical Diagnoses (select best fit option)

- No physical health concerns or medical diagnoses of concern for SUD treatment, or if so, they do not represent a distraction to SUD treatment
- Physical health concerns and/or medical diagnoses of concern for SUD treatment are present, but very stable, or is receiving concurrent medical monitoring
- Physical health concerns and/or medical diagnoses of concern for SUD treatment are present and require 24-hour medical monitoring but not intensive treatment
- Physical health concerns and/or medical diagnoses of concern for SUD treatment are present and require 24-hour medical and nursing care and the full resources of a licensed hospital

Revised MCG language for all ASAM levels of care

3. Emotional Health and Psychological Diagnoses (select best fit option)

- No emotional health concerns or psychological diagnoses of concern for SUD treatment
- Emotional health concerns and/or psychological diagnoses of concern for SUD treatment are present, but very stable, or is receiving concurrent mental health monitoring
- Mild to moderate severity of emotional health concerns or psychological diagnoses with the potential to distract from recovery; needs monitoring
- Moderate to severe signs/symptoms of emotional health concerns or psychological diagnoses, actively distracting from recovery, requiring 24-hour setting to monitor for symptom improvement
- Unstable and dangerous signs/symptoms of emotional health concerns or psychological diagnoses require stabilization in 24-hour setting before recovery can be a treatment focus
- Erratic and dangerous behavior which threatens imminent harm to self or others

Revised MCG language for all ASAM levels of care

4. Motivation for Change to Pattern of Use/Behavior

(select best fit option)

- Patient identifies as ready for change but needs motivating and monitoring strategies to support
- Patient openly desires change, but needs structured environment to maintain progress
- Patient demonstrates as ambivalent regarding engagement in treatment, and with a lack of awareness of the substance use or mental health problem, and requires a structured program to support
- Has marked difficulty with, or opposition to, treatment with dangerous consequences resulting from continued use/behavior
- Not interested in treatment and impulse control poor, despite negative consequences; needs motivating strategies only safely available in a 24-hr structured setting

Revised MCG language for all ASAM levels of care

5. Likelihood of Relapse to Previous Patterns of Use/Behavior (select best fit option)

- Able to maintain sobriety or control use and/or addictive behaviors to engage in treatment with minimal support
- Recent escalation of pattern of use, or increase in addictive behaviors, or intensification of mental health symptoms indicating a high likelihood of relapse to previous patterns of use/behavior without close monitoring and support several times a week
- Understands relapse and potential triggers but needs structure to apply coping skills to successfully prevent relapse to previous patterns of use/behavior
- Patient does not demonstrate an understanding of skills needed to prevent continued use, despite active participation in less intensive levels of care
- Unable to control use with imminently dangerous consequences, despite active participation in less intensive levels of care

Revised MCG language for all ASAM levels of care

6. Social Supports and Community Resources to Support Recovery (select best fit option)

- Social supports and community resources are present to support recovery
- Social supports and community resources are either not present or can only minimally support recovery, but with structure, the patient can engage in treatment
- Current living environment is detrimental to recovery, but potential to create social supports and community resources is present
- Current surroundings are dangerous, and patient does not have the social supports or community resources to pursue recovery outside of a highly structured 24-hour setting

Lastly in addition to SUD and ASAM criteria...

To be in compliance with the existing state manual, our review team will also need evidence of:

- Appropriately licensed staff completing assessment
- For ASAM 3.7... Results of the initial lab results at admission will be required for the continued stay review
- For ASAM 2.1... Need for 3 or more core services must be documented

Understanding the Qualitrac RFIs

- Our review team will potentially send an RFI for the following reasons:
 - We have difficulty locating an element of criteria in the supporting documentation
 - More updated/current documentation is being requested
- Our review team will endeavor to use the following format when requesting an RFI:
 - Unable to find evidence of the following criteria: (1) <list specific criteria> (2) etc.
 - Unable to find more recent date in clinical than X business days prior to the requested start date of the service you have submitted the review for, and the timeliness requirements for requesting this service were set at no early then X business days
 - (*) Please either provide us with additional clinical documentation or let us know where in the documentation you already uploaded this criteria can be found.



Mountain-Pacific
Quality Health

QUESTIONS?

