

ASAM Technical Assistance Series

Conversations with Scott Boyles

Train for Change



Disclaimers

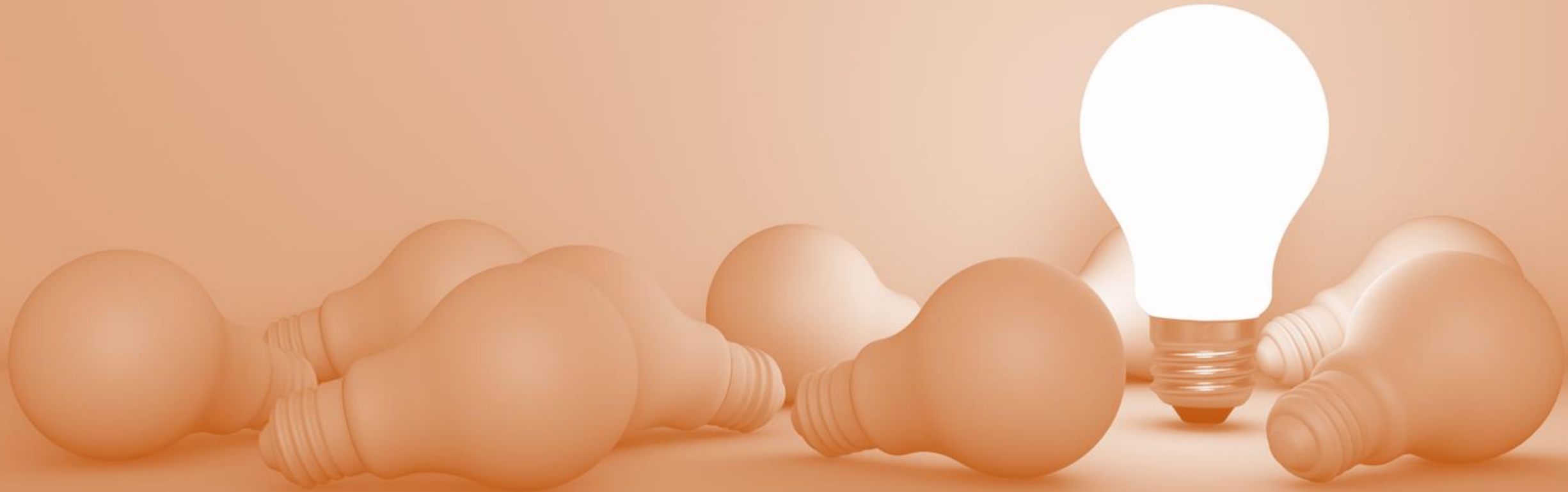
Alignment with The ASAM Criteria is required of drug and alcohol treatment providers that receive funding for providing treatment services under agreements with Single County Authorities and/or Managed Care Organizations.

DDAP stresses the importance of reviewing the ASAM Criteria text in its entirety, attending the ASAM two-day training, and reviewing the resources available through DDAP including trainings and documents.

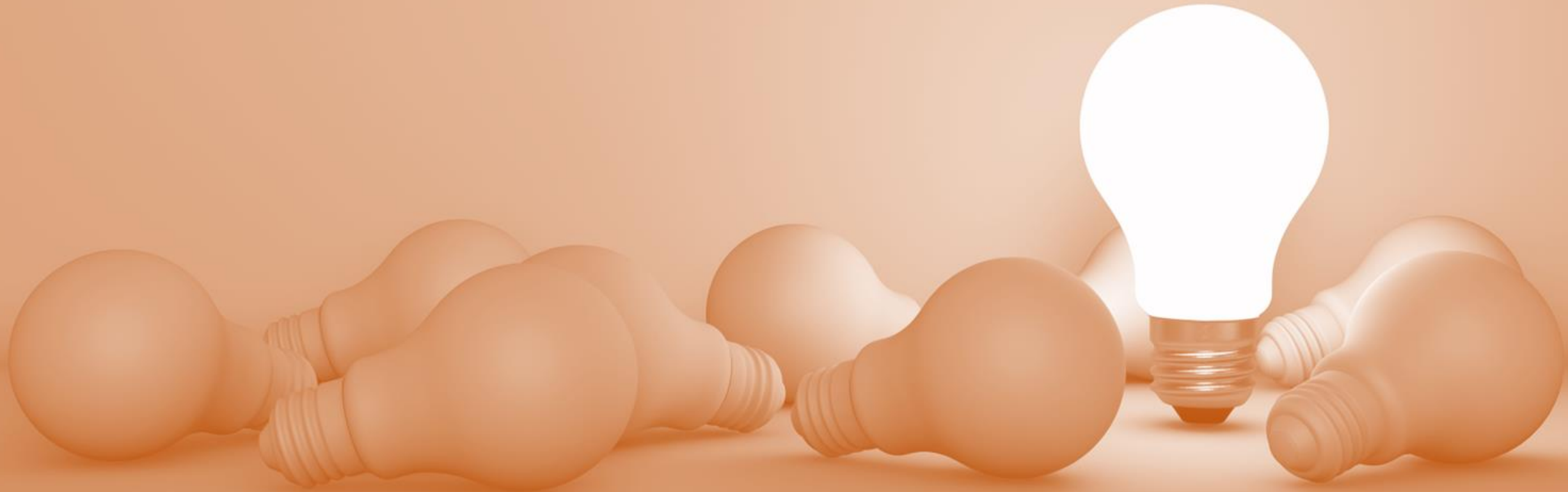
Learning Objectives

- Learn strategies to implement the ASAM Criteria (2013) into clinical practice
- Learn strategies to collaboratively develop and incorporate individual preferences into treatment planning
- Discuss clinical services verses ancillary and support services
 - Develop strategies for providers to determine if an activity is clinical or ancillary

Poll 1



Poll 2



Considerations

- “So while the ASAM Criteria was designed to be as objective, measurable and quantifiable as possible, readers must also recognize that certain aspects of these criteria require subjective interpretation.....diagnosis and assessment is a mix of objectively measured criteria and experientially based professional judgements”
 - The ASAM Criteria is not a specific defined set of regulations. As a result, States, payors, providers and other oversight entities may need to add additional fidelity measures and terminology aids to measure implementation.
 - Tools developed by ASAM:
 - ~Criteria Assessment Interview Guide
 - ~Continuum Software
 - ~CARF* Level of Care Certification Preparation Workbook and Standards
- *In collaboration

Considerations

“Scott said”= So what!

Know your regulations, contractual requirements, policies, procedures, specific definitions, measures, who's requiring them and why...



1. Can you provide suggestions and examples of how to incorporate member preferences into treatment plans beyond just preferences for size of group, type of therapy, or AA vs NA?



2. What's a "clinically delivered" service compared to "non-clinical?"
~How is this relevant to treatment the treatment plan?



3. How to address positive urine drug screens in the treatment plan, rather than move to administrative discharge?



“Return to use is a common event during the recovery process, and a patient should not necessarily be placed in a more intensive level of care based solely upon episodes of return to use.”

ASAM Criteria, Fourth Edition

Recurrence

“ To discharge or suspend a patient for an acute recurrence of signs and symptoms is to break continuity of care at precisely a crisis time when the patient needs support to continue treatment.”

Appendix B, pg. 408
Third Edition of the ASAM Criteria

**Additional
questions?**



Question Submission and Future Topics

- Suggestions for future webinar topics
- Questions should be submitted 10 days in advance of the webinar

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Thank you!



Reminder

Next TA Call = Monday July 1, 2024
10:00am

Topic =Continue Series with Scott

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