

# Division Criteria 2016

## Summary

### Levels of Service

Division Criteria adopts The American Society of Addiction Medicine (ASAM) Criteria: Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions (Third Edition, 2013) for the specific program descriptions for the ASAM specific levels of service. The Provider's will be required to have policy & procedures (P&P) / program descriptions for each level offered and these will be noted in the P&P section of the certification report.

- Level 3.5 Clinically Managed Medium-Intensity Residential (Adolescent)
  - In addition to the description in ASAM, Clinically managed medium intensity residential includes **no less than 25 hours per week of counseling interventions**. A minimum of 7 hours per day of structured activities must be provided on each billable day.
- Level 3.5 Clinically Managed High-Intensity Residential (Adult)
  - In addition to the description in ASAM, Clinically managed high intensity residential includes **no less than 25 hours per week of counseling interventions**. A minimum of 7 hours per day of structured activities must be provided on each billable day.

### Other Division Levels / Endorsements:

The Provider's will be required to have policy & procedures / program descriptions for each level / endorsement offered and these will be noted in the P&P section of the certification report.

- **Telehealth Services Endorsement**
  - Use of technology devices to deliver some aspects of psychotherapy or behavioral treatment directly to patients via interaction with web-based programs or software. Carroll & Rounsaville, 2010.
  - Telehealth falls into 4 broad categories:
    - **Live Video**, or synchronous, services involve real-time, two-way interaction, similar to an office visit but with the patient and provider communicating through a live stream from different locations.
      - **Distant Site** means the location of the site where a telehealth provider of behavioral health care is providing telehealth services to a patient located at an originating site.
      - **Originating Site** means the location of the site where a patient is receiving telehealth services from a provider of behavioral health care located at a distant site.
    - **Store-and-forward**, or asynchronous, telehealth involves the transmission of recorded behavioral health information – such as a prerecorded video – through electronic communications systems to a provider who evaluates the information and provides a service, but not in real time.
    - **Remote patient monitoring** uses technology to collect personal or behavioral health data from a person in one location and transmits it to a behavioral health care provider in another location, allowing the provider to track a patient's health status.

- **Mobile health** involves the use of mobile communication devices – such as smart phones and tablets – to support behavioral health care, public health, and education. Mobile behavioral health applications can help people manage chronic conditions, track sleep patterns or fitness, schedule appointments, or send behavioral health alerts via confidential technological communications.
- **Targeted Case Management Endorsement**
  - Adopt SAPTA Policy for Targeted Case Management (when completed)
- **Co-Occurring Disorder Services Endorsement**
  - Adopt the Dual Diagnosis Capability in Addiction Treatment (DDCAT) Rating Scale:
    - The DDCAT rating scale is an evidence-based benchmark instrument for measuring a Provider’s capacity to deliver services for persons with co-occurring mental health and substance use disorders. The DDC scale is designed to guide both programs and system authorities in assessing and developing dual diagnosis capacity for integrated service delivery.
- **Civil Protective Custody / Withdrawal Management** (NRS 458.175, 458.270)
  - Definition: Intoxication management for persons taken into Civil Protective Custody (CPC) by a peace officer for being unlawfully under the influence of a controlled substance in a public place (NRS 458.175) or for being under the influence of alcohol in a public place, and unable to provide for the health or safety of self or others (NRS 458.270). Civil Protective Custody is not provided in a jail.
  - CPC facility must be a Provider that is SAPTA certified for Withdrawal Management: Level 3.2WM Clinically Managed Residential Withdrawal Management or Level 3.7WM Medically Monitored Inpatient Withdrawal Management.
  - Required Services:
    - The person placed in CPC must be:
      - Recorded at the withdrawal management facility
      - Communicate at the earliest practical time to the person’s family or next of kin if they can be located.
    - The person’s vital signs must be monitored at least once every 2 hours during the person’s waking hours by a staff member with a nursing license, physician license or be certified as a Detoxification Technician.
    - Prior to discharge, a good faith effort must be made to advise the person of his/her treatment options.
    - If the person has been placed in CPC pursuant to NRS 458.175 for being unlawfully under the influence of a controlled substance or intoxicated with alcohol in a public place, the person must be remanded to the custody of law enforcement personnel upon discharge (NRS 458.175 (2), NRS 458.270 (4)).
  - Admission Criteria:
    - Individuals admitted to CPC / WM facilities must be delivered to the facility by a peace officer (NRS 458.175 or 458.270).
    - The person must not require treatment at a higher level of care.

- Continued Service Criteria:
  - If taken into CPC pursuant to NRS 458.175, the person continues to be under the influence of a controlled substance.
  - If taken into CPC pursuant to NRS 458.270, the person continues to be under the influence of alcohol in such a condition that the person is unable to exercise care for his/her health or safety of other persons.
  - If the person is under the influence of alcohol they may not be required to remain in the facility longer than 48 hours without voluntary consent.
  - The person does not require treatment at a higher level of care.
- Transfer / Discharge Criteria:
  - If taken into CPC pursuant to NRS 458.175, the person is no longer under the influence of a controlled substance and they must be released to the apprehending peace officer upon release from the CPC/WM facility (NRS 458.175 (2)).
  - If taken into CPC pursuant to NRS 458.270, the person is no longer under the influence of alcohol in such a condition that the person is unable to exercise care of his/her health or safety or the safety of other persons, and they must immediately be released to the custody of the apprehending peace officer (NRS 458.270 (4)).
- Aside from the Clinical / Treatment Sections of the certification report specific to requirements for Withdrawal Management, the program must be licensed by Health Care Quality Compliance based on NAC 449.
- **Transitional Housing**
  - Definition: Transitional Housing services consist of a supportive living environment for individuals who are receiving substance abuse treatment in an Intensive Outpatient, or Outpatient program and who are without appropriate living alternatives.
  - Licensing / Certification Requirements:
    - Transitional Housing facilities may be licensed as determined by HCQC for Alcohol and Drug Treatment (ADA), Halfway House for Recovering Alcohol and Drug Abusers (HWH), or Transitional Living for Released Offenders (TLF).
    - Transitional Housing sites that HCQC determines do not need to be licensed will obtain a letter stating such from HCQC to include with their certification application to SAPTA.
      - Sites exempt from HCQC licensure will need to obtain approval from local authorities or obtain a written waiver from local authorities (fire marshal, city/county business license)
  - Transitional Housing Services include:
    - The program activities are focused on problems in applying recovery skills, and should include but are not limited to referral and linkage, referral and coordination of care, client support and advocacy, self-help meetings, monitoring and follow-up.
    - Frequency and service limits will depend on the level of care utilized; the ideal situation is that the client progress through a care continuum.

- Admission Criteria:
  - Individuals admitted to Transitional Housing services must be concurrently admitted to a Level 1 Outpatient or Level 2.1 Intensive Outpatient program per an assessment (ASI, DSM, ASAM).
  - The ASAM assessment must be reviewed to ensure there is instability in Dimension 6: Recovery Environment.
- Continued Service Criteria:
  - The individual remains in Level 1 or Level 2.1 and ASAM Dimensional reviews reveal continued instability in the Recovery Environment.
  - The individual does not require a higher level of care.
- Transfer / Discharge Criteria:
  - The individual needs a higher level of care per ASAM Dimensional review and is transferred.
  - The individual has gained stable housing / recovery environment and no longer needs Transitional Housing.

**Residential / Withdrawal Management / Opioid Treatment Services:** Aside from the Clinical / Treatment Sections of NAC 458, SAPTA certification will defer to NAC 449 / Health Care Quality Compliance (HCQC) reports. Certain information from HCQC reports or national accreditation will be noted in the certification report.

#### **Utilization Criteria / Medical Necessity**

Division Criteria adopts ASAM 6 Dimensional Assessment to determine recommendations for initial level of care placement. Division Criteria adopts ASAM Continued Service Criteria, Transfer Criteria and Discharge Criteria for utilization review for ASAM levels of service, non-ASAM levels of service and endorsed levels of service.

#### **Assessment Tools per NAC 458.246 must include one or more the following Assessment Tools or domain elements.**

- Adult Addiction Severity Index (ASI)
- Teen Addiction Severity Index (T-ASI) must include a medical section as the T-ASI does not include one.
- Global Appraisal of Individual Needs (GAIN)
- Biopsychosocial Assessment Tool that at a minimum includes:
  - Medical Status
  - Employment/Support Status
  - Substance Use
  - Legal Status
  - Family/Social Status
  - Psychiatric Status
  - Academic
  - Physical / Sexual Abuse
  - Risk assessment including suicidal/homicidal ideation