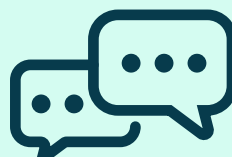



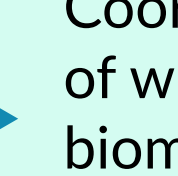









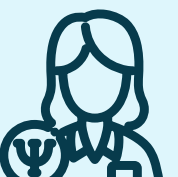










The ASAM Criteria® Levels of Care

Level		Purpose	Time Commitment	Type of Treatment Provided		
EARLY INTERVENTION						
1.0	Long-Term Remission Monitoring	Includes programs for remission monitoring and early reintervention services for patients who are in sustained remission	3 months (minimum) Regular recovery management checkups (RMC)	Provide RMC Established relationships with more intensive levels of care to facilitate rapid readmission to treatment as needed		
1.5	Outpatient Therapy	Includes outpatient psychosocial services for patients with substance use disorder (SUD)	<9 hours/week of structured clinical services	 Counseling	 Psychotherapy	 Psychoeducation
1.7	Medically Managed Outpatient Treatment	Programs that provide services for patients with SUD who can be treated safely and effectively with low-intensity outpatient services	<9 hours/week of psychosocial services & medical care	 (for Level 1.7 only)  Coordinated management of withdrawal, as well as biomedical and psychiatric comorbidities		
OUTPATIENT TREATMENT						
2.1	Intensive	Programs that provide intensive outpatient services for patients with SUDs	9 to 19 hours/week of structured clinical services	 Counseling	 Psychotherapy	 Psychoeducation
2.5	High-Intensity	Programs (previously referred to as PHPs in the Third Edition) provide high-intensity outpatient services for patients with SUDs	≥ 20 hours/week of structured clinical services	 Clinically planned & managed therapeutic milieu		
2.7	Medically Managed Intensive	For patients who require access to medical management with extended nurse monitoring but not 24-hour nursing support, overnight medical monitoring, nor residential structure and support	≥ 20 hours/week of psychosocial services & medical care	 Counseling	 Psychotherapy	 Psychoeducation
				 & Coordinated management of withdrawal, as well as biomedical and psychiatric comorbidities. Includes extended-nurse monitoring		
RESIDENTIAL TREATMENT						
3.1	Clinically Managed Low-Intensity	For patients who require structure and support to build and practice recovery and coping skills	9 to 19 hours/week of structured clinical services	 Counseling	 Psychotherapy	 Psychoeducation
3.5	Clinically Managed High-Intensity	For patients who require structure and support to build and practice recovery and coping skills to avoid experiencing immediate recurrence or continuing to use in a manner that poses significant risk for serious harm or destabilizing loss upon transition to a less intensive level of care	≥ 20 hours/week of structured clinical services	 High-intensity (for Level 3.5) Clinically planned & managed therapeutic milieu with 24-hour structure & support		
3.7	Medically Managed	For patients who require 24-hour observation, monitoring, and treatment but not the full resources of a hospital	≥ 20 hours/week of psychosocial services & medical care	 Counseling	 Psychotherapy	 Psychoeducation
				 & Coordinated management of withdrawal, as well as biomedical and psychiatric comorbidities		
INPATIENT TREATMENT						
4.0	Medically Managed	For patients whose acute intoxication; withdrawal; and biomedical, psychiatric, and/or cognitive conditions are so severe that they require 24-hour medically directed evaluation and treatment in an acute care hospital	24 hours/day medically directed evaluation and treatment required in an acute care hospital	