

Service Name	ADULT SUBSTANCE USE DISORDER ASSESSMENT
Setting	Outpatient services are rendered in a professional office, clinic, home or other environment appropriate to the provision of psychotherapy or substance use services.
Facility License	As required by DHHS Division of Public Health
Basic Definition	The adult substance use disorder assessment is an evaluation through utilization of validated tools to guide the process of the assessment in determining if a substance use disorder exists and if so, what appropriate level of intervention is recommended.
Service Expectations (basic expectations for more detail see Title 471 chapter 20)	<p>The assessment report is comprised of the following three components:</p> <ol style="list-style-type: none"> 1) ASSESSMENT AND SCREENING TOOLS AND SCORES All initial adult substance use disorder assessment reports will include the use and results of at least one nationally accepted screening instrument. One example of an acceptable instrument is the Substance Abuse Subtle Screening Inventory (SASSI). The Addiction Severity Index (ASI) is required to be used as a face-to-face structured interview guide, to be scored and utilized to provide information for the bio psychosocial assessment/substance use disorder evaluation and the multidimensional risk profile. 2) COMPREHENSIVE PSYCHOSOCIAL ASSESSMENT All initial adult substance use disorder assessment will include the following: <ul style="list-style-type: none"> • Demographics <ul style="list-style-type: none"> ○ Identify provider name, address, phone, fax, and e-mail contact information ○ Identify individual name, identifier, and other demographic information of the individual that is relevant • Presenting problem/chief complaint • External leverage to seek evaluation • When the individual was first recommended to obtain an evaluation • Synopsis of what led the individual to schedule the evaluation • Medical and work/school/military history • Alcohol/drug history and summary <ul style="list-style-type: none"> ○ Frequency and amount ○ Drug and alcohol of choice ○ History of all substance use and substance use disorders ○ Use patterns ○ Consequences of use (physiological, interpersonal, familial, vocational, etc.) ○ Periods of abstinence, when and why ○ Tolerance level ○ Withdrawal history and potential ○ Influence of living situation on use ○ Addictive behaviors (e.g. gambling) ○ IV drug use ○ Prior substance use disorder evaluations and findings ○ Prior substance use disorder treatment

	<ul style="list-style-type: none"> ○ Individual's family chemical use history ● Legal history ● Criminal history and other information ● Drug testing results ● Simple screening instrument results ● Nebraska Standardized Reporting Format for Substance Abusing Offenders ● Family/social/peer history (including trauma history) ● Psychiatric/behavioral history <ul style="list-style-type: none"> ○ Previous mental health diagnoses ○ Prior mental health treatment ● Collateral information <ul style="list-style-type: none"> ○ Resources may include family, friends, and community systems (e.g. legal system) ○ Any reports about the individual's use history, pattern and/or consequences learned from other sources ○ Prior mental health treatment ● Summary of evaluation <ul style="list-style-type: none"> ○ Behavior during evaluation (agitated, mood, cooperation) ○ Motivation to change ○ Level of denial or defensiveness ○ Personal Agenda ○ Discrepancies of information provided ● Diagnostic impression (including justification) to include a DSM (current edition) diagnosis ● Strengths of individual and family identified ● Problems identified ● Complete the ASAM Clinical Assessment and Placement Summary assuring that collateral contacts with significant others (e.g. former and current healthcare providers, friends, court contacts) is made to verify medical history, substance usage, and legal history <p>3) MULTIDIMENSIONAL RISK PROFILE</p> <p>Recommendations for individualized treatment, potential services, modalities, resources, and interventions are to be based on the ASAM national criteria multidimensional risk profile. The provider is responsible for referring to the ASAM criteria for the full matrix when applying the risk profile for recommendations.</p> <ul style="list-style-type: none"> ● All Medicaid eligible individuals will be screened for co-occurring conditions throughout the assessment. If the clinician is a LADC or a PLADC and suspects a possible mental health condition, a referral is to be made to a clinician capable of diagnosing/treating co-occurring mental health and substance use disorders. ● All staff will be educated/trained in recovery principles and trauma informed care.
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Length of Service	The substance use disorder assessment is completed prior to initiation of services and should be updated yearly. A substance use addendum may be completed if determined to be medically necessary (see ASA Addendum service definition).
Staffing	The initial adult substance use disorder assessment is to be completed by a licensed clinician who is working within their scope of practice (e.g. training, experience, and/or education in substance use disorder treatment). Providers may include the following: physician, physician assistant, APRN, psychologist, provisional psychologist, LIMHP, LMHP, PLMHP, LADC or PLADC.
Desired Individual Outcome	The completion of a substance use disorder assessment to include a DSM (current edition) diagnosis, an assessment of risk of dangerousness to self and/or others, and recommendations for intervention.