CHAPTER 75-09.1-07
OUTPATIENT SERVICES - ADULT ASAM LEVEL I

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75-09.1-07-01. Definitions.

As used in this chapter:

1. "Assertive referral" means the identification of appropriate services and actively assisting the client to connect with the service provider and follow through with the plan of service.

2. "Chronic" means diagnosed chemical dependency or severe and persistent mental illness as described in the DSM and characterized by long duration and progression of symptoms, frequent recurrence or relapse, and a prognosis that indicates continuous clinical care or support or both to maintain stability and remission or reduction of symptoms.

3. "Chronic care and maintenance services" means outpatient services necessary and appropriate to assist a client who is chronically chemically dependent or chronically mentally ill or both to maintain stability and live in the community as independently as possible. Such services include professionally directed case management, psychiatric care, support services, monitored medication administration, professional addiction counseling, mental health counseling, mental health and chemical dependency assessment, social services, supported housing, and other services sufficient to allow a client to live outside an institutional setting. This service may be provided as a component of services within a residential or transitional living setting or other such facility but would not require formal attachment to that facility.

4. "Intentional community treatment and support" means proactively identifying client needs and deficits and seeking to identify and put in place services or resources to address those needs and deficits through assertive referral, active implementation, and continuous monitoring by treatment personnel.

5. "Outpatient services" means an organized nonresidential service or an office practice that provides professionally directed aftercare, individual, and other addiction services to clients according to a predetermined regular schedule of fewer than nine contact hours a week.

History: Effective October 26, 2004.
General Authority: NDCC 50-06-16, 50-31
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75-09.1-07-02. Provider criteria.

1. An outpatient services program shall offer no more than eight hours of programming per week.

2. An outpatient services program shall offer the program with the length of stay to be determined by a client's condition and functioning.

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75-09.1-07-03. Program criteria.

1. An outpatient services program shall provide skilled treatment services that may include any combination of the following:

   a. Individual or group counseling, motivational enhancement, brief intervention, cognitive-behavioral therapy, opioid substitution therapy, family therapy, educational groups, occupational and recreational therapy, or other psychotherapy; or

   b. Case coordination, case management, chronic care and maintenance services, intentional community treatment support, or assertive community treatment.

2. An outpatient services program must provide services in an amount, frequency, and intensity appropriate to a client's treatment plan.

3. An outpatient services program must address as the need arises with a client with a mental health problem issues of psychotropic medication, mental health treatment, and their relationship to substance use disorders.

4. An outpatient services program with a dual diagnosis enhanced program shall offer therapies to actively address, monitor, and manage psychotropic medication, mental health treatment, and the interaction with substance-related disorders.

5. Counseling or assessment of a client regarding the client's abuse of alcohol or a controlled substance must be provided by a licensed addiction counselor as provided in North Dakota Century Code chapter 43-45. The provision of case management and educational services do not need to be performed by licensed addiction counselors. A licensed addiction counselor must be present in all team meetings where level of care and treatment planning decisions are made regarding a client receiving or referred for substance abuse services.

6. For chronic care and maintenance services, an outpatient services program shall offer services that are comprehensive and have an indefinite and variable programming or provision schedule determined by the client's stability, level of functioning, and assessed needs for ongoing community support and maintenance services.

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75-09.1-07-04. Admission criteria.

For admission to outpatient services, the client shall meet the criteria set forth in subsections one and two and at least one of the remaining criteria:

1. Meet diagnostic criteria for substance-induced disorders of the DSM; and

2. Meet admission criteria for ASAM level I outpatient services in all six ASAM dimensions and meet at least one of the following:

   a. Demonstrates the need to take extended time for evaluation or lacks motivation to make a commitment to a more intensive recovery effort and requires motivational enhancement strategies;

   b. Has completed a higher intensity level of care but requires continued services until recovery stabilizes;

   c. Has evidence of a brief return to usage not resulting in significant physical or emotional deterioration;

d. Requires outpatient counseling of an intensity that will meet the client's needs without placement in a higher level of care;

e. Has not been through a prior treatment and exhibits motivation for recovery and meets ASAM criteria for level I in dimensions one, two, three, five, and six or the client has low severity of problems in ASAM dimensions one, two, three, five, and six;

f. Has a low severity of problems in ASAM dimensions one, two, three, five, and six but is not motivated and requires motivation enhancement strategies best delivered in a level I program; or

g. Has a severe and persistent mental illness that impairs the client's ability to consistently follow through with mental health appointments, take prescribed psychotropic medications, and maintain mental and personal stability in the community but does have the ability to access services such as assertive community treatment and case management or supportive living.

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