 City/County SAMSO Authorization Request Form

Treatment Services

First Name:

Date of Birth:

Physical Address w/ Zip Code:

Cell Phone:

Last Name:       Male Female

SSN last 4 (if known):

Mailing Address (if different):

Email Address:

Agency Requesting Authorization:

Referral Source:       Date of Referral:

Previous Treatment (Dates and Types of Treatment):

Axis I Substance Use Primary Diagnosis (ICD-10 or DSM-5):

Axis I Non-Substance Use Primary Diagnosis if applicable (ICD-10 or DSM-5):

Motivation for Treatment: (Check one) High Medium Low Other: (Describe)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Substances Used:** | **Amount** | **Frequency** | **Duration** | **Last Use\*** |
| Primary: |  |  |  |  |
| Secondary: |  |  |  |  |
| Tertiary: |  |  |  |  |
| *\*If last use is not in the recent past, please include an explanation in section one of the clinical information section.* | | | | |

|  |  |
| --- | --- |
| **In the past 30 days, how many days has the client experienced?** | Days |
| Medical problems (sickness and/or physical health problems, non‐substance abuse related) |  |
| Education/Employment problems (poor attendance, performance, and missed responsibility) |  |
| Substance Abuse Problems ( Memory lapses, withdrawal symptoms, cravings) |  |
| Family problems (missed responsibilities, verbal or physical abuse, not caring for children) |  |
| Social Problems (missed responsibilities, verbal/physical abuse, serious conflict due to poor communication) |  |
| Psychiatric problem (serious depression, anxiety, suicidal thoughts) |  |

Is the consumer currently receiving or referred to **case management** services?

Do not count your agency’s case management services unless it is funded by a source other than the SAMSO.

If client is receiving services from YFAC or the Children’s Partnership, list Care Coordinator below.

Consumer is already receiving case management:

Name of Case Manager:       Phone Number:       Name of agency:

I have referred consumer today to:

Name of Case Manager:       Phone Number:       Name of agency:

Client refused referral

Type of Request (check one):  Initial  Concurrent  Extension

Step-down  Resubmission/Correction  Discharge Notice

Funding Source:  At Risk Adults  Youth Youth Intervention

Medication Assisted Treatment

the following require a referral from the funder:

Community Court  Family Drug Treatment CourtThriveCare of Travis County

Healthy Community Collaborative Ryan White

Forensic SUD/SB 292 (individual must have criminal justice involvement and mental health diagnosis)

Begin Date for Requested Services:       or Discharge Date:

**Please Check Requested Service(s):**

Diagnostic Interview/Assessment (no medical) – 90791

Diagnostic Interview/Assessment (with medical) -- 90792

Acudetox – 1127

ASAM Level 3.7 – Medically Monitored Intensive Inpatient Services – 525

ASAM Level 3.5 Clinically Managed High-Intensity Residential Services – 134

ASAM Level 3.5 Clinically Managed High-Intensity Residential Services – Woman accompanied by dependent child - H2036HD

ASAM Level 3.1 Clinically Managed Low-Intensity Residential Services – Woman accompanied by dependent child - H2036SK

ASAM Level 3.1 Clinically Managed Low-Intensity Residential Services – 128

ASAM Level 2.1 Intensive Outpatient Services - 905

ASAM Level 1 Outpatient Services, Individual Psychotherapy over 53 minutes – 90837

ASAM Level 1 Outpatient Services, Group Psychotherapy – 90853

Preventive Medicine Group Counseling – 99412

Methadone Bundled Treatment – H0020

Buprenorphine Bundled Treatment – H0047

**Clinical Information to Support Requested Level of Care according to the following Dimensions:** (For reauthorization, address how client is benefiting from treatment, progressing towards goals, their motivation level, and clinical need for further treatment.)

## Dimension 1: Alcohol Intoxication and/or Withdrawal Potential

SEVERITY/INTENSITY RATING (0=no problem or stable/1=mild/2=moderate/3=substantial/4= severe)

1. Individual fully functioning w/ good ability to tolerate, cope with withdrawal discomfort

No signs or symptoms of withdrawal present or are resolving and if alcohol, a CIWA-Ar score of less

than 3

No signs or symptoms of intoxication

1. Adequate ability to tolerate or cope with withdrawal discomfort.

Mild to moderate intoxication, or signs, symptoms interfere w/daily functioning, but not a danger to

self or others

Minimal risk of severe withdrawal resolving and if alcohol, a CIWA-Ar score of 3-7

Sub intoxication level

1. Some difficulty tolerating and coping w/withdrawal discomfort

Intoxication may be severe, but responds to treatment so individual does not pose imminent danger

to self or others

Moderate signs and symptoms with moderate risk of severe withdrawal

Somewhat intoxicated

If alcohol, a CIWA-Ar score if 8-11

1. Demonstrates poor ability to tolerate and cope with withdrawal discomfort.

Severe signs and symptoms of intoxication indicating possible imminent danger to self & others

Severe signs and symptoms or risk of severe but manageable withdrawal; or withdrawal is worsening

despite detoxification at less intensive level of care

Very intoxicated

If alcohol, a CIWA-Ar score if 12-15

1. Incapacitated, with severe signs and symptoms of withdrawal

Severe withdrawal presents danger (e.g. seizures)

Continued use poses an imminent threat to life

Stuporous

If alcohol, a CIWA-Ar score over 15

Dimension 2: Biomedical Conditions and Complications

SEVERITY/INTENSITY RATING (0=no problem or stable/1=mild/2=moderate/3=substantial/4= severe)

0 Fully functioning with good ability to tolerate or cope w/ physical discomfort

No biomedical signs or symptoms are present, or biomedical problems stable

No biomedical conditions that will interfere with treatment or create risk

1 Demonstrates adequate ability to tolerate and cope with physical discomfort

Mild to moderate signs or symptoms interfere with daily functioning, but would likely not interfere

with recovery treatment nor create risk

2 Some difficulty tolerating and coping with physical problems and/or has other biomedical problems Has a biomedical problem, which may interfere with recovery treatment

Has a need for medical services which might interfere with recovery treatment (e.g., kidney dialysis) Neglects to care for serious biomedical problems

Acute, non-life threatening medical signs and symptoms are present

3 Demonstrates poor ability to tolerate and cope with physical problems and/or general health is poor Has serious medical problems he/she neglects during outpatient treatment that require frequent

medical attention

Severe medical problems are present but stable.

Medical problem(s) present that would be severely exacerbated by a relapse

Medical problem(s) present that would be severely exacerbated by withdrawal (e.g., diabetes,

hypertension)

Medical problems that require medical or nursing services

4 Incapacitated, with severe medical problems

Severe medical problems that are life-threatening risk

Dimension 3: Emotional, Behavioral, or Cognitive Conditions and Complications

SEVERITY/INTENSITY RATING (0=no problem or stable/1=mild/2=moderate/3=substantial/4= severe)

1. No or stable mental health problems
2. Sub-clinical mental disorder

Emotional concerns relate to negative consequences and effects of addiction.

Suicidal ideation without plan

Social role functioning impaired, but not endangered by substance use; mild symptoms that do not

impair role functioning (e.g. social, school, or work)

Mild to moderate signs and symptoms with good response to treatment in the past.

Or past serious problems have long period of stability or are chronic, but do not pose high risk of harm

2 Suicidal ideation or violent impulses require more than routine monitoring

Emotional, behavioral, or cognitive problems distract from recovery efforts.

Symptoms are causing moderate difficulty in role functioning (e.g. school, work)

Frequent and/or intense symptoms with a history of significant problems that are not well stabilized,

but not imminently dangerous

Emotional/behavioral/cognitive problems/symptoms distract from recovery efforts

Problems with attention or distractibility interfere with recovery efforts

History of non-adherence with required psychiatric medications

3 Frequent impulses to harm self or others which are potentially destabilizing, but not imminently

dangerous

Adequate impulse control to deal with thoughts of harm to self or others

Uncontrolled behavior and cognitive deficits limit capacity for self-care, ADL’s

Acute symptoms dominate clinical presentation (e.g. impaired reality testing, communication, thought

processes, judgment, personal hygiene, etc.) and significantly compromise community

adjustment and follow through with treatment recommendations

4 Individual has severe and unstable psychiatric symptoms and requires secure confinement

Severe and acute psychotic symptoms that pose immediate danger to self or others (e.g. imminent

risk of suicide; gross neglect of self-care; psychosis with unpredictable, disorganized, or violent

behavior)

Recent history of psychiatric instability and/or escalating symptoms requiring high intensity services

to prevent dangerous consequences

Dimension 4: Readiness to Change

SEVERITY/INTENSITY RATING (0=no problem or stable/1=mild/2=moderate/3=substantial/4= severe)

0 Willingly engaged in treatment as a proactive participant, is aware of/admits to having an addiction

problem and is committed to addiction treatment and changing substance use and adherence with psychiatric medications

Can articulate personal recovery goals

Willing to cut negative influences

Is in Preparation or Action Transtheoretical Stage of Change

1 Willing to enter treatment and explore strategies for changing AODA use or dealing with mental

health disorder but is ambivalent about need for change ( is in Contemplation Stage of Change)

Willing to explore the need for treatment and strategies to reduce or stop substance use

Willing to change AODA use but believes it will not be difficult or will not accept a full recovery

treatment plan or does not recognize that he/she has a substance use problem

2 Reluctant to agree to treatment for substance use or mental health problems but willing to be

compliant to avoid negative consequences or may be legally required to engage in treatment

Able to articulate negative consequences of AODA use but has low commitment to change use of

substances

Low readiness to change and is only passively involved in treatment

Variably compliant with outpatient treatment, self-help or other support groups

3 Exhibits inconsistent follow through and shows minimal awareness of AODA or mental health

disorder and need for treatment

Appears unaware of need to change and unwilling or only partially able to follow through with

treatment recommendations

4 Unable to follow through, has little or no awareness of substance use or mental health problems and

associated negative consequences

Not willing to explore change and is in denial regarding illness and its implications

Is not in imminent danger or unable to care for self – no immediate action required

Unable to follow through with treatment recommendations resulting in imminent danger of harm to

self/others or inability to care for self

Dimension 5: Relapse, Continued Use or Continued Problem Potential

SEVERITY/INTENSITY RATING (0=no problem or stable/1=mild/2=moderate/3=substantial/4= severe)

0 No potential for further AODA or MH problems

Low relapse or continued use potential and good coping skills

Is engaged with ongoing recovery/support groups

Has positive expectancies about treatment

No use of illicit drugs

Has no demographic risk factor (under 25 years of age, never married or having lived as married,

unemployed, no high school diploma or GED)

No current craving

No impulsivity noted

Appropriately self-confident

Not risk-taking or thrill-seeking

No psychiatric medication required or adherent with psychiatric medications

1 Minimal relapse potential with some vulnerability

Some craving with ability to resist

One or two changeable demographic risk factors

Marginally affected by external influences

Mostly non-impulsive

Mostly confident

Low level of risk-taking or thrill-seeking

Fair self-management and relapse prevention skills

Needs support and counseling to maintain abstinence, deal with craving, peer pressure, and lifestyle

and attitude changes

Mostly adherent with prescribed psychiatric medications

Episodic use of alcohol (less than weekly)

Sporadic use of drugs (<1/week), not injected

2 Impaired recognition and understanding of substance use relapse issues

Difficulty maintaining abstinence despite engagement in treatment

Able to self-manage with prompting

Some craving with minimal/sporadic ability to resist

One or two durable demographic risk factors

Moderately affected by external influences

Neither-impulsive nor deliberate

Uncertain about ability to recover or ambivalent

Moderate level of risk-taking or thrill-seeking

Mostly adherent with prescribed psychiatric medications with failure likely to result in moderate to

severe problems

Regular use of alcohol (once or twice a week)

Moderate use of drugs (1-3X/week), not injected

3 Little recognition and understanding of substance use relapse

Has poor skills to cope with and interrupt addiction problems, or to avoid or limit relapse or continued

use

Severe craving with minimal/sporadic ability to resist

Three demographic risk factors

Substantially affected by external influences

Somewhat impulsive

Dubious about ability to recover

High level of risk-taking or thrill-seeking

Mostly non-adherent with prescribed psychiatric medications with failure likely to result in moderate

to severe problems

Frequent use of alcohol (3 or more times a week)

Frequent use of drugs (more than 3X/week) and/or smoking drugs

4  Repeated treatment episodes had little positive effect on functioning

No skills to cope with and interrupt addiction problems or prevent/limit relapse or continued use

Severe craving with no ability to resist

Four or more significant demographic risks

Totally outer-directed

Very impulsive

Very pessimistic or inappropriately confident about ability to recover but is not in imminent danger or

unable to care for self – no immediate action required

Dangerous level of risk-taking or thrill-seeking

Not at all adherent with prescribed psychiatric medications with failure likely to result in severe

problems

Daily intoxication

Daily use of illicit drugs and/or IV drug use

Is in imminent danger or unable to care for self

Dimension 6: Recovery Environment

SEVERITY/INTENSITY RATING (0=no problem or stable/1=mild/2=moderate/3=substantial/4= severe)

0  Has a supportive environment or is able to cope with poor supports

Living in a dry, drug-free home

Few liquor outlets/no overt drug dealing

Subcultural norms strongly discourage abusive use

Positive leisure/recreational activities not associated with use

No risk for emotional, physical or sexual abuse

No logistical barriers to treatment or recovery

1  Has passive support in environment; family/significant other support system need to learn techniques

to support the individual’s recovery effort (e.g. limit setting, communication skills, etc.)

Significant others are not interested in supporting addiction recovery, but individual is not too

distracted by this situation, and is able to cope with the environment

Individual demonstrates motivation and willingness to obtain a positive social support system

Safe supportive living situation in a non-dry or non drug-free home

Alcohol & drugs readily obtainable

Subcultural norms discourage abusive use

Leisure/recreational activities conducive to recovery available

Some risk for emotional, physical or sexual abuse

Logistical barriers to treatment or recovery can be readily overcome

2  Environment is not supportive of addiction recovery, but with clinical structure, individual is able to

cope most of the time

Living alone

Ready access to alcohol & drugs near home

Subcultural norms inconsistent about abusive use

Leisure/recreational activities neutral for recovery

Above average risk for emotional, physical or sexual abuse

Logistical barriers to treatment or recovery serious but resolvable

3  Environment is not supportive of addiction recovery, and coping is difficult, even with clinical

structure

Someone in the household currently dependent or abusing

Bars/liquor stores/dealers prevalent

Subcultural norms encourage abusive use

Alcohol and drugs readily available at preferred leisure/recreational activities

Substantial risk for emotional, physical or sexual abuse in current environment

Substantial logistical impediments to treatment or recovery

4  Environment is not supportive of addiction recovery and is hostile and toxic to recovery or treatment

progress

Unstable residence, living in shelter or mission, homeless

Extensive drug dealing/solicitation

Subcultural norms strongly encourage abusive use

Leisure/recreational activities poise severe risks

Currently being emotionally, physically or sexually abused

Extreme logistical impediments to treatment or recovery

Unable to cope with negative effects of the living environment on recovery - no immediate action

required

Environment is not supportive of addiction recovery, and is actively hostile to recovery, posing an

immediate threat to safety and well-being - **immediate action required**

Completed by (please print):      Provider ID:       Phone #:

**Please Upload the Completed Form to Integral Care’s FTP Website**

# CONTACT: Utilization Management (512) 440-4044