The ASAM Criteria® Service Request Form
Continued Service

MEMBER INFORMATION

Name:	Date of Birth:
Address:	
Member Identifier:	Insurance Type:

DSM/ICD DIAGNOSES

Have there been any changes in the member's medical or psychiatric diagnoses since the last request?　　Yes　　No

CONTINUED SERVICE REQUEST

Current Level of Care	Recovery Residence
Initial admission date	
Expected date of transition to a less intensive level of care	
Current ASAM Criteria Recommended Level of Care: (based on the Dimensional Admission Criteria)	Recovery Residence
Reason for Discrepancy (if applicable):	

Additional Details: Please provide additional details on the reason for discrepancy (if applicable), including any relevant Dimension 6 concerns, such as barriers to care and patient preferences.

TREATMENT PROGRESS

Has the patient made progress towards addressing their Dimensional Drivers since the last authorization or is progress expected imminently?　Yes　　No

Provide a brief summary of the patient's current clinical presentation, including an overview of the patient's progress addressing their Dimensional Drivers since the last authorization and the concerns that continue to require treatment in the requested level of care. If the patient has not made significant progress, is progress expected imminently?

Have any new signs or symptoms emerged or been identified that meet criteria for the current level of care or a more intensive level of care?　Yes　　No

If Yes, please provide relevant clinical details.

Please describe any ongoing challenges or barriers to treatment progress.

How has the treatment plan been updated to address any ongoing challenges or barriers to treatment progress?
What additional services or supports will be delivered?

TRANSITION PLAN

Anticipated next level of care	Recovery Residence
Anticipated program/provider name (if known)	

Describe any care coordination that has occurred with the anticipated program or provider:

Estimated date of transition	

BARRIERS TO TRANSITION

Please describe any known barriers to transition to the anticipated next level of care:

Please discuss the services and supports that are being provided to address these barriers:

How will the patient's **addiction medication needs** be addressed through the transition, if applicable?

How will the patient's **mental health care needs,** including psychiatric medications, be addressed through the transition, if applicable?

How will the patient's **physical health care needs** (eg, for ongoing infectious disease management) be addressed through the transition, if applicable?

DIMENSION 1: INTOXICATION, WITHDRAWAL, AND ADDICTION MEDICATION

Subdimension	Risk Rating at Admission		Current Risk Rating	
	Risk Rating	Dimensional Driver	Risk Rating	Dimensional Driver
Intoxication and Associated Risks				

Provide clinical justification for the risk rating. If this subdimension is a Dimensional Driver for the member provide a summary of progress, challenges, and any new issues identified since the last review.

Relevant Measures	Relevant Prior Measurement/Score	Date/Time	Most Recent Measurement/Score	Date/Time	Date/Time/Route of relevant medications

	Risk Rating at Admission			Current Risk Rating		
Subdimension	Risk Rating		Dimensional Driver	Risk Rating		Dimensional Driver
Withdrawal and Associated Risks						

Provide clinical justification for the risk rating. If this subdimension is a Dimensional Driver for the patient provide a summary of progress, challenges, and any new issues identified since the last review.

Relevant Measures	Relevant Prior Measurement/Score	Date/Time	Most Recent Measurement/Score	Date/Time	Date/Time/Route of relevant medications

	Risk Rating at Admission			Current Risk Rating		
Subdimension	Risk Rating		Dimensional Driver	Risk Rating		Dimensional Driver
Addiction Medication Needs						

Provide clinical justification for the risk rating. If this subdimension is a Dimensional Driver for the patient provide a summary of progress, challenges, and any new issues identified since the last review.

Relevant Measures	Relevant Prior Measurement/Score	Date/Time	Most Recent Measurement/Score	Date/Time	Date/Time/Route of relevant medications

Dimension 1 Treatment Plan [complete if any subdimension is a dimensional driver]

Describe any changes to the treatment plan related to this Dimension since the last review.

DIMENSION 2 – BIOMEDICAL CONDITIONS

	Risk Rating at Admission		Current Risk Rating	
Subdimension	Risk Rating	Dimensional Driver	Risk Rating	Dimensional Driver
Physical Health Concerns				

Provide clinical justification for the risk rating. If this subdimension is a Dimensional Driver for the patient provide a summary of progress, challenges, and any new issues identified since the last review.

Relevant Measures	Relevant Prior Measurement/Score	Date/Time	Most Recent Measurement/Score	Date/Time	Date/Time/Route of relevant medications

	Risk Rating at Admission		Current Risk Rating	
Subdimension	Risk Rating	Dimensional Driver	Risk Rating	Dimensional Driver
Pregnancy-Related Concerns				

Provide clinical justification for the risk rating. If this subdimension is a Dimensional Driver for the patient provide a summary of progress, challenges, and any new issues identified since the last review.

Relevant Measures	Relevant Prior Measurement/Score	Date/Time	Most Recent Measurement/Score	Date/Time	Date/Time/Route of relevant medications

Dimension 2 Treatment Plan [complete if any subdimension is a dimensional driver]

Describe any changes to the treatment plan related to this Dimension since the last review.

DIMENSION 3 – PSYCHIATRIC AND COGNITIVE CONCERNS

	Risk Rating at Admission			Current Risk Rating		
Subdimension	Risk Rating		Dimensional Driver	Risk Rating		Dimensional Driver
Active Psychiatric Symptoms						

Provide clinical justification for the risk rating. If this subdimension is a Dimensional Driver for the patient provide a summary of progress, challenges, and any new issues identified since the last review.

Relevant Measures	Relevant Prior Measurement/Score	Date/Time	Most Recent Measurement/Score	Date/Time	Date/Time/Route of relevant medications

	Risk Rating at Admission			Current Risk Rating		
Subdimension	Risk Rating		Dimensional Driver	Risk Rating		Dimensional Driver
Persistent Disability						

Provide clinical justification for the risk rating. If this subdimension is a Dimensional Driver for the patient provide a summary of progress, challenges, and any new issues identified since the last review.

Relevant Measures	Relevant Prior Measurement/Score	Date/Time	Most Recent Measurement/Score	Date/Time	Date/Time/Route of relevant medications

Dimension 3 Treatment Plan [complete if any subdimension is a dimensional driver]

Describe any changes to the treatment plan related to this Dimension since the last review.

DIMENSION 4 – SUBSTANCE USE-RELATED RISKS

	Risk Rating at Admission		Current Risk Rating	
Subdimension	Risk Rating	Dimensional Driver	Risk Rating	Dimensional Driver
Likelihood of Risky Substance Use				

Provide clinical justification for the risk rating. If this subdimension is a Dimensional Driver for the patient provide a summary of progress, challenges, and any new issues identified since the last review.

	Risk Rating at Admission		Current Risk Rating	
Subdimension	Risk Rating	Dimensional Driver	Risk Rating	Dimensional Driver
Likelihood of Risky SUD-Related Behavior				

Provide clinical justification for the risk rating. If this subdimension is a Dimensional Driver for the patient provide a summary of progress, challenges, and any new issues identified since the last review.

Dimension 4 Treatment Plan [complete if any subdimension is a dimensional driver]

Describe any changes to the treatment plan related to this Dimension since the last review.

DIMENSION 5 – RECOVERY ENVIRONMENT INTERACTIONS

	Risk Rating at Admission		Current Risk Rating	
Subdimension	Risk Rating	Dimensional Driver	Risk Rating	Dimensional Driver
Ability to Function in Current Environment				

Provide clinical justification for the risk rating. If this subdimension is a Dimensional Driver for the patient provide a summary of progress, challenges, and any new issues identified since the last review.

Relevant Measures	Relevant Prior Measurement/Score	Date/Time	Most Recent Measurement/Score	Date/Time	Date/Time/Route of relevant medications

	Risk Rating at Admission		Current Risk Rating	
Subdimension	Risk Rating	Dimensional Driver	Risk Rating	Dimensional Driver
Safety in Current Environment				

Provide clinical justification for the risk rating. If this subdimension is a Dimensional Driver for the patient provide a summary of progress, challenges, and any new issues identified since the last review.

	Risk Rating at Admission		Current Risk Rating	
Subdimension	Risk Rating	Dimensional Driver	Risk Rating	Dimensional Driver
Support in Current Environment				

Provide clinical justification for the risk rating. If this subdimension is a Dimensional Driver for the patient provide a summary of progress, challenges, and any new issues identified since the last review.

Dimension 5 Treatment Plan [complete if any subdimension is a dimensional driver]
Describe any changes to the treatment plan related to this Dimension since the last review.

MEDICATIONS

Have there been any changes to the member's medication since the last review?   Yes   No

Medications	Dosage/ Route/Frequency	Purpose	Does this differ from last update? Y/N

Is the member experiencing any challenges related to medication access or adherence?   Yes   No
If yes, please describe:

REQUESTOR INFORMATION

Requestor name:	Credentials/Licensure (e.g., MD, CRNP, LCSW-C, LCPC):
Primary clinician:	Primary clinician contact information:
Signature:	Date/Time:
Facility Name:	
Group ID#:	Tax ID#:

Subdimension	Risk Rating at Admission		Current Risk Rating	
	Risk Rating	DD*	Risk Rating	DD*
D1: Intoxication and Associated Risks				
D1: Withdrawal and associated risks				
D1: Addiction medication needs				
D2: Physical health concerns				
D2: Pregnancy-related concerns				
D3: Active psychiatric concerns				
D3: Persistent Disability				
D4: Likelihood of risky substance use				
D4: Likelihood of risky SUD-related behaviors				
D5: Ability to function in current environment				
D5: Safety in current environment				
D5: Support in current environment				

*Dimensional Driver