

Patient Flow Terms and Definitions

- 1. Admission:** The point in an individual's relationship with an organized treatment service when the intake process has been completed, an individual has been determined to be eligible to receive services, and he/she accepts these services and enters treatment.⁶
- 2. Adult:** An individual aged 18 and above.⁵
- 3. ASAM:** The American Society of Addiction Medicine. ASAM is the professional society representing physicians and associated professionals dedicated to increasing access and improving the quality of addiction treatment.⁶
- 4. ASAM Criteria:** A set of guidelines developed by ASAM for assessing and making placement decisions for patients with addiction and co-occurring conditions.⁶
- 5. Authorization:** Authorized services are services that require approval from SAPC, but do not require authorization prior to the provision of services. In these instances, UM staff will perform concurrent reviews of care and extensions of previous authorizations, when pertinent.⁶
- 6. Beneficiary Access Line (BAL):** A centralized screening and referral service that is available 24 hours a day, seven days a week. Patients can call the BAL to initiate a self-referral for treatment or can also be referred by an organization or others, including but not limited to, physical health providers, law enforcement, family members, mental health care providers, schools, and County departments.⁶
- 7. Brief Triage Assessment:** The first stage of screening based on ASAM Criteria that an adult calling for access to SUD services through the BAL or walking into a treatment agency would receive to establish the provisional level of care recommendation for SUD treatment.⁵
- 8. Care Coordination:** The deliberate organization of patient care activities between two or more participants (including the patient) involved in a patient's care to facilitate the appropriate delivery of health care services.⁶
- 9. Case Management:** A collaborative process of assessment, planning, facilitation, care coordination, evaluation, and advocacy for options and services to meet an individual's and family's comprehensive health needs through communication and available resources to promote quality, cost-effective outcomes.⁶
- 10. Certified Substance Use Disorder Counselor:** An individual who has been certified by one of three National Commission for Certifying Agencies (NCCA) accredited organizations recognized by the California Department of Health Care Services, including California Association for Alcohol/Drug Educators (CAADE), California Consortium of Addiction Programs and Professionals (CCAPP) and California Association of DUI Treatment Programs (CADTP), to provide counseling services including intake, service needs

assessment, treatment planning, recovery planning, and individual or group counseling for alcohol and other drug program patients.²

- 11. Client:** An individual who receives treatment for alcohol, tobacco, and/or other drug or addictive behavior problems. The terms “client” and “patient” sometimes are used interchangeably, although staff in medical settings more commonly use “patient,” while staff in non-medical residential, outpatient, and publicly funded treatment settings often use “client.”⁷
- 12. Discharge:** The point at which an individual’s active involvement with a treatment service agency is terminated, and he or she no longer is carried on the agency’s record as a patient.⁷
- 13. Discharge Plan:** An individualized and comprehensive strategy that is developed during intake and admission; and that aims to link patients to next step resources, to minimize patients’ chances of relapse, and to assist patients’ re-entry into the community upon completion of SUD treatment.¹
- 14. Drug Medi-Cal:** The California Medical Assistance Program (Medi-Cal) for individuals needing SUD services.⁴
- 15. Full ASAM Assessment:** An extensive biopsychosocial clinical assessment using a standardized tool based on the ASAM Criteria to establish and/or confirm the appropriate level of care placement as conducted at the qualified network provider site.⁵
- 16. Licensed Practitioner of the Healing Arts (LPHA):** A term that includes physicians, nurse practitioners, physician assistants, registered nurses, registered pharmacists, licensed clinical psychologists, licensed clinical social workers, licensed clinical professional counselors, and licensed marriage and family therapists.⁶
- 17. Medi-Cal Eligibility:** An entitlement to receive health care services, including SUD services, in California for individuals with annual personal or family income that is up to 138 percent of federal poverty level. Individuals who are 65 or older, blind, disabled, under 21 years old, pregnant, in a skilled nursing facility, on refugee status, screened for breast and/or cervical cancer; or who are enrolled in CalFresh, CalWorks, Refugee Assistance, Supplemental Security Income, or Foster Care/Adoption Assistance Program may likewise be eligible for Medi-Cal.³
- 18. Medication Assisted Treatment (MAT):** The use of medications, in combination with counseling and behavioral therapies, to comprehensively treat substance use disorders and provide a whole-patient approach to treatment that includes addressing the biomedical aspects of addiction.⁶
- 19. Medical Necessity Criteria:** A definition of accepted health care services that involves diagnosis, impairment, and intervention. Medical necessity in Los Angeles County requires that individuals have at least one diagnosis from the current Diagnostic and Statistical Manual of Mental Disorders (DSM) for Substance-Related and Addictive Disorders, with the

exception of Tobacco-Related Disorders and Non-Substance-Related Disorders. The service must also meet a recommended level of intervention consistent with the current edition of the ASAM placement guidelines, which include a consideration of biopsychosocial severity.⁶

- 20. Patient:** An individual who receives treatment for alcohol, tobacco, and/or other drug or addictive behavior problems. The terms “client” and “patient” sometimes are used interchangeably, although staff in medical settings more commonly use “patient,” while staff in non-medical residential, outpatient, and publicly funded treatment settings often use “client.”⁷
- 21. Pre-Authorization Services:** Services for which the treating provider must request authorization from the SAPC Office of the Medical Director and Science Officer (OMDSO) before initiating treatment and/or before continuing care for an extension of a previous authorization.⁵
- 22. Provider Network:** SAPC-contracted substance use disorder treatment providers.⁵
- 23. Provisional Level of Care (LOC):** The temporary assignment of an adult patient to a particular treatment modality after a brief triage assessment has been conducted, which will be confirmed or modified after a full ASAM assessment has been conducted at a network provider site.⁵
- 24. Recovery Support Services:** Non-clinical, post-treatment services that foster health and resilience in individuals and families by helping them to navigate systems of care, and reduce barriers to employment, housing, education, and other life goals. They incorporate a broad range of support and social services that facilitate recovery, wellness, and linkage to and coordination among service providers. Similar to how patients see their primary care provider for periodic health checkups even when healthy, RSS can be viewed as aftercare or continuity of care in SUD treatment. The frequency of RSS is dependent on patient need, preference, and stage of recovery.⁶
- 25. Residential Treatment:** An ASAM level of care providing 24-hour planned and structured regimen of care for patients in need of safe and stable living environments that are conducive to developing, practicing and demonstrating recovery skills in order to avoid immediate relapse to substance use and addictive behaviors.⁷
- 26. Screener:** A brief behavioral health questionnaire for use with youth under the age of 18 to screen for high risk of alcohol and other drug use (including marijuana) disorders. The youth screener is designed to assess whether a caller would benefit from a referral to an SUD provider for further assessment and substance abuse treatment.⁸
- 27. Substance Use Disorder (SUD):** Marked by a cluster of cognitive, behavioral, and physiological symptoms indicating that the individual continues to use alcohol, tobacco, and/or other drugs despite significant related problems. It is the new term for what previously included “substance dependence” and “substance abuse” of the American Psychiatric Association.⁷

- 28. Substance Abuse Prevention and Control (SAPC):** The Los Angeles County agency responsible for leading and administering a full spectrum of substance use prevention, treatment, and recovery support services, including Drug Medi-Cal services, for County residents.⁶
- 29. Telehealth:** The U.S. Health Resources Services Administration (HRSA) defines telehealth as the use of electronic information and telecommunications technologies to support long-distance clinical health care, patient and professional health-related education, public health and health administration. Technologies include videoconferencing, the Internet, store-and-forward imaging, streaming media, and terrestrial and wireless communications. Some County-operated and contracted SUD providers currently offer telehealth services, including tele-psychiatry. DPH SAPC will encourage SUD providers to expand or introduce telehealth as an offered service, and will explore telehealth as a means to expand the availability of medication-assisted treatments, physician consultations, and services for special populations, among other services.^{9,5}
- 30. Transfer:** Movement of the patient from level of care to another within the SUD continuum of care.⁵
- 31. Treatment:** Application of planned procedures to identify and change patterns of behavior that are maladaptive, destructive, and/or injurious to health; or to restore appropriate levels of physical, psychological, and/or social functioning.⁷
- 32. Treatment Plan:** An individualized plan based on a comprehensive biopsychosocial assessment of the patient and, when possible and appropriate, a comprehensive evaluation of the family.⁷
- 33. Warm Hand-off:** The practice of coordinating patient care from one provider or treatment professional/staff to another while the patient is within the treatment system in order to help ensure that patient receives the full set of services intended to guide him or her to recovery.⁵
- 34. Young Adult:** An individual aged 18 through 25.⁵
- 35. Youth:** An individual aged 12 through 17.⁵
- 36. Youth Screener:** a brief behavioral health questionnaire for use with youth under the age of 18 to screen adolescents for high risk of alcohol and other drug use, including marijuana, disorders. The youth screener is designed to assess whether a caller would benefit from a referrals to a SUC provider for further assessment and substance abuse treatment.⁵

References

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