# Medically Monitored Intensive Inpatient Services – Level 3.7 (pp. 272 276)

## ADULT DIMENSIONAL ADMISSION CRITERIA – Medically Monitored Intensive Inpatient Services

Admission is appropriate when specifications are met in at least **two** of the six dimensions, at least **one** of which is in dimensions 1, 2, or 3:

- **DIM 1**: Patient needs withdrawal management protocol.
- DIM 2:
  - Interaction of the patient's biomedical condition and continued alcohol and/or other drug use places the patient at significant risk of serious damage to physical health or concomitant biomedical conditions; OR
  - b) A current biomedical condition requires 24-hour nursing and medical monitoring or active treatment, but not the full resources of an acute care hospital.
- DIM 3: If significant emotional, behavioral, or cognitive conditions and impairment are present, the patient must be admitted into a co-occurring capable, a co-occurring enhanced program, a program with a Certificate of Approval as meeting the criteria in the co-occurring disorder competent bulletin, or through a client referral to a mental health provider. \*see "CoOccurring," p. 24

## DIM 4:

- a) Despite experiencing serious consequences or effects of the addictive disorder and/or behavioral health problem, the patient does not accept or relate the addictive disorder to the severity of the presenting problem; OR
- b) Patient is in need of intensive motivating strategies, activities, and processes available only in a 24-hour structured, medically monitored setting; *OR*
- c) Ongoing 24-hour psychiatric monitoring to assure follow through with the treatment regimen, and to deal with issues such as ambivalence about adherence to psychiatric medications and a recovery program.

## • DIM 5:

- a) Patient is experiencing an acute psychiatric or substance use crisis, marked by intensification of symptoms of his or her addictive or mental disorder, which poses a serious risk of harm to self or others in the absence of 24-hour monitoring and structured support; OR
- b) Patient is experiencing an escalation of relapse behaviors and/or reemergence of acute symptoms, which places the patient at serious risk to self or others in the absence of the type of 24-hour monitoring and structured support found in a medically monitored setting; *OR*
- c) The intensity or modality of treatment protocols to address relapse require that the patient receive Level 3.7 program, to safely and effectively initiate antagonist therapy, or agonist therapy.

## • DIM 6:

- a) Patient requires continuous medical monitoring while addressing his or her substance use and/or psychiatric symptoms because his or her current living situation is characterized by a high risk or initiation or repetition of physical, sexual, or emotional abuse, or active substance abuse, such that the patient is assessed as being unable to achieve or maintain recovery at a less intensive level of care; *OR*
- b) Family members or significant others living with the patient are not supportive of his or her recovery goals and are actively sabotaging treatment, or their behavior jeopardizes recovery efforts; *OR*
- c) Patient is unable to cope, for even limited periods of time, outside of 24-hour care.
- 1. Because of the medical staffing requirement of this LOC, Medically Monitored Residential Providers licensed under the 710 or 711 regulations will most likely qualify to deliver 3.7 services, i.e., residential treatment provided in a healthcare facility, a hospital capable of monitoring; a psychiatric hospital.
- 2. However, in such instances where a program licensed under the 709 regulations that also provides withdrawal management services and is required to have primary care staffing as per Licensing Alert 302, would also meet the requirements to provide Medically Monitored Intensive Inpatient Services, i.e., a free-standing psychiatric hospital or a residential provider with access to medical staff.