Montana's system of services for individuals with a chemical dependency serves about 6,500 adults each year. Eligible individuals must have incomes at or below 200 percent of the federal poverty level and have a substance use dependency.

The services generally follow the five levels of care developed by the American Society of Addiction Medicine (ASAM) and reflect a range of treatment, from prevention and early intervention to residential treatment and maintenance of sobriety. Individuals enter this continuum of care at the level appropriate to their needs and either move up to more intensive treatment or down to less intensive treatment as needed.

This briefing paper summarizes the ASAM levels of care.

**Level of Care 0.5: Early Intervention**
The lowest level of care involves prevention activities aimed at both the general population and at people considered at risk of substance abuse.

Primary prevention programs include those provided in classrooms and through media campaigns aimed at all Montanans. The programs usually encourage people to avoid a behavior that could lead to problems with substance abuse. Secondary and tertiary prevention efforts including prevention efforts targeted to groups that are considered at risk, such as children of alcoholics, and intervention efforts with individuals already engaged in risk-related behaviors, such as being ticketed for underage possession of alcohol or driving while under the influence of alcohol or drugs.

Primary prevention activities reached more than 367,000 Montanans in Fiscal Year 2013.

**Level of Care 1: Outpatient Treatment**
Outpatient treatment is the lowest level of treatment on the ASAM scale. Individuals at this level take part in eight hours or less of treatment each week. The treatment activities vary according to individual needs and may range from screening assessments to meeting with a sponsor or participating in individual, group, or family therapy.

About 3,150 adults entered services at this level in FY 2013.
**Level of Care 2: Intensive Outpatient Treatment and Day Treatment**

At Level of Care 2, individuals receive nine to 30 hours of treatment per week. Similar to Level 1, the services at this level are designed around individual treatment needs. They vary in intensity and frequency according to the severity of an individual's substance abuse disorder or other problems. Services could include medical and mental health consultation, psychiatric medication management, and crisis services, if necessary.

Services at this level are broken into two categories:

- **Level 2** involves nine or more hours of intensive outpatient treatment per week in programs that are offered during the day, before or after work or school, or in the evening or on weekends. The services include educational and treatment components, as well as opportunities for people to apply newly acquired skills in their daily lives. More than 1,900 adults entered services at this level in FY 2013.

- **Level 2.5** involves partial hospitalization, or day treatment, programs that provide 20 or more hours of intensive programming a week for individuals who need daily monitoring or management but who can be served in an outpatient setting. The programs usually have access to psychiatric, medical, and laboratory services. In Montana, Level 2.5 services currently are only offered to youth.

**Level of Care 3: Residential/Inpatient Services**

At Level of Care 3, individuals receive inpatient services at a facility staffed by addiction treatment and mental health personnel. The patients take part in treatment and other activities as needed, including vocational, educational, and social skills training.

Level 3 services are broken into six different levels that range from low-intensity residential services to medically monitored detoxification. At Level 3.1 and Level 3.3, patients are in a structured environment with clinical services appropriate to their needs, including mental health needs. In FY 2013, almost 200 individuals entered services at Level 3.1, while 29 women and their children were in Level 3.3 services. In Montana, those residential services are reserved for mothers and their children.

The four remaining levels — 3.5, 3.7, 3.2-D, and 3.7-D — involve medically monitored treatment for people with significant medical, emotional, or behavioral needs and clinically managed or medically monitored detoxification. Detoxification generally occurs in the first five days of admission at these levels. In FY 2013, 304 adults entered services at Level 3.5, and 621 entered at Level 3.7 when they were admitted to the Montana Chemical Dependency Center, the state-operated residential facility.

**Level of Care 4: Medically Managed Intensive Inpatient Services**

Individuals needing this level of care are hospitalized because treatment of their medical needs is the primary focus. Although substance abuse treatment is provided, it is not the main focus of the hospitalization. The state chemical dependency program does not offer services at this level, but Medicaid may pay the costs for Medicaid enrollees who need the services.