

Integrated systems of care needed to address co-occurring disorders

SAMHSA's Tip 42: A helpful resource for providers

According to SAMHSA's 2014 National Survey on Drug Use and Health, more than *one in three adults with a substance use disorder also had a mental disorder*. Traditional treatment often fails to assess for co-occurring disorders (CODs) or assumes all of the patient's symptoms are related to either a primary substance use or mental health diagnosis. Magellan encourages the need to prioritize treatment integration to address both mental health and substance abuse conditions and consider both conditions as primary throughout treatment service planning.

The SAMHSA Center for Substance Abuse Treatment Improvement Protocol 42 (TIP 42) emphasizes the Comprehensive, Continuous, Integrated Systems of Care Model for addressing CODs. TIP 42 is based on the realization that COD conditions are the expectation and not the exception throughout the service system; as such, programs need to accommodate individuals that present for either mental health or substance abuse services through integrated screening and assessment.

Integrated screening is most often used to determine the likelihood of a COD and is typically not meant to identify specific types of disorders. Screening methods may include mental health and substance abuse checklists, laboratory tests, clinical interviews, and personal contacts. Integrated screening may indicate the likelihood of a disorder that meets or exceeds the threshold of symptoms for a clinical diagnosis.

On the other hand, integrated assessment addresses both mental health and substance abuse to establish a formal diagnosis, evaluate level of functioning, determine the client's readiness for change and make decisions about level of care assignment. The diagram below depicts relationships among *Screening, Assessment, and Treatment Planning*.

Magellan recognizes that many providers are presently conducting initial/admission integrated screening and assessment for both psychiatric and substance use disorders as part of criteria for regional and/or state COD initiatives. Fortunately, there are screening and assessment tools in the form of checklists and surveys that are available and designated for use in the public domain and referenced in TIP 42.

For more information on TIP 42, go to the SAMSHA site at: www.kap.samhsa.gov and search for Tip 42. If you have any questions or comments regarding COD screening and assessment, please contact Steven Jenkusky, M.D., at SJenkusky@MagellanHealth.com.

