9533.0090 INTEGRATED ASSESSMENT.

Subpart 1. **Integrated assessment required.** When the certificate holder has made a preliminary determination that the client has a co-occurring substance use disorder and mental illness, the certificate holder must complete an integrated assessment that includes all of the information required in subparts 4 to 6 and part 9505.0372, subpart 1, and Minnesota Statutes, section 245G.05, subdivision 1. The certificate holder must substitute the requirements of this part for the requirements in parts 2960.0450, subpart 2, item A; 9505.0372, subpart 1; and 9520.0790, subpart 3; and Minnesota Statutes, section 245G.05, subdivision 1; as applicable, for a client who is receiving integrated treatment.

Subp. 2. Second assessment not required. Notwithstanding the requirement in subpart 1, if the certificate holder has performed a diagnostic assessment for the purpose of complying with part 9533.0080, then the certificate holder does not need to comply a second time with the requirements in part 9505.0372, subpart 1, as part of the integrated assessment.

Subp. 3. **Timing.** For residential programs, the integrated assessment must be completed no more than ten days after admission. For outpatient programs, the integrated assessment must be completed within the first three client sessions. For all programs that provide treatment for children, the certificate holder must prepare a new integrated assessment for a child client every six months.

Subp. 4. Supplemental information. The integrated assessment must include:

A. a level of care assessment using a standardized tool, if a level of care determination has not been made within the previous 30 days. The level of care assessment must document how the needs of the client match the corresponding level of care of integrated treatment determined necessary;

B. a longitudinal review of the interaction between substance use and psychiatric symptoms and the consequences to the client's health, relationships, and emotional functioning;

C. an assessment of a client's stage of treatment and motivation for change;

D. documentation of a client's relevant strengths and indication of how these may be useful in treatment; and

E. information from collateral sources about the client when available.

Subp. 5. **Integrated assessment summary.** The certificate holder must use the comprehensive information gathered during the assessment process to culminate in an integrated assessment summary that will later lead to the creation of a single integrated treatment plan. This integrated assessment summary must include:

A. a case conceptualization that identifies antecedents, responses toward, and consequences of symptoms and maladaptive behaviors of both disorders and their interaction across key areas of a client's life functions;

B. a description of how the client's symptoms and behaviors associated with one disorder affect or impact the expression of symptoms and severity of the other disorder;

MINNESOTA RULES

C. a description of situational factors in which the client's substance use behavior is typically triggered or is typically absent;

D. a description of the client's domains of behavior and symptoms that have been most challenging to recovery or have led to crises;

E. a description of the factors that contribute to the client's stability and relapse for both disorders and how the interaction of the disorders affects stability and ability to benefit from treatment;

F. consideration of referral for pharmacological treatments; and

G. a preliminary treatment plan that states specific treatment recommendations. When developing these treatment recommendations, the certificate holder must consider:

(1) the client's stage of treatment, motivation for change, and strengths; and

(2) the symptoms and behaviors related to both disorders.

Subp. 6. **Post-assessment determination about program suitability.** When the client is confirmed through the assessment process to have co-occurring disorders, the certificate holder must review the assessment results and conclusions and document whether the integrated treatment program is appropriate to meet the client's needs. If not, the certificate holder must refer the client to an appropriate program or provider for treatment.

Subp. 7. **Integrated assessment updates.** For adult clients, the integrated assessment must be updated annually. Notwithstanding this requirement, the integrated assessment must be promptly updated if the multidisciplinary treatment team determines that the client's co-occurring condition has significantly changed. The integrated assessment update must:

A. update the most recent integrated assessment information referred to in subparts 1, 4, and 5 based on an interview with the client;

B. include a written update of those areas where significant new or changed information exists; and

C. document those areas where there has been no significant change.

Statutory Authority: *MS s 245.4863* **History:** *38 SR 523* **Published Electronically:** *January 3, 2018*