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SUBSTANCE USE DISORDER - PEARLS

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PROVIDER GUIDE TO DIAGNOSE SUBSTANCE USE DISORDER (SUD)

PURPOSE

To outline clinical concepts when diagnosing substance use disorder.

DEFINITION

Substance abuse and dependence are complex conditions that have serious social and physical ramifications for the person affected, their family, and their caregivers. Older adults often suffer in silence and do not get diagnosed or receive treatment they need.



POLICY/PROCEDURE/ACTION

AS WITH MAJOR DEPRESSIVE DISORDER, IT IS RECOMMENDED THAT YOU SCREEN ALL YOUR OLDER PATIENTS FOR PAST OR PRESENT DRUG AND ALCOHOL USE, ABUSE, OR DEPENDENCE.

DSM-5 CHANGED THE WAY WE DIAGNOSE SUBSTANCE USE DISORDERS. WE NO LONGER HAVE TWO DISTINCT DIAGNOSES (ABUSE OR DEPENDENCE) AS WE DID WITH DSM-4. THERE IS NOW ONE SUBSTANCE USE DISORDER (SUD), WHICH IS THEN CLASSIFIED, AS MILD, MODERATE OR SEVERE.

- MILD SUD IS CLASSIFIED TO SUBSTANCE ABUSE
- MODERATE OR SEVERE SUD IS CLASSIFIED TO DEPENDENCE

DOCUMENTATION TIPS

-  **SUD is categorized by type of substance, severity of the problem, associated complications. Documentation should clearly indicate these specifics to report the most accurate current status of the condition.**
-  **If a person has met criteria for substance abuse or dependence in the past but are currently not using that substance, then diagnose “in remission”.**
-  **Document any associated physical, mental or behavioral disorders that result from the substance use.**
-  **If the patient is no longer using the substance “in remission” should be reported. When not in remission it is important the documentation aligns with the criteria met per the DSM-5 when completed during the encounter.**
-  **Document a status and plan of care even when the condition is in remission. Remission is considered an active diagnosis, not historical.**

NOTE: THESE GUIDELINES ATTEMPT TO DEFINE PRACTICES THAT MEET THE NEEDS OF MOST MEMBERS IN MOST CIRCUMSTANCES. THE ULTIMATE JUDGMENT REGARDING THE CARE OF AN INDIVIDUAL MEMBER MUST BE MADE BY THE PROVIDER AND MEMBER IN LIGHT OF ALL CIRCUMSTANCES PRESENTED BY THE MEMBER

Substance Use Disorder (SUD) Diagnostic Criteria	Meets Criteria? Yes OR No
A problematic pattern of use leading to clinically significant impairment or distress as manifested by two of more of the following criteria within a 12-month period.	
1. Substance is often taken in larger amounts or over a longer period of time than intended.	
2. There is a persistent desire or unsuccessful efforts to cut down or control substance use.	
3. A great deal of time is spent on activities necessary to obtain the substance, use the substance, or recover from its effects.	
4. Craving or a strong desire to use substances.	
5. Recurrent substance use resulting in failure to fulfill major role obligations at work, school or home.	
6. Continued substance use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of substance.	
7. Important social, occupational or recreational activities are given up or reduced because of substance use.	
8. Recurrent substance use in situations in which it is physically hazardous.	
9. Continued use despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by substance.	
10. Tolerance, as defined by either of the following: a) A need for markedly increased amounts of substance to achieve intoxication or desired effect. b) Markedly diminished effect with continued use of the same amount of a substance.	
11. Withdrawal, as manifested by either of the following: a) The characteristic substance withdrawal syndrome. b) The same (or a closely related) substance are taken to relieve or avoid withdrawal symptoms.	

SEVERITY OF SUD	
Mild - Two to three criteria	ABUSE
Moderate - Four to five criteria	DEPENDENCE
Severe - Six or more criteria	DEPENDENCE