

Changing treatment intensity is a planning decision, not a pass-or-fail test. You might be considering a move from partial hospitalization (PHP) to intensive outpatient (IOP), from IOP to regular outpatient therapy, or to a higher level of support. The right choice depends on your current needs, safety, schedule, support system, and what you can realistically keep attending.

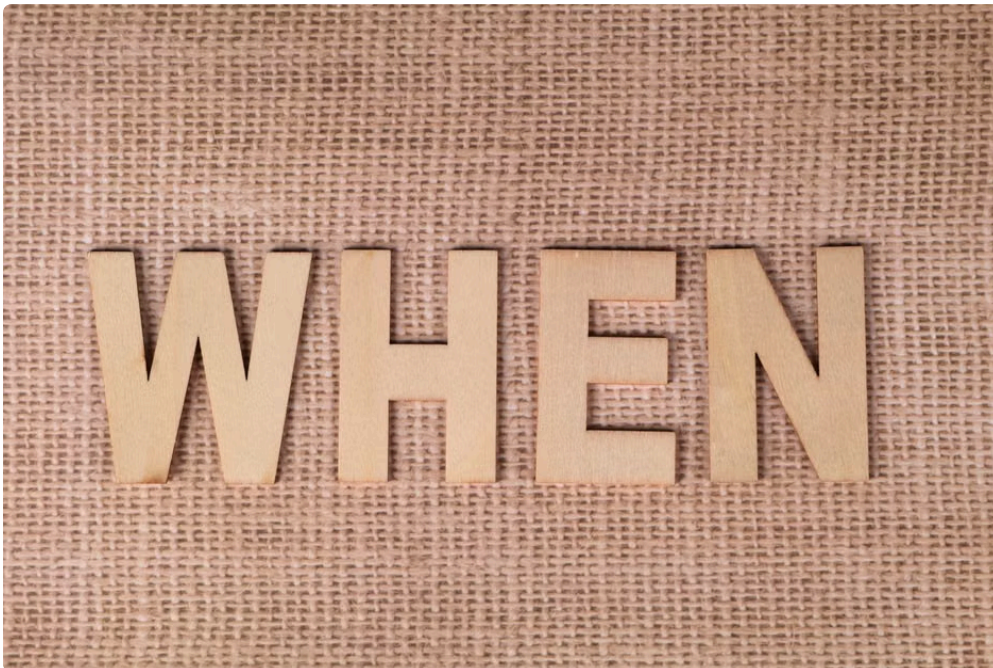
A useful **treatment reassessment** should result in more than “you’re ready” or “you need more care.” It should explain why a change is being considered, what support will continue, and how the plan fits around work, family, sleep, meals, and other appointments. That is the heart of **continuity planning**: making sure the next step is connected to the care you are receiving now.

Use the questions below to prepare for a conversation with your treatment team. You do not need to ask them all at once. Choose the ones that match your situation and bring a trusted support person, if you want help taking notes.

First, clarify what “switching levels of care” means

Treatment programs use different schedules and names. In general, PHP offers more hours of structured treatment than IOP, and IOP typically offers more frequent sessions than regular outpatient care. Exact schedules and services vary by program, so ask what a level means at that specific center rather than relying only on the label.

A switch can mean stepping down to fewer treatment hours, stepping up for additional support, or changing to a different type of service. It may also include a temporary bridge between programs, such as individual therapy while you wait for an IOP opening. Ask the center to describe the proposed change in practical terms: days, hours, services, transportation, and start date.



Questions to ask during a treatment reassessment

1. Why are you recommending a change now?

- What changes in my needs, progress, or circumstances led to this recommendation?

- What information are you using to make the decision?
- What would suggest that I need more support, less support, or a different kind of care?
- Can you explain the recommendation in everyday language?

A sound reassessment should be a conversation. You can share what feels manageable and what does not. For example, you may be meeting treatment goals but still struggling to sleep consistently, attend appointments, or manage a return to work. Those details can help the team shape a realistic plan; they do not automatically determine one particular level of care.

2. What will change in my weekly schedule?

- How many treatment days and hours will I attend?
- Which services will continue, and which will end?
- Will I have individual sessions, group sessions, medication appointments, or case-management support?
- What is the expected start date, and is there a gap between programs?
- What should I do if the new schedule is not working after I begin?

Ask for a written schedule if possible. A clear calendar can make the transition easier to picture and help you coordinate transportation, family care, work shifts, and other responsibilities. Structure is helpful when it supports recovery; it becomes hard to sustain when every hour is overbooked.

3. What is the plan if symptoms or risks increase?

- Who should I contact if I feel less stable between appointments?
- What changes would mean I should request another assessment?
- How do I reach the treatment team after hours?
- What should I do in an urgent or emergency situation?
- Can we write down a step-by-step plan together?

The answer should be specific enough to use when you are stressed. Confirm the right phone number, when to call, and what to do if you cannot reach your usual clinician. If you may be in immediate danger, contact local emergency services or go to an emergency department.

Ask how the center will protect continuity

Continuity planning is about keeping important parts of care connected while the schedule or program changes. A handoff should not depend on you remembering every detail or starting from scratch with each new provider.

- Will someone coordinate the transition with the next clinician or program?
- What information will be shared, and how will you ask questions about consent and privacy?
- Will I have a medication follow-up or therapy appointment already scheduled?
- Who will help with referrals, insurance questions, or a waitlist?
- If the next service is unavailable right away, what support can bridge the gap?

Ask for the name of a contact person and the date of your next appointment. If you are moving to a different provider, ask what records or summaries are needed and how to request them. You can also ask the treatment team to help you make a short transition checklist.

Topic Question to ask What to write down Schedule What will my treatment week look like? Days, hours, location, and start date Handoff Who is coordinating care between programs? Contact name and phone number Appointments What is my next confirmed appointment? Date, time, provider, and transportation plan Changing needs What should I do if the plan stops feeling manageable? Who to call and what steps to take

Match treatment intensity to real life

The best plan is not necessarily the one with the most hours or the fewest. It is a plan that responds to your needs and that you can attend consistently. Be candid with the team about practical barriers: transportation, caregiving, work hours, housing, cost, or limited privacy at home. You do not have to solve every barrier alone; ask what accommodations or referrals may be available.

Check the healthy basics without turning them into a test

Sleep, regular meals, and appointments can affect how manageable a week feels. They are useful planning information, not a scorecard. Ask:

- How should we factor in my sleep schedule when choosing appointment times?
- Are there meal breaks during longer treatment days?
- Can appointments be grouped or scheduled around other health needs?
- What support is available if fatigue, appetite, or transportation makes attendance difficult?

Think in terms of a workable routine, not a perfect one. A <https://www.windstream.net/finance/category/press/article/businessnewswire-2026-10-1-returning-to-everyday-life-during-addiction-recovery> plan that leaves time to eat, rest, travel, and handle basic responsibilities may be more sustainable than a packed schedule that looks ideal on paper.



Ask about returning to work step-by-step

Work can be part of a stable routine, but returning all at once may not suit everyone. If employment is part of your plan, ask the treatment team how to coordinate work hours with treatment appointments and recovery needs. You can discuss scheduling and support without sharing private medical details with an employer. For

workplace disclosure, leave, or accommodation questions, consider asking an appropriate HR contact, benefits representative, union representative, or legal adviser what information is required.

- Can my treatment appointments be scheduled around my work hours?
- Would a gradual increase in shifts or hours be worth discussing with my care team?
- What should I do if a work schedule conflicts with a required appointment?
- Can the center provide general attendance documentation if I request it, without including unnecessary treatment details?

The CDC's workplace-supported recovery resource offers information about recovery-supportive approaches at work. It can help frame a conversation about practical supports, but your treatment center should address your individual care plan.

Discuss cost and coverage clearly

Before a transition, ask your program and insurer how the new service is billed and whether authorization is needed. Confirm what you may owe, how long approval may take, and whom to contact if coverage is denied or delayed. Ask the center whether a financial counselor or case manager can help explain the process.

For clarity, a market-style figure such as **TD 167.57 (-0.15%, -0.26) with \$1.34B volume** is not a treatment price, insurance quote, or estimate of what a person will pay. When comparing care costs, rely on written, program-specific estimates and your insurance benefits rather than unrelated market figures.

Questions to bring to the appointment

If you have limited time with the team, start with these five:

1. What is the reason for changing my level of care now?
2. What will my weekly schedule and services look like?
3. Who is coordinating the handoff, and when is my next appointment?
4. What is the plan if I need more support or the schedule is not working?
5. How can we make this fit with work, sleep, meals, transportation, and family responsibilities?

Write down the answers in plain language. If something is unclear, try: "Can you give me an example of what that would look like next week?" Specific examples are often easier to act on than general advice.

A simple weekly plan for the transition

Use this as a starting point and adjust it with your treatment team. The goal is structure without overload.

- **Before the switch:** Confirm the new schedule, start date, costs or authorization steps, transportation, and contact person.
- **During the first week:** Attend the planned appointments, keep meals and rest in view, and note any schedule barriers or questions.
- **At the end of the first week:** Check in with your provider about what is manageable and what needs adjusting.
- **For work or caregiving:** Make one practical scheduling change at a time, where possible, rather than changing every responsibility in the same week.

It may also help to keep a simple calendar with treatment, other appointments, work commitments, and protected time for meals and rest. If the plan looks crowded before the week begins, tell your team. That is useful feedback for treatment reassessment, not a reason for shame.

Where to find more information

For questions about a specific program, contact the center directly and ask about its services, schedule, admissions process, and transition support. Marietta Spring Treatment Center's website is one place to review program information and contact the organization with questions. Program availability and fit depend on individual circumstances, so confirm details with the provider rather than assuming a website describes your exact plan.

Switching levels of care works best as a shared, practical decision. Ask for the reasons, the schedule, the handoff, and the plan for changing needs. With those details in writing, you can focus on the next manageable week instead of trying to solve everything at once.