



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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MEMORANDUM

October 27, 2009

TO: Regional Advisory Committees, Stakeholders and Network Providers
FROM: Bethany Gadzinski, Chief

RE: IDAPA 16.07.20

This memo is to let you know you can find the copy of IDAPA 16.07.20 – Alcohol and Substance Use Disorders Treatment and Recovery Support Services Facilities and Programs – that will be sent to the members of the Idaho Board of Health and Welfare at the following website:

<http://www.healthandwelfare.idaho.gov/Medical/SubstanceUseDisorders/tabid/105/Default.aspx>

In addition to the rule itself, there is an FAQ posted to the same SUD website. We have also created a crosswalk of specific areas where there are changes with 16.06.03 vs. 06.07.20

This rule re-write has been a very long process and I appreciate all of the comments and suggestions made by the RACS, Stakeholders and the providers in the meetings we held in the past 18 months. It does not seem possible, but I count over 20 meetings that providers have taken their own time to attend. We have come a long way from the initial draft of the rule and I wish to thank each of you for helping us move to what I think is a strong rule for clients, providers and the citizens of Idaho.

My hope is that after you read the rule you will be comfortable in writing a letter of support for the adoption of the rule and/or giving testimony at the Board of Health and Welfare meeting on November 19, 2009 and at the Health and Welfare Committee meetings during the FY11 legislative session. If you have any questions or additional comments, please do not hesitate to contact me at 334-5756 or gadzinsb@dhw.idaho.gov

16.06.03 vs. 16.07.20
Substance Use Disorder Treatment Facility Approval
Rule Crosswalk
10/27/2009

Item	16.06.03	16.07.20
<i>Criminal History Background Check</i>	Only needed for clinicians working with adolescents	All clinicians need a background check
<i>Application for Approval</i>	Required all documents prior to review for program approval.	Allows for the lease and insurance to be provided later in the approval process.
<i>Approval for a program with multiple facilities</i>	Does not allow for one approval for programs with multiple or "satellite" facilities. Each facility and program must be separately approved with supervisory staff at each location.	Allows for long distance supervision with a minimum of one onsite supervision session each month.
<i>Services for co-occurring disorders</i>	No mention of co-occurring disorders treatment	All providers must be co-occurring capable
<i>Fee's</i>	No fee to apply for facility approval	\$100 fee for treatment providers and \$50 for RSS providers. This equals 5% of the cost to conduct the facility approval.
<i>Capacity Review for new providers and expansion of current providers</i>	No mandate to provide information from potential providers around capacity and need in the community they will be providing services.	The potential provider must address the capacity need in the community they will be providing services in and identify their programs relationship to other programs and services available in the community.
<i>Certificate of Approval</i>	6 month provisional certification with a review after 6 months and if no issues with compliance, a 24 month certificate is granted	6 month provisional certification and depending on level of compliance, a 12 or 24 month certificate is granted.
<i>Personnel Policies and Procedures</i>	Requires CPR and 1 st Aid for employees working in detox setting only.	CPR training and basic first aid training required within 1 st 90 days of employment. Additionally, a staff member with this training must be on duty at all times.
<i>Supervision Staff</i>	Identifies that a provider must have a program administrator, treatment supervisor and clinical director. In addition the BPA contract mandates a clinical supervisor be hired or contracted with. (4 total) Does not allow offsite supervision	Identifies that a provider must have a treatment supervisor and a clinical supervisor. Broadens the education and experience that can be used to qualify for these 2 positions. (2 total) Allows for offsite supervision
<i>Qualified Professional</i>	A member of one (1) of the following professional disciplines,	All clinicians must hold a licensure or certification.

	<ul style="list-style-type: none"> ▪ certified, credentialed or licensed alcohol and drug counselor, ▪ licensed professional counselor, ▪ licensed nurse, ▪ licensed physician, ▪ psychologist, ▪ counselor holding a master's degree in a related field from an approved college or university, ▪ licensed, licensed clinical or licensed masters social worker, ▪ a person holding a bachelor's degree in a related field, or ▪ a person holding an associate degree in chemical dependency counseling who has applied for the Certified Alcohol/Drug Counselor (CADC), pending successful completion of the next testing cycle. <p>▪ A qualified professional must have one thousand forty (1,040) hours of supervised experience providing substance abuse treatment.</p>	<p>If licensed, must also have</p> <ul style="list-style-type: none"> ▪ a State or Federal certification from IBADCC, or ▪ Certification from NACADC, or ▪ NW Indian Alcohol/Drug Specialist certification, or ▪ NBCC Master Addiction Counselor or ▪ 1,040 hours of supervised experience providing substance use disorder treatment in an alcohol and substance use disorders treatment services setting in a state, federal, joint commission or CARF approved program. <p>▪ Grandfathers in current clinicians who have been certified by the Department as a Qualified Professional under 16.06.03</p>
<i>Client Rights</i>	Does not distinguish between residential and outpatient Client Rights.	Designates which Client Rights are applicable to the treatment setting.
<i>Individualized Treatment Plan</i>	Timeline for completion of individualized treatment plan for outpatient setting is within (7) days of completion of the assessment process.	Timeline for completion of individualized treatment plan for outpatient setting is within (30) days of completion of the assessment process.
<i>Emergency Preparedness Plan</i>	Not addressed.	Emergency Preparedness Plan required to manage the consequences of natural disasters or other emergencies that could disrupt the program's ability to provide care.
<i>Notification of Death, Serious Incident, Accident, Fire, or Loss of Records or Other Client Identifying Information</i>	Not addressed.	Requires policies for Notification of Death, Serious Incident, Accident, Fire, or Loss of Records or Other Client Identifying Information
<i>Approved Facility and</i>	Identifies the following program services that can be approved by the	Identifies the following program services that can be approved by the

<i>Program Services</i>	Department for adolescents and adults: <ul style="list-style-type: none"> ▪ Social setting detoxification facility ▪ Inpatient facility ▪ Residential facility ▪ Outpatient facility ▪ Halfway House facility ▪ Drug Court Outpatient treatment facility 	Department for adolescents and adults: <ul style="list-style-type: none"> ▪ Assessment and referral services ▪ Residential Social Setting Detoxification Facility ▪ Clinically managed medium-intensity residential facility ▪ Clinically managed low-intensity residential treatment (half-way house) ▪ Level I-Outpatient ▪ Level-II.I Intensive Outpatient ▪ Opioid Treatment Program ▪ Drug Court Outpatient Treatment Program ▪ Clinical Case Management ▪ Intervention Services ▪ Recovery Support Services to include: <ul style="list-style-type: none"> ○ Basic and intensive case management ○ Adult staffed safe and sober housing ○ Child care ○ Life Skills ○ Transportation Services ○ Alcohol and drug testing
<i>Services For Women With Dependent Children</i>	Not addressed.	Added to new rule.
<i>Case Management Services</i>	Not addressed.	Added to new rule.
<i>Staff Ratio for Outpatient Services</i>	The ratio is (1) counselor to every (30) clients.	The ratio is (1) counselor to every (50) clients.
<i>Opioid Treatment Program</i>	Not addressed.	Added to new rule.