

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE

16.07.20 - ALCOHOL AND SUBSTANCE USE DISORDERS TREATMENT AND RECOVERY SUPPORT SERVICES FACILITIES AND PROGRAMS

DOCKET NO. 16-0720-0901 (NEW CHAPTER)

NOTICE OF RULEMAKING - PENDING FEE RULE

EFFECTIVE DATE: This rule has been adopted by the agency and is now pending review by the 2010 Idaho State Legislature for final approval. Pursuant to Section 67-5224(5)(c), Idaho Code, this pending rule will not become final and effective until it has been approved, amended, or modified by concurrent resolution of the legislature because of the fee being imposed or increased through this rulemaking. If the pending rule is approved, amended, or modified by concurrent resolution of the legislature, this agency requests that the effective date of May 1, 2010, be inserted into the language of the concurrent resolution rather than have the rule become effective upon adoption of the concurrent resolution.

AUTHORITY: In compliance with Section 67-5224, Idaho Code, notice is hereby given that this agency has adopted a pending rule. The action is authorized pursuant to Sections 39-305, 39-306, 39-307, 39-311, 56-1003, 56-1004, 56-1004A, 56-1007, and 56-1009, Idaho Code.

DESCRIPTIVE SUMMARY: The following is a concise explanatory statement of the reasons for adopting the pending rule and a statement of any change between the text of the proposed rule and the text of the pending rule with an explanation of the reasons for the change.

This chapter of rule was published as a proposed new chapter of rule that updated the approval process for substance use disorder facilities and programs. Based on comments received from providers, interested persons, and Department staff, during the comment period, the following substantive changes are being made to the proposed rule:

1. New definitions were added to clarify the rule.
2. Language was added stating that a private treatment facility may apply for approval on a voluntary basis.
3. The Commission on Accreditation of Rehabilitation Facilities (CARF) was added to the rule as acceptable for approval along with the Joint Commission.
4. Requirements for CPR and First Aid training were clarified.
5. Supervisory staff qualifications were modified as well as the qualifications for a Qualified Substance Use Disorders Professional and student/interns.
6. Clinical case management service requirements were added to the rule and "Basic and Intensive" case management services were modified.
7. Other smaller changes were made in the areas of "clients rights," "admission policies," "infection control," "criminal offenses," and "services for women."

The text of the pending rule has been amended in accordance with Section 67-5227, Idaho Code. Only those sections that have changes that differ from the proposed text are printed in this bulletin. The original text of the proposed rule was published in the September 2, 2009, Idaho Administrative Bulletin, Vol. 09-9, pages 219 through 296.

FEE SUMMARY: The following is a specific description of the fee or charge imposed or increased. This fee or

charge is being imposed pursuant to Section 56-1007, Idaho Code.

1. The criminal history and background check (CHC) requirement is being expanded to require a CHC for each program employee who provides services to adults. Currently, a program serving only adults is not required to have criminal background checks for its employees. This new requirement will better ensure the safety of adults being served in alcohol and drug treatment programs. The fee for a CHC is \$55.

2. A new fee is being added for the initial approval and the renewal of a program approved under this chapter of rules.

FISCAL IMPACT: The following is a specific description, if applicable, of any fiscal impact on the state general fund greater than ten thousand dollars (\$10,000) during the fiscal year.

1. The requirement for criminal history and background checks is being expanded to include employees working in provider programs serving adults. Currently, only treatment providers serving adolescents are required to pay for a Department criminal history and background check. The fees for the criminal history checks are covered under IDAPA 16.05.06, "Criminal History and Background Checks." While there is a fiscal impact to the Criminal History Unit - Indirect Services Budget, and the Provider Fee Substance Abuse Receipts (neither of which go to the general fund), there is no anticipated fiscal impact to the state general fund.

2. The Department is proposing a new fee for the initial approval as well as the renewal inspections of substance use disorder treatment programs. This fee will be \$100 per treatment facility, \$100 per facility for treatment and Recovery Support Services, and \$50 per Recovery Support Services only. It is estimated that \$11,600 in fees will be collected annually. This money will be used by the Division of Behavioral Health to offset the cost of contracting the inspection process with the "Application of Substance Abuse Technologies Quality Management and Certification Services (CASAT)" program. The services of CASAT have been retained in order to handle all aspects of the treatment programs approval process.

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning this pending rule, contact Sherry L. Johnson at (208) 334-5934.

DATED this _____ day of _____, 2009.

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THE FOLLOWING IS THE AMENDED TEXT FOR DOCKET NO. 16-0720-0901

Section 010 (entire Section)

010. DEFINITIONS - A THROUGH C.

For the purposes of these rules, the following terms are used. ()

01. Access. A client's ability to obtain alcohol or substance use disorder treatment or services that he is seeking. ()

02. Active Client. A client who receives services from an approved alcohol and substance use disorders treatment or recovery support services program, who has had face-to-face contact with a program's qualified substance use disorders professional within the immediately preceding thirty (30) calendar days. ()

03. Adolescent. An individual between the ages of fourteen (14) and eighteen (18). ()

04. Admission. The point in an individual's relationship with an organized treatment service when the intake process has been completed and the individual is entitled to receive the services of the treatment program. ()

045. Adult. An individual eighteen (18) years of age or older. ()

056. Adjunct Services. Those clinical and non-clinical services provided outside of an approved alcohol and substance use disorders treatment or recovery support services program that support client recovery. Adjunct services may include: Women, Infant and Children (WIC), welfare, mental health services, and medical services. ()

067. Advocacy. The act of pleading for, supporting, or recommending services, supports, treatment, or opportunities for a client. For example, a case manager advocates for the unmet needs of the client and encourages independence. Advocacy, as part of case management, can be done with or for a client. ()

078. Alcohol and Drug Testing. The collection and initial screening of urine, hair, or oral fluid samples for screening and detecting alcohol and substance use. ()

089. Applicant. A person, firm, partnership, association, corporation, agency, or organization which has filed an application with the Department to become an approved alcohol and substance use disorders treatment or recovery support services program under these rules. ()

0910. Appropriate. A term used to indicate that a particular procedure, treatment, test, or service is suitable or compatible in quantity, and provided in the best setting to meet the client's needs. ()

101. Approved Private Treatment Facility. An alcohol and substance use disorders treatment program or recovery support services program meeting the standards prescribed in Section 39-305(1), Idaho Code, and approved under the provisions of Section 39-305(3), Idaho Code, and these rules. The term "facility" is synonymous with the term "program." ()

142. Approved Public Treatment Facility. An alcohol and substance use disorders treatment program or recovery support services program operating under the Alcoholism and Intoxication Treatment Act (Title 39, Chapter 3, Idaho Code) through a contract with the Department and meeting the standards prescribed in Section 39-305(1), Idaho Code, and approved pursuant to Section 39-305(3), Idaho Code and these rules. The term "facility" is synonymous with the term "program." ()

123. ASAM PPC-2R. Refers to the manual containing the patient placement criteria for the treatment of substance-related disorders, published by the American Society of Addiction Medicine (ASAM) as incorporated by reference in Section 004 of these rules. ()

134. Assessment and Referral Services. A substance use disorders program provides these services in order to treat, provide services, or refer individuals. An assessment is designed to gather and analyze information regarding a client's current substance use disorder behavioral, social, medical, and treatment history. The purpose of the assessment is to provide sufficient information for problem identification and, if appropriate, substance abuse related treatment or referral. ()

145. Behavioral Health Services. Services offered by the Department to treat behavioral health issues or alcohol and substance use disorders. ()

156. Biopsychosocial Assessment. Those procedures by which a qualified substance use disorders

professional evaluates an individual's strengths, weaknesses, problems, needs, and determines priorities so that a treatment plan can be developed. ()

~~167.~~ **CARF.** The Commission on Accreditation of Rehabilitation Facilities. ()

~~178.~~ **Case Management.** The administration and evaluation of an array of services that may include assessment of client and client family needs, service planning, linkage to other services, client advocacy, monitoring service provision, and coordination of services. ()

~~189.~~ **Case Management Planning.** The planning process where the case manager and client, parent, guardian, spouse, or significant other, as applicable, define goals, strategies to achieve these goals, responsibilities for action, and time frames for action. It also includes community reintegration planning, and discharge planning to terminate case management services when case management is no longer required by the client, goals have been met, the client no longer wishes to participate in case management, or the client is no longer eligible for services. ()

~~20.~~ **Case Management Supervision.** *Case management supervision includes planning, directing, monitoring, and evaluating the work of a case manager by an individual who meets the qualifications of a case manager supervisor. A clinical supervisor of a treatment agency may fulfill this role and may incorporate case management supervision into clinical supervision activities.* ()

~~21.~~ **Case Management Supervisor.** *The program staff member responsible for oversight of all case management aspects of the case management services provided. A clinical supervisor of a treatment agency may also fulfill this role.* ()

~~1922.~~ **Certificate of Approval.** A certificate issued by the Department under Section 145 of these rules to an alcohol and substance use disorders treatment or recovery support services program which the Department deems to be in compliance with these rules. ()

~~23.~~ **Certified Home Inspection.** *An inspection of a residential dwelling conducted by a registered, licensed, or certified home inspector to determine the quality, safety, and overall condition of the dwelling.* ()

~~204.~~ **Child.** An individual under the age of fourteen (14). ()

~~215.~~ **Client.** A person receiving treatment for an alcohol or a substance use disorder or receiving recovery support services. The term "client" is synonymous with the terms "patient," "resident," "consumer," "participant," or "recipient of treatment." ()

~~226.~~ **Client Record.** All documentation of individual client treatment and related services. ()

~~237.~~ **Clinical Case Management.** Clinical case management is a service that integrates mental health and substance use disorders clinical expertise with case management skills to implement comprehensive interventions that address the overall maintenance of the client's physical and social environment. Clinical case management includes: engagement of the client, assessment, planning, treatment, linkage with resources, consultation with families, collaboration with psychiatrists, client education, and crisis intervention. ()

~~248.~~ **Clinical Supervisor.** The program staff member responsible for oversight of all clinical aspects of the treatment services provided. ()

~~259.~~ **Clinical Judgment.** Refers to observations and perceptions based upon education, experience, and clinical assessment. This may include psychometric, behavioral, and clinical interview assessments that are structured, integrated, and then used to reach decisions, individually or collectively, about an individual's functional, mental, and behavioral attributes and alcohol and substance use disorders service needs. ()

~~2630.~~ **Clinically Managed High-Intensity Residential Treatment.** A program that offers intensive residential treatment services, staffed twenty-four (24) hours per day, seven (7) days a week, which is designed to treat persons who have significant social and psychological problems. Individuals who are appropriate for this level of care typically have multiple deficits, which may include criminal activity, psychological problems, impaired

functioning, and disaffiliation from mainstream values. This level of care is also known as long-term residential care or a Therapeutic Community. ()

2731. Clinically Managed Low-Intensity Residential Treatment. A program that offers at least five (5) hours per week of outpatient or intensive outpatient treatment services along with a structured residential recovery environment, staffed twenty-four (24) hours per day, seven (7) days a week, which provides sufficient stability to prevent or minimize relapse or continued use. This level of care is also known as a Halfway House. ()

2832. Clinically Managed Medium-Intensity Residential Treatment. A program that offers structured residential treatment services, staffed twenty-four (24) hours per day, seven (7) days a week, which provides intensive residential program for clients who require treatment services in a highly-structured setting. This type of program is appropriate for clients who need concentrated, therapeutic services prior to community residence. Community reintegration of residents in this level of care requires case management activities directed toward networking clients into community-based recovery support services such as housing, vocational services, or transportation assistance so that the client is able to attend mutual self-help meetings or vocational activities after discharge. This level of care is also known as residential care. ()

2933. Clinical Supervision. Clinical supervision includes planning, directing, monitoring, and evaluating the clinical work of another staff person by a Department-qualified clinical supervisor. ()

304. College of Professional Psychology. Professional certification entity of the American Psychological Association Practice Organization. ()

315. Competencies. Competencies are the knowledge, skills, and attitudes required for the members of the alcohol and substance use disorders clinical staff as a prerequisite to proficiency in the professional treatment of alcohol and substance use disorders. The model of competencies is determined by the Department. ()

326. Compliance. Demonstration that these rules, policies and procedures, and applicable federal and state statutes and regulations are observed. Compliance is determined by the Department. ()

337. Comprehensive Case Management Service Plan. A written comprehensive service plan based on a current assessment as described in Section 370 of these rules, that addresses the medical, psychosocial, legal, educational, and financial needs of the client. The comprehensive service plan provides for the coordination of services across multiple need dimensions. ()

348. Continuing Care. Care that supports a client's progress, monitors his condition, and can respond to a return to substance use or a return of symptoms of mental disorder. It is both a process of post-treatment monitoring and a form of treatment itself. ()

359. Contract. A formal agreement with any organization, agency, or individual specifying the services, personnel, products or space to be provided by, to, or on behalf of the program and the consideration to be expended in exchange. ()

40. Contractor. *One who contracts to do work, provide supplies, or deliver services for another. ()*

3641. Contracted Intermediary. A third party contractor of the Department who handles direct contracting with network providers for alcohol and substance use disorders treatment and recovery support services. Direct services may include network management, claims payment, data gathering per federal and state requirements, and census management. ()

3742. Co-Occurring Disorders Capable (COD-C). Of or pertaining to programs that address co-occurring mental health and substance-related disorders in their policies and procedures, assessment, treatment planning, program content, and discharge planning. The term "co-occurring disorders capable (COD-C) program" is synonymous with the term "dual diagnosis capable (DDC) program." ()

3843. Co-Occurring Disorders (COD). The co-occurring diagnoses of mental health and substance use disorders. ()

~~394~~. **Criminogenic Need.** A client attribute shown by research to be correlated with criminal behavior and to be an appropriate target for treatment intervention. ()

Section 011 (entire Section)

011. DEFINITIONS - D THROUGH H.

For the purposes of these rules, the following terms are used. ()

01. Department. The Idaho Department of Health and Welfare. ()

02. Detoxification Services. Services necessary to monitor individuals who are undergoing the systematic reduction of a toxic agent from the body during withdrawal. ()

~~03.~~ **Direct Client Access.** Direct client access means an employee, contractor, or volunteer who has direct contact with a client. ()

~~034.~~ **Director.** The Director of the Department of Health and Welfare or his designee. ()

045. Discharge. The point at which the client's active involvement in treatment or recovery support services is terminated and the program no longer maintains active responsibility for the care of the client. ()

~~056.~~ **Discharge Plan.** The plan developed jointly by the qualified substance use disorders professional and the client that provides the client with the resources needed to support his recovery. ()

067. Discharge Summary. A document written by the client's provider upon discharge from treatment and contains a summary of the following: ()

a. Assessment of client problems at admission; ()

b. Expected treatment outcomes; ()

c. Treatment plans and strategies; ()

d. Client status at discharge; ()

e. Treatment progress; ()

f. Summaries of continuing care plans; and ()

g. Referrals for further treatment. ()

~~078.~~ **Drug Court Outpatient Treatment Program.** A Department-approved program for the treatment of alcohol and substance use disorders for individuals under the jurisdiction of a local drug court. ()

~~089.~~ **Drug Court Team.** Individuals who collectively plan and evaluate services for drug court participants and determine participant compliance, progress, sanctions, movement from one (1) treatment phase to another, and continuation or termination of drug court treatment. ()

~~0910.~~ **Early Intervention Services.** Services that are designed to explore and address problems that appear to be related to substance use. ()

~~101.~~ **Education.** Strategies that teach people critical information about alcohol and other drugs and the physical, emotional, and social consequences of their use. ()

~~112.~~ **Executive Director.** The individual who is responsible for the overall management of the program

or facility. The executive director is appointed by the governing body to act on its behalf. The term “executive director” is synonymous with the terms “administrator,” “director,” “superintendent,” “president,” “vice-president,” and “executive vice-president.” ()

123. Facility/location. The individual building or buildings, including furnishings and fixtures, or locations where persons with alcohol or substance use disorders receive services. The term “facility” is synonymous with office, clinic, or physical plant. ()

134. Governing Body. The individual or individuals, board of directors, group, or agency that has ultimate authority and responsibility for the overall operation of an alcohol and substance use disorders treatment or recovery support services facility or program and for full compliance with these rules and minimum standards. ()

145. Group Counseling. The application of formal counseling techniques involving interaction among members of a group of clients. ()

156. Guardian. ()

a. Under Title 15, Chapter 5, Part 2, Idaho Code, an individual who has been appointed by a court of law to have and exercise the powers and responsibilities of a parent who has not been deprived of custody of his minor and unemancipated child; ()

b. Under Title 66, Chapter 3 and 4, Idaho Code, an individual who has been appointed by a court of law to have and exercise the powers and responsibilities of a guardian for a person who is mentally ill or with a developmental disability; or ()

c. Under Title 15, Chapter 5, Part 3, Idaho Code, an individual who has been appointed by a court of law to assist any incapacitated person to the extent that he lacks sufficient understanding or capacity to make or communicate responsible decisions concerning his person. ()

Subsection 013.15

013. DEFINITIONS - Q THROUGH Z.
For the purposes of these rules, the following terms are used. ()

15. Trainee. An individual who is acquiring the required one thousand forty (1,040) hours of clinical supervised experience in accordance with Section 223 of these rules, ~~and has a current certification or is licensed in Idaho as a:~~ ()

~~a. Nurse practitioner;~~ ()

~~b. Clinical nurse specialist;~~ ()

~~c. Nurse practitioner;~~ ()

~~d. Physician;~~ ()

~~e. Physician assistant; or~~ ()

~~f. Registered nurse.~~ ()

Section 100 (entire section)

100. CERTIFICATE OF APPROVAL REQUIRED.

01. Certificate of Approval for Public Treatment Facilities. Under Sections 39-302(4), and 39-

305(1), Idaho Code, a certificate of approval is required for each facility/location of a program in order to operate, establish, manage, conduct, or maintain, directly or indirectly, an approved public treatment facility. ()

02. Certificate of Approval for Private Treatment Facilities Voluntarily Approved. Under Sections 39-302(3) and 39-305(1), Idaho Code, a certificate of approval is required for each facility/location of a program in order to operate, establish, manage, conduct, or maintain, directly or indirectly, an approved private treatment facility voluntarily approved. ()

023. List of Approved Facilities. The Department will maintain a list of approved public and private treatment facilities in accordance with Section 39-305(3), Idaho Code. The issuance of a certificate of approval does not guarantee adequacy of individual care, treatment, personal safety, fire safety, or the well-being of any client employee, contractor, or volunteer or occupant of a facility. ()

034. Referral and Reimbursement. In order to receive referrals from the Department or any law enforcement officer, or receive any kind of state or federal reimbursement from the Department, a facility must be on the Department's list of approved treatment facilities and also be an approved contractor in good standing with the Department's MSC. ()

045. Injunction. Notwithstanding the existence or pursuit of any other remedy, in accordance with Section 39-305(6), Idaho Code, the Department may in the manner provided by law maintain an action in the name of the State for injunctive relief or other process against any person or entity in violation of these rules or the Alcoholism and Intoxication Treatment Act (Title 39, Chapter 3, Idaho Code). ()

Subsection 101.02

101. APPROVAL FOR A PROGRAM WITH MULTIPLE FACILITIES.

An alcohol and substance use disorders treatment or recovery support services program may have more than one (1) facility or location. Each facility/location of the program must comply with all of the requirements and minimum standards in these rules in order to operate, establish, manage, conduct, or maintain, directly or indirectly, an approved public or private treatment facility. ()

02. Certificate of Approval for Each Location. Each facility/location of the program must receive a certificate of approval issued by the Department in order for it to operate, establish, manage, conduct, or maintain, directly or indirectly, an approved public or private treatment facility. ()

Section 102 (entire section)

102. OUT-OF-STATE PROGRAMS AND FACILITIES UTILIZED BY IDAHO RESIDENTS.

The Department may, in its discretion, accept the approval and certification by the state in which a treatment program and facility is located, if the out-of-state program and facilities are utilized by clients who are residents of the state of Idaho. A program or facility licensed or certified by another state that is located, maintained, or operated within the state of Idaho, irrespective of the program headquarters, must comply with these rules and minimum standards and receive a certificate of approval issued by the Department in order to operate, establish, manage, conduct, or maintain, directly or indirectly, an approved public or private treatment facility in the state of Idaho. ()

Section 130. (entire section)

130. INITIAL APPLICATION FOR APPROVAL OF AN ALCOHOL AND SUBSTANCE USE DISORDERS TREATMENT OR RECOVERY SUPPORT SERVICES PROGRAM.

Application for approval of a program must be made to the Department at least ninety (90) days prior to the planned opening date. The application for approval must include the following: ()

01. Initial Application for Approval. Initial application for approval forms are available upon written request or online at the Department of Health and Welfare website identified in Section 005 of these rules. The applicant must provide the following items with the application for approval: ()

- a. A completed and signed Department application form. ()
- b. A non-refundable application fee for each facility being applied for as follows: ()
 - i. Treatment facility - one hundred dollars (\$100); ()
 - ii. Treatment and Recovery Support Services facility - one hundred dollars (\$100); and ()
 - iii. Recovery Support Services facility only - fifty dollars (\$50). ()
- c. A written statement that discloses the following with respect to the applicant, owner, or person proposed as executive director: ()
 - i. Any revocation of a license, certification, or approval that is held or previously held in Idaho or any other state or jurisdiction; or ()
 - ii. Other disciplinary action taken, or in the process of being taken in Idaho or any other state or jurisdiction. This includes on-going fraud, waste, and abuse investigations. ()
- d. A written statement that discloses any issues involving the Internal Revenue Service or Idaho State Tax Commission for the past five (5) years. ()
- e. A copy of the "Certificate of Assumed Business Name" from the Idaho Secretary of State. ()
- f. A detailed floor plan of the facility, including measurements of all rooms, or a copy of architectural drawings. ()
- g. Disclosure of ownership as required in Section 160 of these rules. ()
- h. Copies of current and valid certificates, permits, or licenses as appropriate which may include: ()
 - i. Certificate of occupancy from the local building authority utilizing the latest edition of the Uniform Building Code according to Section 39-4109, Idaho Code, with a determination of either a Group R-1, Congregate Residence of more than ten (10) persons or a Group R-3, Congregate Residence of ten (10) persons or less for each facility site. ()
 - ii. Certificate of fire inspection in accordance with the Uniform Fire Code as adopted by the state fire marshal, with authority delegated to the local fire chief. If an inspection cannot be provided by the local fire department, it is the responsibility of the program to arrange for and, if necessary, to pay for the inspection. ()
 - iii. Food service permit from the district health department, if food is prepared and served at the facility. ()
 - iv. Joint Commission *or CARE* certificate, if accredited. (←)()
- i. Documentation that the menus have been reviewed and approved by a registered dietician within the preceding twelve (12) months if food is prepared and served at the facility. ()
- j. The written plan for an inventory of treatments as defined in Section 012 of these rules. This plan must include at a minimum: ()
 - i. A statement establishing the geographic area for which the applicant intends to provide services, the proposed location of all offices and facilities; ()
 - ii. A full and complete description of all services the applicant proposes to provide; ()

- iii. Specific goals and objectives, ()
- iv. Data and other information demonstrating the need for the services in the area intended to be served, description of unmet needs, and a discussion of why those needs are not being met currently; ()
- v. The program's relationship to other alcohol and substance use disorders services and related programs in the service area and how the applicant will collaborate with them to achieve a comprehensive system of care in the service area; ()
- vi. The program's plans to secure additional funding; ()
- vii. A description of the fiscal and information management systems the applicant plans to use; and ()
- viii. The applicant's plan for measuring and reporting outcomes and results. ()
- ~~k. A copy of the lease, if the real property in which the program is located is leased. ()~~
- ~~l. Satisfactory evidence that the owner, applicant, person proposed as executive director and all employees, transfers, reinstated former employees, student interns, contractors, volunteers, and any other persons hired or contracted with after May 1, 2010, who provide care or services or have access to clients have successfully passed a criminal history background check that complies with Section 009 of these rules. ()~~
- ~~m. A written statement that the applicant, owner, or person proposed as executive director have thoroughly read and reviewed the Alcoholism and Intoxication Treatment Act and these rules and are prepared to comply with all of their respective provisions. ()~~
- ~~n. Other information that may be requested by the Department for the proper administration and enforcement of these rules. ()~~

02. Proof of Insurance. The minimum insurance required for all programs is professional liability, commercial general liability, and comprehensive liability for all program vehicles. All facilities must maintain professional liability insurance in the amount of at least five-hundred thousand dollars to one million dollars (\$500,000/\$1,000,000) and general liability and automobile insurance in the amount of at least one million dollars to 3 million dollars (\$1,000,000/\$3,000,000). Copies of the declarations face-sheet for all policies must be included with the application provided to the Department prior to final approval and before any clients are admitted for services. ()

03. Electronic Version of Agency Operating Policies and Procedures. A complete electronic version of the program's operating policies and procedures based on these rules must be provided with the application. ()

04. Identification of the Executive Director, Clinical Supervisor, and Treatment Supervisor. In addition to documentation that demonstrates compliance with Sections 215, 216, 217, and 218 of these rules, the applicant must provide to the Department prior to final approval the following information for the staff identified as Executive Director, Clinical Supervisor, and Treatment Supervisor: ()

- a. Current resume that includes a detailed work history with start and end dates, job descriptions, and contact information for references. ()
- b. Copies of applicable licenses and certifications. ()

05. Copy of the Lease. A copy of the lease must be provided prior to final approval, if the real property in which the program is located is leased. ()

Section 138

138. JOINT COMMISSION OR CARF ACCREDITATION.

The Department may approve programs or renew a program's certificate of approval based upon Joint Commission or CARF accreditation under the following conditions: ()

Subsection 140.03

140. REVIEW OF APPLICATION AND INSPECTION PROCESS.

03. **Responsibility of the Department.** Within sixty (60) days of the date of the inspection, the Department must submit a written report of findings to the applicant. Upon completion of the application and inspection process, the Department may take any of the following actions: ()

~~a. Issue a certificate of approval for a period of two (2) years if a facility is in compliance with the pertinent score in each category and overall weighted score for that length of time as set forth in Subsection 145 of these rules and minimum standards;~~ ()

~~b. Issue a certificate of approval for a period of one (1) year if a facility is in compliance with the pertinent score in each category and overall weighted score for that length of time as set forth in Subsection 145 of these rules and minimum standards;~~ ()

~~eb. Issue a provisional certificate of approval for a period of six (6) months contingent on an approved plan to correct all deficiencies prior to the expiration of the provisional certificate if a facility is in compliance with the pertinent score in each category and overall weighted score for that length of time as set forth in Subsection 145 of these rules and minimum standards. A facility will not be issued more than one (1) provisional certificate of approval in any two (2) year period; or~~ ()

~~dc. Deny a certificate of approval or renewal.~~ ()

Section 150.01 and 150.03

150. DENIAL, SUSPENSION, AND REVOCATION OF CERTIFICATE OF APPROVAL.

01. **Denial of a Certificate of Approval or Renewal.** The Department will deny a certificate of approval or renewal when a program or facility receives a score of sixty-four percent (64%) or below in any category, or an overall weighted score of sixty-four percent (64%) or below, or both. Additional causes for denial of a certificate of approval or renewal include any of the following: ()

a. The applicant, owner, or person proposed as executive director: ()

i. Has violated any conditions of a certificate of approval; ()

ii. Has willfully misrepresented or omitted material information on the application or other documents pertaining to obtaining or renewing any certificate of approval; ()

iii. Has been found guilty of fraud, gross negligence, abuse assault, battery, or exploitation of children or vulnerable adults. ()

iv. Has been denied or has had revoked any license or certificate issued by the Department or under Title 54, Idaho Code; ()

v. Has been convicted of operating any facility without a license; ()

vii. Has been enjoined from operating any facility; ()

vii. Has been convicted of a ~~criminal offense~~ felony or misdemeanor drug or alcohol offense within the past five (5) years, other than a minor traffic violation or infraction; or ()

viii. Is directly under the control or influence of any person who is described in Subsections 150.01.a.i. through 150.01.a.vii. of these rules; or ()

b. Any act or omission adversely affecting the welfare of any client, employee, contractor, or volunteer is being permitted, aided, performed, or abetted by the facility, applicant, owner, executive director. Such acts or omissions may include: neglect, physical abuse, mental abuse, emotional abuse, violation of civil rights, or exploitation of children or vulnerable adults. ()

03. Revocation, Suspension, or Terminate/Limit on Admissions with Written Notice. The Department will suspend, or revoke a certificate of approval, or terminate or limit admissions, by giving fifteen (15) days' written notice prior to the effective date, to any alcohol and substance use disorders treatment and recovery support services program or facility when persuaded by a preponderance of the evidence that: ()

a. One (1) or more of a program facilities are not in compliance with applicable provisions of the Idaho Code, or these rules and minimum standards. ()

b. The owner, applicant, or the person proposed as the Executive Director as defined in Section 011 of these rules: ()

i. Without good cause, fails to furnish any data, statistics, records or information requested by the Department, or files fraudulent returns thereof; ()

ii. Has been found guilty of ~~or is under investigation for~~ fraud, deceit, misrepresentation, or dishonesty associated with the operation of a program, regardless of the population the program serves or the services the agency provides; ()

iii. Has been found guilty of ~~or is under investigation for~~ the commission of any felony; ()

iv. Has failed to exercise fiscal accountability toward a client or the Department regarding payment for services, regardless of the population the program serves or the services the agency provides; ()

v. Has knowingly permitted, aided, or abetted the commission of any illegal act on the premises of an alcohol and substance use disorders treatment or recovery support services program; ()

vi. Has been found guilty of ~~or is under investigation for~~ federal or state tax violations; or ()

vii. Has willfully misrepresented or omitted information on the application or other documents pertinent to obtaining a program approval. ()

c. The program changed location from the building identified in the application. Any change in location from the building requires the program to notify the Department and submit required documentation, ninety (90) days prior to the move, so the Department can inspect the new facility. Failure to do so renders the certificate of approval null and void, and the Department will suspend it, pending submission of a new application and approval of the new facility. ()

d. Any act adversely affecting the welfare of clients is being permitted, aided, performed, or abetted such as: neglect, physical abuse, mental abuse, emotional abuse, violation of civil rights, criminal activity, or exploitation. ()

e. The program demonstrated or exhibited a lack of sound judgment that is essential to the operation and management of an alcohol and substance use disorders treatment or recovery support services program. ()

f. The program is not in compliance with any of the conditions of a provisional certificate of ()

approval. ()

g. The program lacks personnel, as required by these rules or as directed by the Department, to properly treat or serve the number of clients in the program. ()

h. A program, facility, or service has not complied with a facility or program requirement within thirty (30) days from the date the Department accepted their plan of correction. ()

i. A program, facility, or service has made little or no progress in correcting deficiencies within thirty (30) days from the date the Department accepted their plan of correction. ()

j. The Department makes a determination of repeated noncompliance with respect to a program, facility, or service. ()

Subsections 160.03 and 160.04

160. DISCLOSURE OF OWNERSHIP, ADMINISTRATION, GOVERNING BODY.

03. Change in Ownership, ~~Location~~, or Lease of Real Property. The program must notify the Department in writing within ten (10) days of any change in ownership, ~~location~~, or any amended lease of the real property in which the treatment activities or recovery support services are provided. ()

04. Changes in ~~Governing Body or~~ Administration. The program must notify the Department of any change in ~~governing body or~~ administration. The Department may request a hearing to determine if a new application is required when the Department determines that any change in ~~governing body or~~ administration may result in deviation from the intent of the application for approval, renewal application, or plan for an inventory of treatments, as submitted by the program. ()

Subsection 170.03

170. EXECUTIVE DIRECTOR.

All alcohol and substance use disorders treatment or recovery support services programs serving adults, children, and adolescents must have provisions for an executive director as follows: ()

03. Authority of the Executive Director. The governing body bylaws ~~and or~~ administrative policies must state the executive director's responsibility to the governing body for the overall operation of the program, including the control, utilization and management of its physical and financial assets and the recruitment and direction of staff. ()

Subsection 210.01.1

210. PERSONNEL POLICIES AND PROCEDURES.

All alcohol and substance use disorders treatment or recovery support services programs must have and adhere to personnel policies and procedures that meet the following standards: ()

01. Required Personnel Policies and Procedures. Personnel policies and procedures must be developed, adopted and maintained to promote the objectives of the program and provide for a sufficient number of qualified substance use disorders professionals, treatment and support staff to render the services of the program and provide quality care during all hours of operation. ()

l. The personnel policies and procedures must establish the requirement for CPR training and basic first aid training. A minimum of one (1) CPR and First Aid trained staff must be onsite during business hours for all direct client care staff. Staff responsible for CPR and First Aid ~~client care~~ must complete this training within ninety (90) days of employment. Additionally, the policies and procedures must establish the methods for renewal of CPR

and first aid certification so that they remain current at all times.

(←)()

Section 216 (entire Section)

216. SUPERVISORY STAFF QUALIFICATIONS.

Qualifications of the supervisory staff must be verified through written documentation of work experience, education, and classroom instruction. The supervisory staff must meet the requirements in Section 218 of these rules and the following requirements: ()

01. Treatment Supervisor. The Treatment Supervisor must meet the requirements in Section 218 of this rule and have a combination of education and experience as follows: ()

a. Equivalent of five (5) years full-time paid professional experience providing alcohol and substance use disorders treatment with at least two (2) of the five (5) years providing direct treatment in a state, federal, Joint Commission, or CARF-approved program. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority. This experience must be relevant for child and adolescent treatment if supervising treatment in a child and adolescent treatment program; or ()

b. Bachelor's Degree in relevant field and four (4) years paid full-time professional experience with two (2) years in direct treatment in a state, federal, Joint Commission, or CARF-approved program. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority; or ()

c. Master's Degree and three (3) years paid full-time professional experiences with two (2) years in direct treatment in a state, federal, Joint Commission, or CARF-approved program. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority; and ()

d. Equivalent of one (1) year paid full-time supervision experience of alcohol and substance use disorders treatment services in a state, federal, Joint Commission, or CARF-approved program. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority or have a Clinical Supervisor designation from the Idaho Board of Occupational Licensure; and (←)()

e. Knowledge and experience in providing alcohol and substance use disorders treatment including client evaluation, counseling techniques, relapse prevention, case management, and family therapy. ()

02. Clinical Supervisor. The Clinical Supervisor must meet the requirements in Section 218 of this rule and have a combination of education and experience as follows: ()

a. Bachelor's Degree in relevant field and seven (7) years paid full-time professional experience with four (4) years in direct treatment in a state, federal, Joint Commission, or CARF-approved program. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority and three (3) years paid full-time supervision experience; or ()

b. Master's Degree from an accredited, approved, and recognized college or university in health and human services and the equivalent of four (4) years paid full-time professional experience with three (3) years providing direct substance use disorders treatment and one (1) year paid full-time supervision experience in a substance use disorders treatment services state, federal, Joint Commission, or CARF-approved program. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority or have a Clinical Supervisor designation from the Idaho Board of Occupational Licensure. This experience must be relevant for child and adolescent treatment if supervising treatment in child and adolescent treatment programs; (←)()

c. IBCADCC Certified Clinical Supervisor; ()

ed. Knowledge and experience demonstrating competence in alcohol and substance use disorders treatment including client evaluation, counseling techniques, relapse prevention, case management, and family therapy; and ()

de. For outpatient programs providing services to children and adolescents, the clinical supervisor must have two (2) years of experience working with families or children in an alcohol and substance use disorders treatment services setting in a state, federal, Joint Commission, or CARF-approved program. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority. Working knowledge of child and adolescent growth and development, and the effects of alcohol and drugs on a child's growth and development. ()

ef. A clinical supervisor must have completed the Clinical Supervision training model as identified by the Department. The Clinical Supervision training must be completed within one hundred eighty (180) days of date of hire or date of designation as clinical supervisor. ()

fg. A Clinical Supervisor for Co-Occurring Disorders Enhanced Programs must meet all requirements in Subsection 216.02.b. of this rule, have a Master's Degree from an accredited, approved, and recognized college or university in health and human services, and possess a current Idaho state license to provide behavioral health clinical services. ()

Section 218. (entire Section)

218. QUALIFIED SUBSTANCE USE DISORDERS PROFESSIONAL PERSONNEL REQUIRED.

The alcohol and substance use disorders program must employ the number and variety of staff to provide the services and treatments offered by the program as a multidisciplinary team. The program must employ at least one (1) qualified substance use disorders professional for each facility. ()

01. Qualified Substance Use Disorders Professional. A qualified substance use disorders professional includes the following: ()

- a. IBADCC Certified Alcohol/Drug Counselor; ()
- b. IBADCC Advanced Certified Alcohol/Drug Counselor; ()
- c. Native American Certified Alcohol and Drug Abuse Counselor (NACADC); ()
- d. Northwest Indian Alcohol/Drug Specialist Certification - Counselor II or Counselor III; ()
- e. National Board for Certified Counselors (NBCC) - Master Addictions Counselor (MAC); ()

f. "Licensed Clinical Social Worker" (LCSW) and "Licensed Masters Social Worker" (LMSW) licensed under Title 54, Chapter 32, Idaho Code, and holding one of the certifications under Subsections 218.01.a. through 218.01.e. of this rule or have one thousand forty (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. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority; ()

g. "Marriage and Family Therapist," "Registered Marriage and Family Therapist Intern," or "Associate Marriage and Family Therapist" licensed under Title 54, Chapter 34, Idaho Code, and holding one of the certifications under Subsections 218.01.a. through 218.01.e. of this rule or have one thousand forty (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. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority; ()

~~h.~~ ~~“Masters Social Worker” licensed under Title 54, Chapter 32, Idaho Code, and holding one of the certifications under Subsections 218.01.a. through 218.01.e. of this rule;~~ ()

~~i.~~ “Nurse Practitioner” licensed under Title 54, Chapter 14, Idaho Code, may provide substance use disorder services. A nurse practitioner must have one thousand forty (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. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority; ()

~~ii.~~ “Clinical Nurse Specialist” licensed under Title 54, Chapter 14, Idaho Code, may provide substance use disorder services. A clinical nurse specialist must have one thousand forty (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. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority; ()

~~iii.~~ “Physician Assistant” licensed under Title 54, Chapter 18, Idaho Code, and IDAPA 22.01.03, “Rules for the Licensure of Physician Assistants” may provide substance use disorder services. A physician assistant must have one thousand forty (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. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority; ()

~~iv.~~ “Licensed Professional Counselor” (LPC) and “Licensed Clinical Professional Counselor” (LCPC) licensed under Title 54, Chapter 34, Idaho Code, and holding one of the certifications under Subsections 218.01.a. through 218.01.e. of this rule or have one thousand forty (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. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority; ()

~~v.~~ “Psychologist,” and “Psychologist Extender” licensed under Title 54, Chapter 23, Idaho Code with a Certificate of Proficiency in the Treatment of Alcohol and Other Psychoactive Substance Use Disorders as issued by the College of Professional Psychology, or holding one of the certifications under Subsections 218.01.a. through 218.01.e. of this rule; ()

~~vi.~~ “Physician” licensed under Title 54, Chapter 18, Idaho Code, may provide substance use disorder services. A licensed physician must have one thousand forty (1,040) hours of supervised experience providing substance use disorder treatment; ()

~~vii.~~ “Professional Nurse” RN licensed under Title 54, Chapter 14, Idaho Code, may provide substance use disorder services. An RN must have one thousand forty (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. State approval includes other states that are approved, licensed, or certified to provide substance use disorders treatment services through their Single State Authority. ()

02. Qualified Substance Use Disorders Professional Status Granted Prior to May 1, 2010. Subsections 218.01 and 218.02 of this section are applicable to all new applications for appointment as a qualified Substance Use Disorders Professional submitted to the Department after May 1, 2010. If an individual was granted an appointment prior to May 1, 2010, and met the requirements at that time, he may continue to have his appointment recognized. The appointment of this status will be given by the Department after the Department has received documentation affirming the qualified substance use disorder professional's education and experience meets standards in place prior to May 1, 2010. ()

03. Arrangement for Provision of Counseling Services. If the program arranges for the provision of

counseling services, it must maintain a valid written agreement or contract with a qualified substance use disorders professional as defined in Subsection 218.01 of this section. ()

Subsections 223.08.e, 223.08.f, 223.08.j, and 223.08.k.

223. STUDENT/ISAS/TRAINEE PRACTICE.

Each student/ISAS/trainee practicing in an alcohol and substance use disorders treatment program must meet the requirements in these rules. ()

08. Work Qualifications for Students. Clinical staff designated as a student/ISAS/trainee and who with intensive supervision would be allowed to gradually add the tasks of a qualified substance use disorders professional, must have one of the following levels of qualification to begin work: ()

e. “Licensed Clinical Social Worker” (LCSW) licensed under Title 54, Chapter 32, Idaho Code, ~~and holding one of the certifications under Subsections 218.01.a. through 218.01.e. of this rule, or formal documentation of preparation for the National Board for Certified Counselors (NBCC) – Master Addictions Counselor (MAC) with formal documentation of obtaining one thousand forty (1,040) hours of supervised experience providing substance use disorder treatment;~~ ()

f. “Marriage and Family Therapist,” “Registered Marriage and Family Therapist Intern,” or “Associate Marriage and Family Therapist” licensed under Title 54, Chapter 34, Idaho Code, ~~and holding one of the certifications under Subsections 218.01.a. through 218.01.e. of this rule, or formal documentation of preparation for the National Board for Certified Counselors (NBCC) – Master Addictions Counselor (MAC) with formal documentation of obtaining one thousand forty (1,040) hours of supervised experience providing substance use disorder treatment;~~ ()

j. “Licensed Professional Counselor” (LPC) licensed under Title 54, Chapter 34, Idaho Code, ~~and holding one of the certifications under Subsections 218.01.a. through 218.01.e. of this rule, or formal documentation of preparation for the National Board for Certified Counselors (NBCC) – Master Addictions Counselor (MAC) with formal documentation of obtaining one thousand forty (1,040) hours of supervised experience providing substance use disorder treatment;~~ ()

k. “Psychologist or Psychologist Extender” licensed under Title 54, Chapter 23, Idaho Code ~~with formal documentation of obtaining a Certificate of Proficiency in the Treatment of Alcohol and Other Psychoactive Substance Use Disorders as issued by the College of Professional Psychology; or holding one of the certifications under Subsections 218.01.a. through 218.01.e. of this rule, or formal documentation of preparation for the National Board for Certified Counselors (NBCC) – Master Addictions Counselor (MAC) with formal documentation of obtaining one thousand forty (1,040) hours of supervised experience providing substance use disorder treatment;~~ ()

Subsections 350.02.c, 350.02.d, 350.02.e and 350.03

350. CLIENT RIGHTS.

All alcohol and substance use disorders treatment or recovery support services programs must have written policies and procedures to protect the fundamental human, civil, constitutional, and statutory rights of each client. ()

02. Personal Privacy. Each client's personal privacy must be assured and protected within the constraints of the individual treatment plan. ()

c. Clients in residential settings must be allowed to send and receive mail without hindrance, unless clinically contraindicated. ()

d. Clients in residential settings must be allowed to conduct private telephone conversations with family and friends, unless clinically contraindicated. ()

e. If individual therapeutic indications in residential settings necessitate restrictions on visitors, telephone calls or other communications, those restrictions must be evaluated for therapeutic effectiveness by a

qualified substance use disorders professional at least every three (3) days. (→)()

03. **Visitation.** There must be written procedures designed to protect clients' rights and privacy with respect to visitors in outpatient and residential programs. (→)()

Subsections 360.02, 360.02.b and 360.06

360. ADMISSION POLICIES AND PROCEDURES.

All alcohol and substance use disorders treatment or recovery support services programs must have policies and procedures governing the admission process. These must be available to clients and their families and to the general public. ()

02. ~~Methods of Admission Screening~~ Methods of admission Screening must be based on the needs of clients as identified ~~through a screening~~ as follows: (→)()

b. The screening ~~is done~~ must be interpreted by a qualified substance use disorders professional; and()

06. **Reasonable Precautions in All Admissions.** Reasonable precautions must be taken in all admissions to ensure the safety of the client, other clients, staff of the program, and members of the community. Reasonable precautions are those that are fair, proper, or moderate under the circumstances. (→)()

Subsections 380.02 and 380.05.h.

380. INDIVIDUALIZED TREATMENT PLAN.

02. **Treatment Plan Based on a Biopsychosocial Assessment.** The treatment plan must be based on a Department-approved biopsychosocial assessment of the client's alcohol or substance use disorders treatment needs, and contributions provided by the informal support system. (→)()

05. **Content of the Treatment Plan.** The individualized treatment plan must include the following: ()

h. A plan for including the family or ~~significant others~~ other social supports. (→)()

Subsection 392.03

392. MEDICAL EMERGENCY SERVICES.

All alcohol and substance use disorders treatment or recovery support services programs must have a written plan describing the manner in which medical emergency services must be accessed. ()

03. **CPR and Basic First Aid Training.** ~~All employees must have current CPR and basic first aid training. One (1) CPR/First Aid trained staff person must be onsite at all times. Staff responsible for CPR and First Aid must complete this training within ninety (90) days of employment. Additionally, the policies and procedures must establish the methods for renewal of CPR and first aid certification so that they remain current at all times.~~ (→)()

Subsection 397.02

397. HOUSEKEEPING SERVICES.

All alcohol and substance use disorders treatment or recovery support services facilities providing twenty-four (24) hour per day care must have written policies and procedures for maintaining a clean and safe environment to meet applicable standards in these rules. ()

02. **Clients' Personal Articles.** Clients' personal care and grooming supplies, clothing and shoes must not be allowed to accumulate on the floor thus impeding proper housekeeping measures. (→)()

Subsection 398.01.b.

398. INFECTION CONTROL POLICIES AND PROCEDURES.

Each alcohol and substance use disorders treatment or recovery support services program must have infection control policies and procedures that meet the standards in these rules. ()

01. **Written Policies and Procedures for Infection Control.** The program must have written policies and procedures pertaining to the operation of an infection control program. ()

b. ~~Provision is made for reporting, evaluating and maintaining records of infections among clients and personnel and there is a~~ A process for implementing procedures to control the spread or eliminate the cause(s) of the infection must be described in the policies and procedures. (→)()

Section. 400. -- 449.

**APPROVED FACILITY AND PROGRAM SERVICES
(Sections 450 Through 454)**

Section 452.03

452. SERVICES FOR CHILDREN AND ADOLESCENTS.

In addition to meeting all the rules and minimum standards contained in Sections 000 through 499 of these rules, each alcohol and substance use treatment or recovery support services program seeking approval to provide services to children and adolescents must meet the requirements in Section 452 of these rules: ()

03. **Continued Care of an Eighteen-Year-Old Adolescent.** An adolescent in a state-approved outpatient or intensive outpatient treatment program who reaches the age of eighteen (18) years may remain in the program in continued care for up to ninety (90) days after his eighteenth birthday, or, until the close of the current school year for an individual attending school. Prior to accepting an individual into continued care, the following are required to be presented to the Department's MSC: (→)()

Section 453 and 453.02

453. SERVICES FOR WOMEN WITH DEPENDENT CHILDREN.

These services for women with dependent children including women who are attempting to regain custody of their children apply to all approved treatment facilities and programs seeking ~~approval~~ speciality status to provide services to women with dependent children. (→)()

02. **Written Agreements.** Alcohol and substance use treatment or recovery support services programs that do not directly provide one (1) or more of the services described in Subsection 453.01 of these rules directly to women with dependent children must maintain written agreements with other approved programs that will be providing these services. A copy of the written agreements must be retained in the client's record. (→)()

Section 454 (entire Section deleted - changes made and moved to Section 745)

454. ~~CASE MANAGEMENT SERVICES. (RESERVED).~~

~~In addition to meeting all the rules and minimum standards contained in Subsections 000 through 499 of these rules, each alcohol and substance use disorders treatment or recovery support services program seeking approval as a case management facility must meet the requirements in Section 454 of these rules. Case management services include.~~

- (—)
- ~~01. Case Management Services. (—)~~
- ~~a. Services must include a case management assessment of the client and client family strength and needs, service planning, linkage to other services, client advocacy and monitoring service provisions. (—)~~
- ~~b. There must be policies and procedures for ensuring that multiple services are delivered in a coordinated and therapeutic manner to meet the goals of treatment outcomes. (—)~~
- ~~e. Case management services must not duplicate case management services currently provided under any other state funded program. (—)~~
- ~~02. Comprehensive Service Plan Development. The case manager must prepare for each client a comprehensive service plan that addresses the service needs of the client as identified in the current assessment. To the maximum extent possible, the development of the comprehensive service plan must be a collaborative process involving the client, family members, and other support and service systems. A written comprehensive service plan must be developed and implemented within thirty (30) days after the client chooses a case management agency. The comprehensive service plan must be updated at least every ninety (90) days. Sections 370 and 380 of these rules do not apply in this setting. The individual's comprehensive service plan is based on the Department's Minimum Case Management Standards referenced under Section 002 of these rules. (—)~~
- ~~02. Case Manager Contact and Availability. (—)~~
- ~~a. The case manager must have a face-to-face contact with each client, at least every month. Contact may be made more often depending upon the level of case management. (—)~~
- ~~b. At least every thirty (30) days, depending upon the level of case management provided, case managers must have additional contact with the client, guardian, or provider who can verify the client's well being and whether services are being provided according to the written plan. The frequency, mode of contact, and person being contacted must be identified in the plan and must meet the needs of the client. (—)~~
- ~~03. Case Manager Qualifications. A case manager must have completed training in the essentials of case management as identified by the Department. (—)~~
- ~~a. A case manager providing basic or intensive case management must be a qualified substance use disorders professional as defined in Section 013 of these rules, an ISAS as defined in Section 012 of these rules, or a trainee as defined in Section 013 of these rules. An ISAS or trainee may provide case management services only under direct intensive clinical supervision and a learning plan. (—)~~
- ~~b. A case manager providing clinical case management must have a master's degree, or higher in human services, be a qualified substance use disorders professional, and have one thousand forty (1,040) hours of clinically supervised substance use disorders treatment experience. (—)~~
- ~~e. A trainee must not provide clinical case management. (—)~~
- ~~04. Case Manager Status Granted Prior to May 1, 2010. Subsections 218.01 and 218.02 of these rules are applicable to all new applications for appointment as a case manager submitted to the Department after May 1, 2010. If an individual was granted an appointment prior to May 1, 2010, and met the requirements at that time, he may continue to have his appointment recognized. The appointment of this status will be given by the Department after the Department has received documentation affirming the qualified substance use disorder professional's education and experience meets standards in place prior to May 1, 2010. (—)~~
- ~~05. Staffing. A case managers total caseload must not be so large that it cannot assure quality service delivery and client satisfaction. For case managers who have other recovery support service or treatment caseloads, or both, the total caseload must not exceed thirty (30) clients at any given time. (—)~~

~~06. **Supervision.** The case management program must provide and document at least one (1) hour of case management supervision per month for each case manager. ()~~

~~a. Case management supervisors must have a master's degree in a human services field, be a qualified substance use disorders professional, and have one (1) year treatment experience with the substance use disorders population. ()~~

~~b. Case management supervision must be documented and include the following: the date supervision is provided; the times the supervision begins and ends; the topics discussed; the duration of each session; whether the supervision was to an individual or group; and the signatures and credentials of both the individual conducting the supervision and the individual(s) receiving supervision. ()~~

~~07. **Client Records For Case Management Program.** Department approved case management forms must be used and can be found on the Department's website as described in Sections 002 and 005 of these rules. The case management program must maintain a written client record and documentation of services on each client utilizing the forms and procedures described in the Minimum Case Management Standards referenced in Section 002 of these rules. All entries in the client record must be signed and dated. Symbols and abbreviations may be used only if they have been approved by professional staff and only when there is an explanatory legend. Sections 375 and 386 of these rules do not apply in this setting. ()~~

Section 455 (new Section)

455. CLINICAL CASE MANAGEMENT SERVICES.

Clinical case management is the process in which a clinician is responsible for the direct care of a client and for coordinating other services needed by the client. In addition to meeting all the rules and minimum standards contained in Subsections 000 through 499 of these rules, each alcohol and substance use disorders treatment service program seeking approval as a clinical case management facility must meet the requirements in this rule. Clinical case management services include the following services. ()

01. Clinical Case Management Services.

a. Services must include a full biopsychosocial assessment, utilizing a Department-approved assessment tool, and a case-management assessment of the client and client family strength and needs, service planning, linkage to other services, client advocacy, and monitoring service provisions. ()

b. The facility must have policies and procedures for ensuring that multiple services are delivered in a coordinated and therapeutic manner to meet the goals of treatment outcomes. ()

c. Clinical case management services must not duplicate case management, substance use disorder treatment, or service coordination services currently being provided under any other state-funded program. ()

d. Clinical case management services provided must not exceed the clinician's scope of practice as defined by the individual licensing boards. ()

02. Eligibility Criteria. To be eligible for clinical case management, the client must meet the following criteria: ()

a. Meet ASAM criteria for a substance use disorder and be unstable in two (2) or more of ASAM dimensions 1, 2, 5, or 6; ()

b. Have a diagnosis of serious mental illness (SMI) as defined by the American Psychiatric Association in the Diagnostic and Statistical Manual of Mental Disorders, Text Revision (DSM-IV-TR): schizophrenia; paranoia and other psychotic disorders; bipolar disorders (mixed, manic and depressive); major depressive disorders (single episode or recurrent); schizoaffective disorders; and obsessive-compulsive disorders; and ()

- c. Be at risk for institutionalization. ()
- 03. Clinical Case Manager Qualifications. ()

 - a. A clinical case manager must be a Masters-level licensed clinician and be a qualified substance use disorders professional as defined in Section 013 of these rules. ()
 - b. A clinical case manager may not hold trainee status. ()
- 04. Caseload. A clinical case manager's total caseload must not be so large that it cannot assure quality service delivery and client satisfaction. For clinical case managers who have other recovery support service or treatment caseloads, or both, the total caseload must not exceed thirty (30) clients at any given time. ()
- 05. Clinical Supervision. The clinical case management program must provide and document at least one (1) hour of clinical supervision per month for each clinical case manager. ()
- 06. Limitations on Reimbursement. ()

 - a. Clinical case managers will not be reimbursed for more than one (1) contact during a single fifteen (15) minute time period. ()
 - b. Clinical case managers may not bill the substance use disorders system for mental health services they provide. ()

Subsection 500.01.f.

500. RESIDENTIAL SOCIAL DETOXIFICATION FACILITY.

Each alcohol and substance use disorders treatment program seeking approval as a residential social detoxification facility must meet the requirements in Section 500 of these rules, in addition to all rules and minimum standards contained in Sections 000 through 499 of these rules. ()

01. Detoxification Services in a Residential Social Detoxification Facility. ()

f. Clients must be under continuous direct observation by trained personnel who meet training requirements established in this section. (→)()

Subsection 540.01.b.

540. LEVEL III.1 - CLINICALLY MANAGED LOW-INTENSITY RESIDENTIAL TREATMENT FACILITY FOR ADULTS (HALFWAY HOUSE).

Each alcohol and substance use disorders treatment program seeking approval as a Level III.1 - Clinically Managed Low Intensity Residential Treatment Facility (Level III.1) must meet the requirements in Section 540 of these rules, in addition to all rules and minimum standards contained in Sections 000 through 499. ()

01. Treatment Services for Adults Level III.1. ()

b. Treatment and adjunct services must may not be provided on-site or but can be arranged for by the program. If the program chooses to provide treatment services on-site they must also meet the requirements in Section 600 of these rules. (→)()

Subsections 630.02.a and 630.03

630. CHILD AND ADOLESCENT TRANSITIONAL RESIDENTIAL TREATMENT FACILITY.

Each alcohol and substance use disorders treatment program seeking approval as a Child and Adolescent Transitional

Residential Treatment Facility must meet the requirements in Section 630 of these rules, in addition to all rules and minimum standards contained in Sections 000 through 499 of these rules. ()

02. Treatment Services in a Child and Adolescent Residential Transitional Facility. ()

a. Child and Adolescent Transitional Residential Treatment will be provided as a Level III.1 - Clinically Managed Low-Intensity Residential Service, which may include outpatient for clients who have completed Level III.5, Section 520, and lack supportive recovery environments. (→)()

03. Case Management in a Child and Adolescent Residential Transitional Facility. Every Child and Adolescent Transitional Residential Treatment Facility must provide case management and meet the requirements set forth in Section ~~454~~ 745 of these rules. (→)()

Subsection 640.02

640. LEVEL .5 - EARLY INTERVENTION SERVICES FOR CHILDREN AND ADOLESCENTS.
Early intervention is a brief intensive service that is delivered in an approved treatment facility. ()

02. Case Management in Child and Adolescent Level .5. Case Management may be provided as set forth in Section ~~454~~ 745 of these rules.

Subsection 650.01

650. LEVEL .5 - EARLY INTERVENTION SERVICES FOR ADULTS.
Early intervention is a brief intensive service that is delivered in an approved treatment facility. ()

01. Case Management in Adult Level .5. Case Management may be provided as set forth in Section ~~454~~ 745 of these rules. (→)()

Section 740

740. ALCOHOL AND DRUG TEST SERVICES.
Each alcohol and substance use disorders treatment or recovery support services program seeking approval as an Alcohol and Drug Test provider must meet the requirements in Section 740 of these rules, in addition to Sections 000 through 499 of these rules, unless otherwise specified in this section. Alcohol and drug testing is defined in Section 010 of these rules. (→)()

Section 745 (New Section)

745. BASIC AND INTENSIVE CASE MANAGEMENT SERVICES.
In addition to meeting all the rules and minimum standards contained in Subsections 000 through 499 of these rules, each alcohol and substance use disorders treatment or recovery support services program seeking approval as a Basic or Intensive case management facility must meet the requirements in Section 745 of these rules. Basic and Intensive case management services include. ()

01. Basic and Intensive Case Management Services. ()

a. Services must include a case management assessment of the client and client family strength and needs, service planning, linkage to other services, client advocacy and monitoring service provisions. ()

b. There must be policies and procedures for ensuring that multiple services are delivered in a coordinated and therapeutic manner to meet the goals of treatment outcomes. ()

c. Case management services must not duplicate case management services currently provided under any other state-funded program. ()

02. Comprehensive Service Plan Development. The case manager must prepare for each client a comprehensive service plan that addresses the service needs of the client as identified in the current assessment. To the maximum extent possible, the development of the comprehensive service plan must be a collaborative process involving the client, family members, and other support and service systems. A written comprehensive service plan must be developed and implemented within thirty (30) days after the date the agency first sees the client. The comprehensive service plan must be updated at least every ninety (90) days. Sections 370 and 380 of these rules do not apply in this setting. The individual's comprehensive service plan is based on the Department's Minimum Case Management Standards referenced under Section 002 of these rules. ()

03. Case Manager Contact and Availability. ()

a. Basic Case Management. The case manager must have a face-to-face contact with each client, at least every month. Contact may be made more often depending upon the level of case management. ()

b. Intensive Case Management. At least every thirty (30) days, depending upon the level of case management provided, case managers must have additional contact with the client, guardian, or provider who can verify the client's well being and whether services are being provided according to the written plan. The frequency, mode of contact, and person being contacted must be identified in the plan and must meet the needs of the client. ()

04. Case Manager Qualifications. A case manager must have completed training in the essentials of case management as identified by the Department. A case manager providing basic or intensive case management must: ()

a. Be a qualified substance use disorders professional as defined in Section 013 of these rules, an ISAS as defined in Section 012 of these rules, or a trainee as defined in Section 013 of these rules. An ISAS or trainee may provide case management services only under direct intensive clinical supervision and a learning plan. ()

b. Have a bachelor's degree in a human services field from a nationally-accredited university or college and at least six (6) months, or 1,040 hours, of supervised experience working with the substance use disorders population; and ()

c. Have a case management certificate issued by the Department after training is completed.()

05. Case Manager Status Granted Prior to May 1, 2010. Subsections 218.01 and 218.02 of these rules are applicable to all new applications for appointment as a case manager submitted to the Department after May 1, 2010. If an individual was granted an appointment prior to May 1, 2010, and met the requirements at that time, he may continue to have his appointment recognized. The appointment of this status will be given by the Department after the Department has received documentation affirming the qualified substance use disorder professional's education and experience meets standards in place prior to May 1, 2010. ()

06. Staffing. A case manager's total caseload must not be so large that it cannot assure quality service delivery and client satisfaction. ()

07. Supervision. The case management program must provide and document at least one (1) hour of case management supervision per month for each case manager. ()

a. Case management supervisors must: ()

i. Be a qualified substance use disorders professional with a Master's degree in a human services field; or

ii. Have a Master's degree in a human services field and one (1) year treatment experience with at

least six (6) months, or one thousand forty (1,040) hours being supervised while working with the substance use disorders population. ()

b. Case management supervision must be documented and include the following: the date supervision is provided, the times the supervision begins and ends, the topics discussed, the duration of each session, whether the supervision was to an individual or group, and the signatures and credentials of both the individual conducting the supervision and the individual(s) receiving supervision. ()

08. Client Records For Case Management Program. Department-approved case management forms must be used and can be found on the Department's website as described in Sections 002 and 005 of these rules. The case management program must maintain a written client record and documentation of services on each client utilizing the forms and procedures described in the Minimum Case Management Standards referenced in Section 002 of these rules. All entries in the client record must be signed and dated. Symbols and abbreviations may be used only if they have been approved by professional staff and only when there is an explanatory legend. Sections 375 and 386 of these rules do not apply in this setting. ()

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