

Dear Senators HEIDER, Nuxoll, Bock, and
Representatives WOOD, Perry, Rusche:

The Legislative Services Office, Research and Legislation, has received the enclosed rules of
the Department of Health and Welfare:

IDAPA 16.05.04 - Rules of the Idaho Council on Domestic Violence & Victim Assistance Grant
Funding (Docket No. 16-0504-1301);

IDAPA 16.05.07 - Rules Pertaining To The Investigation & Enforcement of Fraud, Abuse &
Misconduct (Docket No. 16-0507-1301);

IDAPA 16.06.12 - Rules Governing the Idaho Child Care Program (ICCP) (Docket No.
16-0612-1301);

IDAPA 16.07.30 - Rules Pertaining To Behavioral Health Community Crisis Centers (Docket No.
16-0730-1301) (New Chapter).

Pursuant to Section 67-454, Idaho Code, a meeting on the enclosed rules may be called by the
cochairmen or by two (2) or more members of the subcommittee giving oral or written notice to Research
and Legislation no later than fourteen (14) days after receipt of the rules analysis from Legislative
Services. The final date to call a meeting on the enclosed rules is no later than 10/30/2013. If a meeting is
called, the subcommittee must hold the meeting within forty-two (42) days of receipt of the rules analysis
from Legislative Services. The final date to hold a meeting on the enclosed rules is 11/29/2013.

The germane joint subcommittee may request a statement of economic impact with respect to a
proposed rule by notifying Research and Legislation. There is no time limit on requesting this statement,
and it may be requested whether or not a meeting on the proposed rule is called or after a meeting has
been held.

To notify Research and Legislation, call 334-4845, or send a written request to the address on the
memorandum attached below.



Jeff Youtz
Director

Legislative Services Office Idaho State Legislature

Serving Idaho's Citizen Legislature

MEMORANDUM

TO: Rules Review Subcommittee of the Senate Health & Welfare Committee and the House Health & Welfare Committee
FROM: Senior Legislative Research Analyst - Ryan Bush
DATE: October 10, 2013
SUBJECT: Department of Health and Welfare

IDAPA 16.05.04 - Rules of the Idaho Council on Domestic Violence & Victim Assistance Grant Funding (Docket No. 16-0504-1301)

IDAPA 16.05.07 - Rules Pertaining To The Investigation & Enforcement of Fraud, Abuse & Misconduct (Docket No. 16-0507-1301)

IDAPA 16.06.12 - Rules Governing the Idaho Child Care Program (ICCP) (Docket No. 16-0612-1301)

IDAPA 16.07.30 - Rules Pertaining To Behavioral Health Community Crisis Centers (Docket No. 16-0730-1301) (New Chapter)

(1) 16.05.04 - Rules of the Idaho Council on Domestic Violence & Victim Assistance Grant Funding (Docket No. 16-0504-1301)

The Department of Health and Welfare submits notice of proposed rulemaking at IDAPA 16.05.04 - Rules of the Idaho Council on Domestic Violence and Victim Assistance Grant Funding. This rulemaking revises the documents incorporated by reference into the rule and where such reference materials are available.

The Department states that negotiated rulemaking was not conducted because informal negotiations were conducted. There is no fiscal impact associated with this rulemaking.

The proposed rule appears to be within the statutory authority granted to the Department in Section 39-5209, Idaho Code.

(2) 16.05.07 - Rules Pertaining To The Investigation & Enforcement of Fraud, Abuse & Misconduct (Docket No. 16-0507-1301)

The Department of Health and Welfare submits notice of proposed rulemaking at IDAPA 16.05.07 - Rules Pertaining To The Investigation and Enforcement of Fraud, Abuse & Misconduct. The Department states that this rule change is to conform with changes to Section 56-227, Idaho Code, as codified in Senate Bill 1032 (2013). Specifically, this rule change expands the scope of investigations and enforcement actions to include all public assistance providers and programs and not simply Medicaid providers and services. The Department states that this rule change will increase accountability and prevent fraud and abuse of public funds.

Mike Nugent, Manager
Research & Legislation

Cathy Holland-Smith, Manager
Budget & Policy Analysis

April Renfro, Manager
Legislative Audits

Glenn Harris, Manager
Information Technology

The Department states that negotiated rulemaking was not conducted because the rule change is to conform to statute. There is no fiscal impact associated with this rulemaking.

The proposed rule appears to be within the statutory authority granted to the Department in Sections 56-202(b) and 56-1003, Idaho Code, and in accordance with Senate Bill 1032.

(3) 16.06.12 - Rules Governing the Idaho Child Care Program (ICCP) (Docket No. 16-0612-1301)

The Department of Health and Welfare submits notice of proposed rulemaking at IDAPA 16.06.12 - Rules Governing the Idaho Child Care Program (ICCP). The Department states that federal law allows states to waive in-home child care health and safety inspection requirements but not training requirements. Also, ICCP has not required health inspections in order for families with in-home child care to be eligible for a child-care subsidy. This rule change clarifies that inspections are not required for in-home child care but training is required.

The Department states that negotiated rulemaking was not conducted because the rule change puts into rule what is current practice and will not impact individuals affected by the change. There is no fiscal impact associated with this rulemaking.

The proposed rule appears to be within the statutory authority granted to the Department in Section 56-202(b), Idaho Code.

(4) 16.07.30 - Rules Pertaining To Behavioral Health Community Crisis Centers (Docket No. 16-0730-1301) (New Chapter)

The Department of Health and Welfare submits notice of proposed rulemaking at IDAPA 16.07.30 - Rules Pertaining To Behavioral Health Community Crisis Centers. The Department states that this chapter of rules establishes the benefit and eligibility process for behavioral health community crisis centers. Specifically, this rulemaking requires criminal history and background checks; defines terms; provides for access to behavioral health community crisis centers and intake assessment; determines eligibility; provides for emergency services and individualized service plans; provides for use of public funds and benefits; provides for the maintenance of clinical and client records; and provides that individuals receiving services are responsible for paying for services provided.

The Department states that negotiated rulemaking was not conducted because there are no stakeholders outside of the Department. A public meeting will be held on October 18 in Boise with videoconferencing available at the Department's Regional offices. This new chapter incorporates by reference the *Diagnostic and Statistical Manual of Mental Disorders* and *Idaho Behavioral Health Standards*. The Department states that there is no anticipated fiscal impact associated with this rulemaking.

The proposed rule appears to be within the statutory authority granted to the Department in Sections 39-3132, 56-202(b) and 56-1003, Idaho Code.

cc: Department of Health and Welfare
Tamara Prisock
Luann Dettman
Ben Johnson
Genie Sue Weppner
Casey Moyer

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE
16.05.04 - RULES OF THE IDAHO COUNCIL ON DOMESTIC VIOLENCE
AND VICTIM ASSISTANCE GRANT FUNDING

DOCKET NO. 16-0504-1301

NOTICE OF RULEMAKING - PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 39-5209, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than October 16, 2013.

The hearing site(s) will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

The Idaho Council on Domestic Violence and Victim Assistance (ICDVVA) is revising the "Incorporation by Reference" section of these rules. Specifically, the documents entitled: "Domestic Violence Program and Personnel Standards" and the "Sexual Assault Program and Personnel Standards" are being combined into a single standards manual entitled: "Service Standards for ICDVVA-Funded Programs." This revision is being done to reflect changes in federal regulations and program practices made since 1998, as well as incorporate program enhancements developed with providers to improve the quality of services to victims of crime in Idaho.

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

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:

There is no anticipated fiscal impact to any funds for this rulemaking.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220, Idaho Code, negotiated rulemaking was not conducted and deemed not feasible because informal negotiated rulemaking has already been conducted. Changes to the standards manuals have been drafted in collaboration with the program's service providers.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the standards manual entitled: *Service Standards for ICDVVA-Funded Programs*, edition 2014-1, effective July 1, 2014, is being incorporated by reference into these rules to give it the force and effect of law. The document is not being published in this chapter of rules due to its length and format, but it is available upon request from the Idaho Council on Domestic Violence and Victim Assistance or at: <http://www.icdv.idaho.gov>.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Luann Dettman at (208) 332-1540.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before October 23, 2013.

DATED this 29th day of August, 2013.

Tamara Prisock, DHW - Administrative Rules Unit
450 W. State Street - 10th Floor
P.O. Box 83720
Boise, ID 83720-0036

phone: (208) 334-5500
fax: (208) 334-6558
email: dhwrules@dhw.idaho.gov

THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET NO. 16-0504-1301

004. INCORPORATION BY REFERENCE.

~~01. General. Unless provided otherwise, any reference in these rules to any document identified in Section 004 shall constitute the full incorporation into these rules of that document for the purposes of the reference, including any notes and appendices therein. The term "document" includes codes, standards, or rules which have been adopted by an agency of the state or of the United States or by any nationally recognized organization or association. (5-3-03)~~

~~02. Availability of Reference Material. Copies of the documents incorporated by reference into these rules are available: (5-3-03)~~

~~a. At the Idaho Council on Domestic Violence and Victim Assistance, 304 North 8th Street, Suite 140, P.O. Box 83720, Boise, Idaho 83720-0036. (3-30-11)~~

~~b. On the internet at: <http://www.icdv.idaho.gov>. (5-3-03)~~

031. Documents Incorporated by Reference. In accordance with Section 67-5229, Idaho Code, the following documents are incorporated by reference into ~~these~~ this chapter of rules: (5-3-03)()

~~a. "Domestic Violence Program and Personnel Standards," "Service Standards for ICDVVA-Funded Programs," Edition 2014-1, published by the Idaho Council on Domestic Violence and Victim Assistance, effective November 20, 1998 July 1, 2014. (5-3-03)()~~

~~b. "Minimum Standards for Domestic Violence Offender Intervention Programs," published by the Idaho Council on Domestic Violence and Victim Assistance, edition 2011-1, effective July 1, 2011. (3-29-12)~~

~~c. "Sexual Assault Program and Personnel Standards," published by the Idaho Council on Domestic Violence and Victim Assistance, effective April 27, 2001. (5-3-03)~~

02. Availability of Reference Material. Copies of the documents incorporated by reference into these rules are available: ()

~~a. At the Idaho Council on Domestic Violence and Victim Assistance, 304 North 8th Street, Suite 140, P.O. Box 83720, Boise, Idaho 83720-0036. ()~~

~~b. On the internet at: <http://www.icdv.idaho.gov>. ()~~

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE

16.05.07 - THE INVESTIGATION AND ENFORCEMENT OF FRAUD, ABUSE, AND MISCONDUCT

DOCKET NO. 16-0507-1301

NOTICE OF RULEMAKING - PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Sections 56-202(b), 56-203(1) and (2), 56-209, 56-209h, 56-227, 56-227A through D, 56-1001, and 56-1003, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than October 16, 2013.

The hearing site(s) will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

Statutes governing this chapter of rules encompass all public assistance programs and providers, but the current rules limit the scope for investigations and enforcement actions to Medicaid providers and services. This rulemaking is being done to include all public assistance providers and programs in order to align these rules with statutes. By aligning the rules with statutes, the Department will increase accountability for all public assistance programs to help prevent fraud and abuse of public funds.

FEE SUMMARY: The following is a specific description of the fee or charge imposed or increased: N/A

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:

This rulemaking has no anticipated fiscal impact to state general funds or any other funds.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220, Idaho Code, negotiated rulemaking was not conducted because it is not feasible to negotiate rules which are being changed to mirror statutes for public assistance programs.

INCORPORATION BY REFERENCE: No materials are being incorporated by reference into these rules.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Ben Johnson at (208) 334-6661.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before October 23, 2013.

DATED this 29th day of August, 2013.

Tamara Prisock
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Boise, ID 83720-0036
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THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET 16-0507-1301

010. DEFINITIONS AND ABBREVIATIONS.

For purposes of this chapter of rules, the following terms ~~will be used as defined below~~ apply. (3-30-07)()

01. Abuse or Abusive. Provider practices that are inconsistent with sound fiscal, business, child care, or medical practices, and result in an unnecessary cost to ~~the Medicaid~~ a public assistance program, in reimbursement for services that are not medically necessary or that fail to meet professionally recognized standards for health care, or in physical harm, pain or mental anguish to a medical assistance recipient. ~~It also includes recipient practices that result in unnecessary cost to the Medicaid program, or recipient utilization practices which may endanger their personal health or safety.~~ (3-30-07)()

02. Access to Documentation and Records. To review and copy records at the time a written request is made during normal business hours. Documentation includes all materials as described in Section 101 of these rules. (3-30-07)

03. Claim. Any request or demand for payment, or document submitted to initiate payment, ~~of for~~ items or services provided under ~~the state's medical~~ a public assistance program, whether under a contract or otherwise. (3-30-07)()

04. Conviction. An individual or entity is considered to have been convicted of a criminal offense: (3-30-07)

a. When a judgment of conviction has been entered against the individual or entity by a federal, state, or local court, regardless of whether there is an appeal pending or whether the judgment of conviction or other record relating to criminal conduct has been expunged; (3-30-07)

b. When there has been a finding of guilt against the individual or entity by a federal, state, or local court; (3-30-07)

c. When a plea of guilty or nolo contendere by the individual or entity has been accepted by a federal, state, or local court; or (3-30-07)

d. When the individual or entity has entered into participation in a first offender, deferred adjudication, or other arrangement or program where judgment of conviction has been withheld. (3-30-07)

05. Department. The Idaho Department of Health and Welfare, its authorized agent or designee. (3-30-07)

06. Exclusion. A specific person or provider will be precluded from directly or indirectly providing services and receiving reimbursement under Medicaid. (3-30-07)

07. Fraud or Fraudulent. An intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to himself or some other person. (3-30-07)

08. Knowingly, Known, or With Knowledge. A person, with respect to information or an action, who: ()

a. ~~H~~Has actual knowledge of the information or an action; ()

b. ~~A~~Acts in deliberate ignorance of the truth or falsity of the information or the correctness or incorrectness of the action; or ()

c. ~~A~~Acts in reckless disregard of the truth or falsity of the information or the correctness or

incorrectness of the action.

~~(3-30-07)~~()

09. Managing Employee. A general manager, business manager, administrator, director, or other individual who exercises operational or managerial control over, or who directly or indirectly conducts the day-to-day operation of an institution, organization, or agency. (3-30-07)

10. Medicaid. Idaho's Medical Assistance Program. (3-30-07)

11. Medical Assistance. Payments for part or all of the cost of services funded by Titles XIX or XXI of the federal Social Security Act, as amended. (3-30-07)

12. Ownership or Control Interest. A person or entity that: ()

a. ~~H~~Has an ownership interest totaling twenty-five percent (25%) or more in an entity; ()

b. ~~I~~Is an officer or director of an entity that is organized as a corporation; ()

c. ~~I~~Is a partner in an entity that is organized as a partnership; or ()

d. ~~I~~Is a managing member in an entity that is organized as a limited liability company. ~~(3-30-07)~~()

13. Participant. An individual or recipient who is eligible and enrolled in any public assistance program. ()

134. Person. An individual, trust or estate, partnership, corporation, professional association or corporation, or other entity, public or private. (3-30-07)

145. Program. The Any public assistance program, including the Medicaid Pprogram and Idaho's State Plan, or any parts thereof, ~~including Idaho's State Plan.~~ ~~(3-30-07)~~()

156. Provider. ~~Any individual, organization, agency, or business other entity furnishing medical goods providing items~~ or services ~~in compliance with Department rules who has a Medicaid provider number and has entered into a written provider agreement with the Department~~ under a public assistance program. ~~(3-30-07)~~()

167. Provider Agreement. A written agreement between the Department and a provider or group of providers of supplies or services. This agreement contains any terms or conditions deemed appropriate by the Department. (3-30-07)

18. Public Assistance Program. Assistance for which provision is made in any federal or state law existing, or hereafter enacted, by the state of Idaho or the congress of the United States by which payments are made from the federal government to the state in aid, or in respect to payment by the state for welfare purposes to any category of needy person, and any other program of assistance for which provision for federal or state funds for aid may from time to time be made. ()

179. Recoup and Recoupment. The collection of funds for the purpose of recovering overpayments made to providers for items or services the Department has determined should not have been paid. The recoupment may occur through the collection of future claims paid or other means. (3-30-07)

~~1820.~~ **Sanction.** Any abatement or corrective action taken by the Department which is appealable under Section 003 of these rules. (3-30-07)

~~1921.~~ **State Plan.** The contract between the state and federal government under 42 U.S.C. section 1396a(a). (3-30-07)

~~202.~~ **Title XIX.** Title XIX of the Social Security Act, known as Medicaid, is a medical benefits program jointly financed by the federal and state governments and administered by the states. This program pays for medical

assistance for certain individuals and families with low income and limited resources. (3-30-07)

~~213.~~ **Title XXI.** Title XXI of the Social Security Act, known as the *State* Children's Health Insurance Program (SCHIP). This is a program that primarily pays for medical assistance for low-income children. (3-30-07)()

011. -- 019. (RESERVED)

020. DEPARTMENT ACTIONS.

When an instance of fraud, abuse, or other misconduct is identified, the Department will take action to correct the problem as provided in this section. Such corrective action may include, denial of payment, recoupment, payment suspension, provider agreement suspension, termination of provider agreement, imposition of civil monetary penalties, exclusion, *recipient participant* lock-in, referral for prosecution, or referral to state licensing boards. (3-30-07)()

021. - 099. (RESERVED)

100. INVESTIGATION AND AUDITS.

Investigation and audits of provider fraud, abuse or misconduct conducted by the Department's Bureau of Audits and Investigations or its successor are governed under this chapter of rules. (3-30-07)

01. Investigation Methods. Under Section 56-227(e5), Idaho Code, the Department will investigate and identify potential instances of fraud, abuse, or other misconduct by any person related to *or involvement* in the *public assistance* programs *administered by the Department*. Methods may include: review of computerized reports, referrals to or from other agencies, health care providers or persons, or conducting audits and interviews, probability sampling and extrapolation, and issuing subpoenas to compel testimony or the production of records. Reviews may occur on either pre-payment or post-payment basis. (3-30-07)()

02. Probability Sampling. Probability sampling shall be done in conformance with generally accepted statistical standards and procedures. "Probability sampling" means the standard statistical methodology in which a sample is selected based on the theory of probability, a mathematical theory used to study the occurrence of random events. (3-30-07)

03. Extrapolation. Whenever the results of a probability sample are used to extrapolate the amount to be recovered, the demand for recovery will be accompanied by a clear description of the universe from which the sample was drawn, the sample size and method used to select the sample, the formulas and calculation procedures used to determine the amount to be recovered, and the confidence level used to calculate the precision of the extrapolated overpayment. "Extrapolation" means the methodology whereby an unknown value can be estimated by projecting the results of a probability sample to the universe from which the sample was drawn with a calculated margin of error. (3-30-07)

(BREAK IN CONTINUITY OF SECTIONS)

210. SUSPENSION OF PAYMENTS PENDING INVESTIGATION.

The Department may suspend *public-assistance* payments in whole or part in a suspected case of fraud or abuse pending investigation and conclusion of legal proceedings related to the provider's alleged fraud or abuse. When payments have been suspended under this section of rule, the Department will provide for a hearing within thirty (30) days of receipt of any timely filed notice of appeal. (3-30-07)()

01. Basis for Suspension of Payments. When the Department through reliable evidence suspects fraud or abuse, or when a provider fails to provide immediate access to records, *Medicaid public-assistance* payments may be withheld or suspended. (3-30-07)()

02. Notice of Suspension of Payments. The Department may *not* withhold *public-assistance* payments

without first notifying the provider of its intention to do so. The Department will send written notice ~~according to 42 CFR 455-23(b)~~ within five (5) days of taking such action. ~~(3-30-07)~~()

03. Duration of Suspension of Payments. The withholding of payment actions under this section of rule will be temporary and will not continue after: (3-30-07)

a. The Department or the prosecuting authorities determine there is insufficient evidence of fraud or willful misrepresentation by the provider; or (3-30-07)

b. Legal proceedings related to the provider's alleged fraud or abuse are completed. (3-30-07)

(BREAK IN CONTINUITY OF SECTIONS)

230. TERMINATION OF PROVIDER STATUS.

Under Section 56-209h, Idaho Code, the Department may terminate the provider agreement of, or otherwise deny provider status for a period of five (5) years from the date the Department's action becomes final to, any individual or entity who: (3-30-07)

01. Submits an Incorrect Claim. Submits a claim with knowledge that the claim is incorrect, including reporting costs as allowable which were known to be disallowed in a previous audit, unless the provider clearly indicates that the item is being claimed to establish the basis for an appeal and each disputed item or amount is specifically identified. (3-30-07)

02. Fraudulent Claim. Submits a fraudulent claim. (3-30-07)

03. Knowingly Makes a False Statement. Knowingly makes a false statement or representation of material fact in any document required to be maintained or submitted to the Department. (3-30-07)

04. Medically Unnecessary. Submits a claim for an item or service known to be medically unnecessary. (3-30-07)

05. Immediate Access to Documentation. Fails to provide, upon written request by the Department, immediate access to documentation required to be maintained. (3-30-07)

06. Non-Compliance With Rules and Regulations. Fails repeatedly or substantially to comply with the rules and regulations governing medical assistance payments or other public assistance program payments. ~~(3-30-07)~~()

07. Violation of Material Term or Condition. Knowingly violates any material term or condition of its provider agreement. (3-30-07)

08. Failure to Repay. Has failed to repay, or was a managing employee or had an ownership or control interest in any entity that has failed to repay, any overpayments or claims previously found to have been obtained contrary to statute, rule, regulation, or provider agreement. (3-30-07)

09. Fraudulent or Abusive Conduct. Has been found, or was a managing employee in any entity which has been found, to have engaged in fraudulent conduct or abusive conduct in connection with the delivery of health care or public assistance items or services. ~~(3-30-07)~~()

10. Failure to Meet Qualifications. Fails to meet the qualifications specifically required by rule or by any applicable licensing board. (3-30-07)

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE
16.06.12 - RULES GOVERNING THE IDAHO CHILD CARE PROGRAM (ICCP)

DOCKET NO. 16-0612-1301

NOTICE OF RULEMAKING - PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Sections 56-202, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than October 16, 2013.

The hearing site(s) will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

This rulemaking is to clarify and reflect current practices around in-home child care. ICCP respects the rights of these families and have not required health inspections in order for them to be eligible for a child-care subsidy. The current rules do not provide an exception for the health and safety inspections, which needs to be in rule. Federal law allows states to waive in-home child care health and safety inspection requirements but not training requirements.

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

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:

This rulemaking has no anticipated fiscal impact to any funds, because the change is being made to reflect current practice.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220, Idaho Code, negotiated rulemaking was not feasible because the change being made was putting into rule what is current practice for conducting business for in-home child care and would not impact those individuals affected by the change.

INCORPORATION BY REFERENCE: No materials are being incorporated by reference into these rules.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Genie Sue Weppner at (208) 334-5656.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before October 23, 2013.

DATED this 29th day of August, 2013.

Tamara Prisock
DHW - Administrative Rules Unit
450 W. State Street - 10th Floor
P.O. Box 83720
Boise, ID 83720-0036
phone: (208) 334-5500; fax: (208) 334-6558
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THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET 16-0612-1301

401. IN-HOME CARE HEALTH AND SAFETY REQUIREMENTS.

Each in-home care provider is responsible to ensure that health and safety requirements are met for children being cared for in the children's own home. ()

01. Health and Safety Inspections. In-home health and safety inspections, described in Section 802 of these rules, are not required for in-home care providers caring for children in the children's own home. ()

02. Health and Safety Training. Because in-home care providers are exempt from health and safety inspections, each in-home care provider must complete health and safety training provided by the local Health District covering requirements listed in Section 802 of these rules. ()

~~401.2~~ -- 499. (RESERVED)

(BREAK IN CONTINUITY OF SECTIONS)

802. HEALTH AND SAFETY REQUIREMENTS.

All providers must comply with the health and safety requirements listed in Subsections 802.01 through 802.10 of this rule. ~~The~~ All providers must agree to a health and safety inspection, with the exception of in-home child care described in Section 401 of these rules. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law.

(7-1-09)()

01. Age of Provider. All child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. (4-2-08)

02. Sanitary Food Preparation. Food for use in child care facilities must be prepared and served in a sanitary manner. Utensils and food preparation surfaces must be cleaned and sanitized before using to prevent contamination. (4-2-08)

03. Food Storage. All food served in child care facilities must be stored to protect it from potential contamination. (4-2-08)

04. Hazardous Substances. Medicines, cleaning supplies, and other hazardous substances must be stored out of the reach of children. (4-2-08)

05. Emergency Communication. A telephone or some type of emergency communication system is required. (4-2-08)

06. Smoke Detectors, Fire Extinguishers, and Exits. A properly installed and operational smoke detector must be on the premises where child care occurs. Adequate fire extinguishers and fire exits must be available on the premises. (4-2-08)

07. Hand Washing. Each provider must wash his hands with soap and water at regular intervals, including before feeding, after diapering or assisting children with toileting, after nose wiping, and after administering first aid. (4-2-08)

08. CPR/First Aid. Providers must insure that at all times children are present at least one (1) adult on the premises has current certification in pediatric rescue breathing and first aid treatment from a certified instructor.

(4-2-08)

09. Health of Provider. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. (4-2-08)

10. Child Abuse. Providers must report suspected child abuse to the appropriate authority. (4-2-08)

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE

16.07.30 - BEHAVIORAL HEALTH COMMUNITY CRISIS CENTERS

DOCKET NO. 16-0730-1301 (NEW CHAPTER)

NOTICE OF RULEMAKING - PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to the Regional Mental Health Services Act, Title 39, Chapter 31, Idaho Code; also Sections 56-1003, 56-1004, 56-1004A, 56-1007 and 56-1009, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearings concerning this rulemaking will be held as follows:

ORIGINATING LOCATION -- LIVE MEETING

Friday, October 18, 2013

12:30 - 2:30 pm (PDT) -- 1:30 - 3:30 pm (MDT)

**Idaho Department of Health and Welfare, Central Office
Conference Room 3A (3rd floor)
450 West State Street
Boise, ID 83702**

VIDEOCONFERENCE LOCATIONS

Region I Office – Coeur d’Alene Main Conference Room 2195 Ironwood Court Coeur d’Alene, ID 83814	Region II Office – Lewiston 1st Floor Conference Rm. 1118 “F” Street Lewiston, ID 83501
Region III Office – Caldwell Owyhee Conference Room (Rm. 226) 3402 Franklin Road Caldwell, ID 83605	Region IV Office – Boise Room 137 1720 Westgate Drive, Suite A Boise, ID 83704
Region V Office – Twin Falls Room 116 823 Harrison Twin Falls, ID 83301	Region VI Office – Pocatello Room 225 421 Memorial Drive Pocatello, ID 83201
Region VII Office – Idaho Falls Conference Room 240 150 Shoup Ave. Idaho Falls, ID 83402	

The hearing sites will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

The proposed chapter establishes the benefit and eligibility process for behavioral health community crisis centers in the state of Idaho. These programs will provide behavioral health crisis services to persons residing in Idaho.

FEE SUMMARY: The following is a specific description of the fee or charge imposed or increased: N/A

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:

These rules will provide an opportunity for the development of behavioral health community crisis centers. The Department of Health and Welfare may be making a budget request separate from these rules. However, there is no anticipated fiscal impact to the state general fund or any other funds due to this rulemaking.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(2), Idaho Code, negotiated rulemaking was not conducted because it was not feasible due to the fact that there is currently a lack of identifiable representatives of affected interests. Behavioral health community crisis centers are a component of the Idaho Behavioral Health system of care transformation. In the transformed structure, the Department of Health and Welfare retains its role as the state mental health authority and has responsibility for oversight of the behavioral health system of care. The proposed chapter establishes behavioral health community crisis centers and does not impact existing processes for private providers. There are no stakeholders outside of the Department at this time.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following two items are being incorporated by reference into these rules to give them the force and effect of law. These documents are not being reprinted in this chapter of rules due to their length and format and because of the cost for republication.

1. The American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders*, Fifth Edition (DSM-V), 2013.
2. *Idaho Behavioral Health Standards*, Idaho Department of Health and Welfare, 2013.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Casey Moyer at (208) 334-4916.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before October 23, 2013.

DATED this 29th day of August, 2013.

Tamara Prisock
DHW - Administrative Rules Unit
450 W. State Street - 10th Floor
P.O. Box 83720
Boise, ID 83720-0036
phone: (208) 334-5500; fax: (208) 334-6558
email: dhwrules@dhw.idaho.gov

THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET NO. 16-0730-1301

IDAPA 16
TITLE 07
CHAPTER 30

16.07.30 - BEHAVIORAL HEALTH COMMUNITY CRISIS CENTERS

000. LEGAL AUTHORITY.

The Idaho Legislature has delegated to the Department of Health and Welfare, as the state mental health authority, the responsibility to ensure that mental health services are available throughout the state of Idaho to individuals who need such care and who meet certain eligibility requirements under the Regional Mental Health Services Act. This chapter is authorized under the Regional Mental Health Services Act, Title 39, Chapter 31, Idaho Code, as well as Sections 56-1003, 56-1004, 56-1004A, 56-1007, and 56-1009, Idaho Code. ()

001. TITLE AND SCOPE.

01. Title. The title of these rules is IDAPA 16.07.30, "Behavioral Health Community Crisis Centers." ()

02. Scope. These rules establish the benefit and eligibility process for behavioral health community crisis centers in the state of Idaho. These programs provide behavioral health crisis services to persons residing in Idaho. ()

002. WRITTEN INTERPRETATIONS.

In accordance with Section 67-5201(19)(b)(iv), Idaho Code, this agency may have written statements that pertain to the interpretation of the rules of this chapter, or to the documentation of compliance with the rules of this chapter. These materials are available for public inspection and copying at cost in the main office of the Department of Health and Welfare, 450 West State Street, Boise, Idaho, 83702. ()

003. ADMINISTRATIVE APPEALS.

Administrative appeals and contested cases are governed by the provisions of IDAPA 16.05.03, "Rules Governing Contested Case Proceedings and Declaratory Rulings." ()

004. INCORPORATION BY REFERENCE.

The following documents are incorporated by reference in this chapter of rules. ()

01. DSM-V. American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-V), Arlington, VA, American Psychiatric Association, 2013, copies of the manual are available from the American Psychiatric Association, 1000 Wilson Blvd., Arlington VA 22209-3901. A copy of the manual is also available for public review at the Department of Health And Welfare, 450 West State Street, Boise, Idaho, 83702. ()

02. Idaho Behavioral Health Standards. Idaho Behavioral Health Standards, Boise, Idaho, Idaho Department of Health and Welfare, 2013. A copy of the manual is available for public review at the Department of Health And Welfare, 450 West State Street, Boise, Idaho, 83702. ()

005. OFFICE -- OFFICE HOURS -- MAILING ADDRESS -- STREET ADDRESS -- TELEPHONE NUMBER -- INTERNET WEBSITE.

01. Office Hours. Office hours are 8 a.m. to 5 p.m., Mountain Time, Monday through Friday, except

holidays designated by the state of Idaho. ()

02. Mailing Address. The mailing address for the business office is Idaho Department of Health and Welfare, P.O. Box 83720, Boise, Idaho 83720-0036. ()

03. Street Address. The business office of the Idaho Department of Health and Welfare is located at 450 West State Street, Boise, Idaho 83702. ()

04. Telephone. The telephone number for the Idaho Department of Health and Welfare is (208) 334-5500. ()

05. Internet Websites. The Department internet website is found at <http://www.healthandwelfare.idaho.gov>. ()

006. CONFIDENTIALITY OF RECORDS AND PUBLIC RECORDS ACT COMPLIANCE AND REQUESTS.

01. Confidentiality of Records. Any disclosure of confidential information used or disclosed in the course of the Departments business is subject to the restrictions in state or federal law, federal regulation, and IDAPA 16.05.01, "Use and Disclosure of Department Records." ()

02. Public Records Act. The Department will comply with Sections 9-337 through 9-350, Idaho Code, when request for the examination and copying of public records are made. Unless otherwise exempted, all public records in the custody of the Department are subject to disclosure. ()

007. -- 008. (RESERVED)

009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.

01. Compliance With Department Criminal History and Background Check. All owners, operators, employees, transfers, reinstated former employees, student interns, contractors, and volunteers who provide direct care or services, or whose position requires regular contact with clients, must comply with the provisions in IDAPA 16.05.06, "Criminal History and Background Checks." ()

02. Availability to Work or Provide Service. An individual listed in Subsection 009.01 of these rules is available to work on a provisional basis at the discretion of the employer or agency once the individual has submitted his criminal history and background check application, it has been signed and notarized, reviewed by the employer or agency, and no disqualifying crimes or relevant records are disclosed on the application. An individual must be fingerprinted within twenty-one (21) days of submitting his criminal history and background check application. ()

a. An individual is allowed to work or have access to clients only under supervision until the criminal history and background check is completed. ()

b. An individual, who does not receive a criminal history and background check clearance, or a waiver granted under the provisions in this chapter, may not provide direct care or services, or serve in a position that requires regular contact with clients in a behavioral health community crisis center. ()

03. Waiver of Criminal History and Background Check Denial. An individual, who receives a conditional or unconditional denial for a criminal history and background check, may apply for a waiver to provide direct care or services, or serve in a position that requires regular contact with clients in a behavioral health community crisis center. A waiver may be granted on a case-by-case basis upon administrative review by the Department of any underlying facts and circumstances in each individual case. A waiver will not be granted for crimes listed in Subsection 009.04 of this rule. ()

04. No Waiver for Certain Designated Crimes. No waiver will be granted by the Department for any of the following designated crimes or substantially conforming foreign criminal violations: ()

- a. Forcible sexual penetration by use of a foreign object, as defined in Section 18-6608, Idaho Code; ()
- b. Incest, as defined in Section 18-6602, Idaho Code; ()
- c. Lewd conduct with a minor, as defined in Section 18-1508, Idaho Code; ()
- d. Murder in any degree or assault with intent to commit murder, as defined in Sections 18-4001, 18-4003, and 18-4015, Idaho Code; ()
- e. Possession of sexually exploitative material, as defined in Section 18-1507A, Idaho Code; ()
- f. Rape, as defined in Section 18-6101, Idaho Code; ()
- g. Sale or barter of a child, as defined in Section 18-1511, Idaho Code; ()
- h. Sexual abuse or exploitation of a child, as defined in Sections 18-1506 and 18-1507, Idaho Code; ()
- i. Enticing of children, as defined in Sections 18-1509 and 18-1509A, Idaho Code; ()
- j. Inducing individuals under eighteen (18) years of age into prostitution or patronizing a prostitute, as defined in Sections 18-5609 and 18-5611, Idaho Code; ()
- k. Any felony punishable by death or life imprisonment; or ()
- l. Attempt, conspiracy, accessory after the fact, or aiding and abetting, as defined in Sections 18-205, 18-306, 18-1701, and 19-1430, Idaho Code, to commit any of the disqualifying designated crimes. ()

05. Administrative Review. An administrative review for a waiver may consist of a review of documents and supplemental information provided by the individual, a telephone interview, an in-person interview, or any other review deemed necessary by the Department. The Department may appoint a subcommittee to conduct administrative reviews provided for under Subsections 009.03 through 009.12 of this rule. ()

06. Written Request for Administrative Review and Waiver. A written request for a waiver must be sent to the Administrative Procedures Section, 450 W. State Street, P.O. Box 83720, Boise, Idaho 83720-0026 within fourteen (14) calendar days from the date of the issuance of a denial from the Department's Criminal History Unit. The fourteen (14) day period for submitting a request for a waiver may be extended by the Department for good cause. ()

07. Scheduling of Administrative Review. Upon receipt of a written request for a waiver, the Department will determine the type of administrative review to be held, and conduct the review within thirty (30) business days from the date of receipt. When an in-person review is appropriate, the Department will provide the individual at least seven (7) days notice of the review date. ()

08. Factors Considered During Administrative Review. During the administrative review, the following factors may be considered: ()

- a. The severity or nature of the crimes, or other findings; ()
- b. The period of time since the incidents occurred; ()
- c. The number and pattern of incidents being reviewed; ()
- d. Circumstances surrounding the incidents that would help determine the risk of repetition; ()

- e.** The relationship between the incidents and the position sought; ()
- f.** Activities since the incidents, such as continuous employment, education, participation in treatment, completion of a problem-solving court or other formal offender rehabilitation, payment of restitution, or any other factors that may be evidence of rehabilitation. ()
- g.** A pardon that was granted by the Governor or the President; ()
- h.** The falsification or omission of information on the self-declaration form and other supplemental forms submitted; and ()
- i.** Any other factor deemed relevant to the review. ()
- 09. Administrative Review Decision.** A notice of decision will be issued by the Department within fifteen (15) business days of completion of the administrative review. ()
- 10. Decision to Grant Waiver.** The Department’s decision to grant a waiver does not set a precedent for subsequent requests by an individual for a waiver. A waiver granted under this chapter is not a criminal history and background check clearance, and is only applicable to services and programs governed under this chapter. It does not apply to other Department programs requiring clearance of a criminal history and background check. ()
- 11. Revocation of Waiver.** The Department may choose to revoke a waiver at its discretion for circumstances that it identifies as a risk to client health and safety, at any time. ()
- 12. Waiver Decisions are not Subject to Review or Appeal.** The decision or actions of the Department concerning a waiver are not subject to review or appeal, administratively or otherwise. ()
- 13. Employer Responsibilities.** A waiver granted by the Department is not a determination of suitability for employment. The employer is responsible for reviewing the results of a criminal history and background check even when a clearance is issued or a waiver is granted. Making a determination as to the ability or risk of the individual to provide direct care services or to serve in a position that requires regular contact with children and vulnerable adults is the responsibility of the employer. ()
- 010. DEFINITIONS AND ABBREVIATIONS.**
For the purposes of these rules, the following terms are used as defined below: ()
- 01. Adolescent.** An individual between the ages of fourteen (14) and eighteen (18). ()
- 02. Adult.** An individual eighteen (18) years of age or older. ()
- 03. Applicant.** An adult individual who is seeking crisis services through a behavioral health community crisis center who has completed, or has had completed on his behalf, an application for services. ()
- 04. Behavioral Health Community Crisis Center.** An outpatient facility operated by a hospital or mental health center that provides evaluation, intervention, and referral for individuals experiencing a crisis due to serious mental illness or a serious mental illness with co-occurring substance use disorder. The facility may not provide services to a client for more than twenty-three (23) hours and fifty-nine (59) minutes from the time the client arrives at the facility. The facility must discharge or transfer the client to the appropriate level of care. ()
- 05. Child.** An individual under the age of fourteen (14) years. ()
- 06. Client.** A person receiving services through a behavioral health community crisis center. The term “client” is synonymous with the following terms: patient, participant, resident, consumer, or recipient of treatment or services. ()
- 07. Department.** The Idaho Department of Health and Welfare or its designee. The Department is designated as the state mental health authority under Section 39-3124, Idaho Code. ()

- 08. Facility.** A behavioral health community crisis center, or a person authorized to act on its behalf. ()
- 09. Good Cause.** A valid and sufficient reason for not complying with the time frame set for submitting a written request for a waiver by an individual who does not pass a criminal history and background check. ()
- 10. Individualized Service Plan.** A written action plan based on an intake assessment that identifies the applicant's needs, strategies for services to meet those needs, treatment goals, and objectives. ()
- 11. Intake Assessment.** The collection of data, analysis, and review used to screen and determine whether an applicant is eligible for behavioral health community crisis services. ()
- 12. Outpatient Crisis Services.** An organized non-residential service, delivered in a variety of settings, in which behavioral health treatment personnel provide professionally directed evaluation and treatment for individuals experiencing crisis situations. ()
- 011. -- 099. (RESERVED)**

GENERAL PROVISIONS OF BEHAVIORAL HEALTH COMMUNITY CRISIS CENTERS
(Sections 100 through 250)

- 100. ACCESSING BEHAVIORAL HEALTH COMMUNITY CRISIS CENTER SERVICES.** Services may be accessed by eligible applicants through an application and request for an initial intake eligibility assessment. ()
- 01. Application for Services.** An application for services is completed by the applicant upon entry into the facility. The voluntarily completed application serves as consent for further assessment of the applicant. ()
- 02. Intake Assessment.** The facility will conduct a mental health screening using a Department approved instrument. The facility staff will gather information as needed, in order to complete the screening and intake process. ()
- 101. INTAKE ASSESSMENT.** The facility must establish admission criteria that assess the individual client's needs and the appropriateness of the services to meet those needs. ()
- 01. Eligibility.** At a minimum, admission criteria must require that the client: ()
- a.** Be at least eighteen (18) years of age; ()
 - b.** Be medically stable, with the exception of the person's mental illness or serious mental illness with a co-occurring substance use disorder; ()
 - c.** Have a DSM-V mental health diagnosable condition; and ()
 - d.** Be in need of frequent observation on an ongoing basis. ()
- 02. The Facility Determines Eligibility and Capacity for Community Crisis Services.** The total number of adults who are eligible for behavioral health community crisis services through the facility will be established by the facility. The facility may, in its sole discretion, limit or prioritize behavioral health services, define eligibility criteria, or establish the number of persons eligible based upon such factors as availability of funding, the degree of financial need, the degree of clinical need, or other factors. ()
- 03. Ineligibility Conditions.** An adult who does not meet the requirements under Subsection 101.01 of

this rule is not eligible for behavioral health community crisis services. An adult with a diagnosis of substance use disorder alone, or developmental disorder alone, may be eligible for Department services under IDAPA 16.07.17, "Alcohol and Substance Use Disorder Services," or IDAPA 16.04.11, "Developmental Disability Agencies," for substance use or developmental disability services. ()

102. ELIGIBILITY DETERMINATION.

01. Notification of Eligibility Determination. The facility will determine the adult's eligibility for behavioral health community crisis services in accordance with Section 101 of these rules within one (1) hour of completing an intake assessment. The written notice will include: ()

- a. Client name and identifying information; ()
- b. A statement of the decision; ()
- c. A concise statement of the reasons for the decision; and ()
- d. Referral to other appropriate community resources, when applicable. ()

02. Right to Accept or Reject Services. If the facility determines that an applicant is eligible for services through the facility, an individual has the right to accept or reject services offered by the facility. ()

03. Reapplication for Community Crisis Services. If the facility determines that an applicant is not eligible for services through the facility, the applicant may reapply after twenty-four (24) hours, or at any time upon a showing of a substantial, material change in circumstances. ()

04. Information that Must be Provided to the Participant. Upon admission, or as soon as possible if not clinically appropriate upon admission, the facility must provide each client with the following: ()

- a. A written statement of client rights which, at a minimum, includes the applicable patient rights; ()
- b. A copy of the crisis response facility grievance procedure; and ()
- c. The written rules of conduct, including the consequences for violating the rules. ()

103. EMERGENCY SERVICES.

01. Identification of Emergency Services Needed. If emergency services are clinically necessary, as determined by facility staff, the facility will identify the emergency services that are consistent with the applicant's level of need and a preliminary finding from the intake assessment. ()

02. Immediate Intervention. The facility must ensure inpatient care is available through a transfer agreement for clients in need of a higher level of care. ()

03. Client Management. Use of de-escalation techniques including physical and nonphysical methods, by trained staff is permissible. ()

104. -- 199. (RESERVED)

200. INDIVIDUALIZED SERVICE PLAN.

01. Individualized Service Plan. A service plan will be developed by the facility in collaboration with the client, and may include service providers. This plan will be specific, measurable, and realistic in identification of the goal(s) for crisis stabilization, relevant areas of concern, and desired results as outlined in the Idaho Behavioral Health Standards. ()

02. Referrals. The facility must make referrals for services that would help prevent or diminish future crises at the time of the client's discharge. Referrals may include additional treatment, training, or community-based services, such as assistance securing housing. ()

201. -- 205. (RESERVED)

206. OUTCOMES FOR COMMUNITY CRISIS CENTERS.

Outcomes for behavioral health community crisis centers are measured through the administration of a satisfaction survey and a standardized assessment tool. ()

207. USE OF PUBLIC FUNDS AND BENEFITS.

Public funds and benefits will be used to provide services for eligible adults under Section 102 of these rules. Services are planned and implemented to maximize community integration and the individual's ability to provide adequate safety and well-being in his community. Services are individually planned to meet the unique needs of each participant. ()

208. -- 210. (RESERVED)

211. CLINICAL RECORDS.

Every behavioral health community crisis center must maintain, control, and supervise client records and is responsible for maintaining their quality in accordance with the requirements set forth in these rules. ()

01. Active Client Records Kept at the Facility Site. The active client's records must be kept at the facility site where the client is being treated. ()

02. Compilation, Storage, Dissemination, and Accessibility of Client Records. The facility must have written policies and procedures governing the compilation, storage, dissemination, and accessibility of client records. ()

03. Electronic Storage of Client Data. When a facility stores client data in electronic or other types of automated information systems, they must have security measures to prevent inadvertent or unauthorized access to such data. ()

04. Length of Maintenance of Client Records. Client records must be maintained for a minimum of five (5) years from the date they are officially closed. ()

212. CONTENTS OF CLIENT RECORDS.

01. Intake Assessment. As defined in Section 101 of these rules. ()

02. Eligibility Determination. As defined in Section 102 of these rules. ()

03. Service Plan. As defined in Section 200 of these rules. ()

04. Progress Notes. ()

a. The facility must maintain progress notes for each client. ()

b. The progress notes must be completed following the intake assessment and eligibility determination and updated by the end of each shift into the client's clinical record. ()

c. The progress notes must describe at minimum the following: ()

i. Client's physical condition; ()

ii. Mental status; ()

- iii. Involvement in treatment services; and ()
- iv. Contain a signature and date of staff member completing the note. ()
- 05. Discharge Summary.** A discharge summary must be entered into the client record and will contain at minimum: ()
 - a. Client status at discharge; ()
 - b. Treatment progress; ()
 - c. Summary of services provided; and ()
 - d. Referral for further treatment. ()

213. -- 249. (RESERVED)

250. FINANCIAL RESPONSIBILITY FOR COMMUNITY CRISIS CENTER SERVICES.

Individuals receiving behavioral health community crisis services through the Department are responsible for paying for the services provided. Individuals must complete a "Fee Determination Form" prior to the delivery of behavioral health community crisis services. The financial responsibility for each service will be in accordance with the individual's ability to pay as determined under Sections 300 and 400 of IDAPA 16.07.01, "Behavioral Health Sliding Fee Schedules." ()

251. -- 999. (RESERVED)