Dear Senators VANORDEN, Wintrow, and Representatives VANDER WOUDE, Erickson, Rubel:

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

IDAPA 16.07.17 - Substance Use Disorders Services - Proposed Rule (Docket No. 16-0717-2401).

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 12/06/2024. 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 01/03/2025.

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 334-4854, or send a written request to the address on the memorandum attached below.



Terri Kondeff 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: Legislative Drafter Kyle Slominski
- DATE: November 19, 2024
- SUBJECT: Department of Health and Welfare

IDAPA 16.07.17 - Substance Use Disorders Services - Proposed Rule (Docket No. 16-0717-2401)

### Summary and Stated Reasons for the Rule

The Department of Health and Welfare submits notice of proposed rulemaking at IDAPA 16.07.17. The Department states that the intent of the proposed rule is to prevent the accumulation of ineffective and outdated regulations and to reduce regulatory burden. The proposed rule strikes several sections of the existing rule regarding Substance Use Disorders Services, revises a definition, and adds "licensed professional" as a qualified substance use disorder professional. The Department also notes that the proposed rule coincides with the recent go-live status of the Idaho Behavioral Health Plan and that no fees are being increased by the proposed rulemaking.

#### **Negotiated Rulemaking / Fiscal Impact**

Negotiated rulemaking was not conducted. The Department states that public comments will be collected at the public hearing concerning the rulemaking. No negative fiscal impact is anticipated.

#### **Statutory Authority**

The rulemaking appears to be authorized pursuant to sections 39-305, 39-306, 39-311, 56-1004, 56-1004A, and 56-1007, Idaho Code.

cc: Department of Health and Welfare Adam Jones

#### \*\*\* PLEASE NOTE \*\*\*

Per the Idaho Constitution, all administrative rules may be reviewed by the Legislature during the next legislative session. The Legislature has 3 options with this rulemaking docket: 1) Approve the docket in its entirety; 2) Reject the docket in its entirety; or 3) Reject the docket in part.

Paul Headlee, Deputy DirectorMatt Drake, ManagerKeith Bybee, ManagerApril Renfro, ManagerNorma Clark, ManagerLegislative Services OfficeResearch & LegislationBudget & Policy AnalysisLegislative AuditsInformation Technology

#### **IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE**

#### 16.07.17 - SUBSTANCE USE DISORDERS SERVICES

#### DOCKET NO. 16-0717-2401

#### 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, and 56-1003, 56-1004, 56-1007, 56-1009, 39-305, 39-306, and 39-311, Idaho Code.

PUBLIC HEARING SCHEDULE: A public hearing concerning this rulemaking will be held as follows:

#### VIRTUAL TELECONFERENCE Via WebEx Wednesday, November 13th, 2024 1:30 p.m. MST

Virtual Meeting Link: https://idhw.webex.com/idhw/j.php?MTID=mffe0f7bbaf6bf38f9b758ffd5d0a6ecc

Join by meeting number: Meeting number (access code): 2824 442 2379 Meeting password: qFhYtEih635 (when dialing from a phone or video system) 73498344

> Join by phone: +1-415-527-5035,,28244422379#73498344# United States Toll +1-303-498-7536,,28244422379#73498344# United States Toll (Denver)

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 rule change strives to prevent the accumulation of costly, ineffective, and outdated regulations and reduce regulatory burden to achieve a more efficient operation of government. This also coincides with the recent go-live status of the Idaho Behavioral Health Plan and seeks to update this rule chapter in association with similarly effected chapters including 16.07.33 and 16.07.37.

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

Fees are not being increased as a result of this proposed rulemaking.

**FISCAL IMPACT:** The following is a specific description, if applicable, of any negative fiscal impact on the state General Fund greater than ten thousand dollars (\$10,000) during the fiscal year as a result of this rulemaking:

There will not be a negative fiscal impact exceeding \$10,000 as a result of this proposed rulemaking.

**NEGOTIATED RULEMAKING:** Pursuant to Section 67-5220(2), Idaho Code, negotiated rulemaking was not conducted on this rule chapter however public comments will be collected at the public hearing scheduled above.

**INCORPORATION BY REFERENCE:** Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A.

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning the proposed rule, contact Jared Larsen at 208-334-5500.

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 November 27th, 2024.

DATED this 11th day of October, 2024.

Alex J. Adams, PharmD, MPH Director Idaho Department of Health & Welfare 450 W. State Street, 10th Floor P.O. Box 83720 Boise, ID 83720-0036 (208) 334-5500 phone; (208) 334-6558 fax Alex.Adams@dhw.idaho.gov

#### THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET NO. 16-0717-2401 (Only Those Sections With Amendments Are Shown.)

#### 16.07.17 – SUBSTANCE USE DISORDERS SERVICES

#### 002. (RESERVED)

#### 003. ADMINISTRATIVE APPEALS.

**01.** Appeal of Denial Based on Eligibility Requirements. Administrative appeals from a denial of substance use disorder services based on eligibility requirements are governed by the provisions of IDAPA 16.05.03, "Contested Case Proceedings and Declaratory Rulings." (3-17-22)

**02.** Appeal of Decision Based on Clinical Judgment. Decisions involving ASAM clinical judgment, including the category of services, the particular provider of services, or the duration of services, are reserved to the Department, and are not subject to appeal, administratively or otherwise, under Maresh v. State, 132 Idaho 221, 970 P.2d 14 (Idaho 1999). (3 17 22)

03. Appeal by a Substance Use Disorder Services Provider or Program. Administrative appeals from a decision that a substance use disorder services provider or program is out of compliance with these rules are governed by the provisions of IDAPA 16.05.03, "Contested Case Proceedings and Declaratory Rulings." An appeal does not stay Department action. (3-17-22)

**004. INCORPORATION BY REFERENCE.** The following are incorporated by reference in this chapter of rules:

(3-17-22)

**01. ASAM**. American Society of Addiction Medicine (ASAM) Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions, Third Edition, 2013. A copy of this manual is available by mail at the American Society of Addiction Medicine, 4601 North Park Ave., Suite 101, Chevy Chase, MD 20815; by telephone and fax, (301) 656-3920 and (301) 656-3815 (fax); or on the internet at http://www.asam.org. (3-17-22) **02. DSM-5**. American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, (DSM-5) Washington, DC, American Psychiatric Association, 2000. Copies of the manual are available from the American Psychiatric Association, 1000 Wilson Boulevard, Suite 1825, Arlington VA 22209-3901.

(3 17 22)

03. Federal Guidelines for Opioid Treatment Programs (OTP). Substance Abuse and Mental Health Services Administration. HHS Publication No. (SMA) PEP15 FEDGUIDEOTP, March 2015. Center for Substance Abuse Treatment, Division of Pharmacologic Therapies for the Substance Abuse and Mental Health Services Administration, 1 Choke Cherry Road, Rockville, MD 20857. This manual is available on the internet at https://store.samhsa.gov/product/Federal Guidelines for Opioid Treatment Programs/PEP15 FEDGUIDEOTP.

(3-17-22)

#### **005.** -- 008. (RESERVED)

#### 009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.

**01. Criminal History and Background Check.** All employees, volunteers, interns, and contractors of substance use disorder treatment and recovery support services must comply with the provisions of IDAPA 16.05.06, "Criminal History and Background Checks. (3 17 22)

**02. Availability to Work or Provide Service**. An individual listed in Subsection 009.01 of this rule is available to work on a provisional basis at the discretion of the employer or agency once the individual has submitted their completed criminal history and background check application, it has been 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 their criminal history and background check. (3 17 22)

**a.** An individual is allowed to work or have access to participants only under supervision until the criminal history and background check is completed. (3 17 22)

**b.** An individual, who does not receive a criminal history and background check clearance or have a Behavioral Health waiver granted under the provisions in Subsection 009.03 of this rule, must not provide direct care or services, or serve in a position that requires regular contact with participants. (3-17-22)

#### 031. Waiver of Criminal History and Background Check Denial.

**a.** A certified or uncertified individual who is seeking to provide Peer Support Specialist, Family Support Partner, or Recovery Coach services that receives an unconditional denial or a denial after an exemption review by the Department's Criminal History Unit, may apply for a Behavioral Health waiver. (3-17-22)

**b.** An individual is allowed to work or have access to participants only under supervision until the waiver request is processed. (3-17-22)

<b>010. DEFINITIONS - A THROUGH F.</b> For the purposes of these rules, the following terms apply:				
01.	Adolescent. A youth twelve (12) through seventeen (17) years of age.	(3-17-22)		

**02.** Adult. An individual eighteen (18) years or older. (3-17-22)

**03. ASAM**. Refers to the manual of the patient placement criteria for the treatment of substance-related disorders, published by the American Society of Addiction Medicine, incorporated by reference in Section 004 of these rules. (3-17-22)

**04. ASAM Level of Care Certification**. Verifies a treatment program's capacity to deliver services consistent with the Level III standards of care described in the ASAM criteria. (3-17-22)

#### DEPARTMENT OF HEALTH AND WELFARE Substance Use Disorders Services

(3-17-22)

**05. Clinical Assessment**. The gathering of historical and current clinical information through a clinical interview and from other available resources to identify an individual's strengths, weaknesses, problems, needs, and determine priorities so that a service plan can be developed. (3-17-22)

**06. Clinical Judgment**. Refers to observations and perceptions based upon education, experience, and elinical assessment. This may include psychometric, behavioral, and elinical 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 substance use disorders service needs. (3-17-22)

**075. Department**. The Idaho Department of Health and Welfare or its designee. (3-17-22)

**086.** Eligibility Screening. The collection and review of information directly related to the individual's substance use and level of functioning, which the Department uses to determine whether an individual is eligible for adult or adolescent substance use disorder services available through the Department's Division of Behavioral Health. (3-17-22)

09.Federal Poverty Guidelines. Guidelines issued annually by the Federal Department of Health and<br/>Human Services establishing the poverty income limits. The federal poverty guidelines for the current year may be<br/>found at: http://aspe.hhs.gov/poverty/.(3-17-22)

#### 011. **DEFINITIONS - G THROUGH Z.**

For the purposes of these rules, the following terms apply:

**01. Idaho Board of Alcohol/Drug Counselor Certification, Inc. (IBADCC)**. A board affiliated with the International Certification Reciprocity Consortium/Alcohol and Other Drug Abuse (ICRC) and the National Certification Commission for Addiction Professionals (NCCAP). The IBADCC is the certifying entity that oversees credentialing of Idaho Student of Addiction Studies (ISAS), and Certified Alcohol/Drug Counselors (CADC) in the state of Idaho and accepts certification from both the ICRC and the NCCAP. (3-17-22)()

**02. Individualized Service Plan**. A written action plan based on an eligibility screening and clinical assessment, that identifies the individual's clinical needs, the strategy for providing services to meet those needs, treatment goals and objectives and the criteria for terminating the specified interventions. (3 17 22)

**03.** Intensive Outpatient Services. Educational classes and individual or group counseling consisting of regularly scheduled sessions within a structured program, for a minimum of nine (9) hours of treatment per week for adults and six (6) hours of treatment per week for adolescents. (3-17-22)

04.Medication-Assisted Treatment (MAT). The use of medications, approved by the Food and Drug<br/>Administration (FDA), in combination with counseling and behavioral therapies, to provide a whole-patient approach<br/>to the treatment of substance use disorders.(3-17-22)

05. Network Treatment Provider. Any provider, group of providers, or entity that has a network provider agreement with the Department's Division of Behavioral Health contractor to provide behavioral health services. (3 17 22)

**06. Opioid Treatment Program (OTP)**. A program that provides MAT for persons diagnosed with opioid use disorder (OUD). OTPs provide all FDA approved MAT medications. In addition, participants receiving MAT medications must also receive counseling and other behavioral therapies to provide participants with a whole-person approach. (3-17-22)

**07. Outpatient Services.** Educational classes and individual or group counseling consisting of regularly scheduled sessions within a structured program for up to eight (8) hours of treatment per week for adults and five (5) hours of treatment per week for adolescents. (3 17 22)

**082. Priority Population**. Priority populations consist of individuals who receive services ahead of other persons. Priority populations are determined yearly by the Department and align with federally mandated priorities. (3-17-22)

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**09. Recovery Support Services.** Non clinical services designed to initiate, support, and enhance recovery. These services may include: safe and sober housing, transportation, child care, life skills education, drug testing, recovery coaching, and case management. (3-17-22)

10.Residential Treatment Services: A planned and structured regimen of treatment provided in a 24-<br/>hour residential setting. Residential programs serve individuals who, because of function limitations need safe and<br/>stable living environments and 24 hour care.(3 17 22)

**11. Substance-Related Disorders**. Clinical presentations due to substance use that may or may not demonstrate sufficient signs or symptoms to substantiate a diagnosis of a substance use disorder. (3 17 22)

12. Substance Use Disorder. A disorder evidenced by a cluster of cognitive, behavioral, and physiological symptoms indicating that the individual continues using a substance despite significant substance related problems. According to the DSM-5, diagnosis of a substance use disorder is based on a pathological pattern of behaviors related to use of the substance. (3-17-22)

012. -- 099. (RESERVED)

#### PARTICIPANT ELIGIBILITY (Sections 100-199)

#### 100. ACCESSING SUBSTANCE USE DISORDERS SERVICES.(RESERVED)

Individuals may access substance use disorders services administered by the Department's Division of Behavioral Health through an eligibility screening. (3-17-22)

#### (BREAK IN CONTINUITY OF SECTIONS)

**103.** NOTICE OF CHANCES IN ELICIBILITY FOR SUBSTANCE USE DISORDERS SERVICES. The Department may, upon ten (10) days' written notice, reduce, limit, suspend, or terminate eligibility for substance use disorders services. (3-17-22)

#### **104.** NOTICE OF DECISION ON ELICIBILITY AND RIGHT TO APPEAL.

01. Notification of Eligibility Determination. Within two (2) business days of receiving a completed screening, the Department will notify the individual or the individual's designated representative of its eligibility determination. When the individual is not eligible for services through the Department, the individual or the individual or the individual's designated representative will be notified in writing. (3-17-22)

02. Notice of Right to Appeal. When the individual is not eligible for services through the Department, the Department will notify the individual or the applicant's individual's designated representative. The written notice will include: (3 17 22)

of the decision and the concise reasons for it;	<del>(3-17-22)</del>
	of the decision and the concise reasons for it;

**b.** The process and timeline for pursuing an appeal of the decision under IDAPA 16.05.03, "Contested Case Proceedings and Declaratory Rulings"; and; (3-17-22)

e. The right to be represented on appeal. (3-17-22)

10<u>5</u>. -- 119. (RESERVED)

#### (BREAK IN CONTINUITY OF SECTIONS)

#### SUBSTANCE USE DISORDER SERVICES (Sections 200-600)

#### 200. QUALIFIED SUBSTANCE USE DISORDERS PROFESSIONAL PERSONNEL REQUIRED.

Each behavioral health program providing substance use disorders services must employ the number and variety of staff needed 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 behavioral health program location. A qualified substance use disorders professional includes individuals with the as followings qualifications:  $\frac{(3-17-22)(\dots)}{(3-17-22)(\dots)}$ 

01. Idaho Board of Alcohol/Drug Counselor Certification - Certified Advanced or Certified Alcohol/Drug Counselor. (3-17-22)

02. Northwest Indian Alcohol/Drug Specialist Certification – Counselor II or Counselor III. (3-17-22)

032. National Board for Certified Counselors (NBCC) - Master Addictions Counselor (MAC). (3-17-22)

04. Clinical Social Worker (LCSW) or Masters Social Worker (LMSW).-Licensed under Title 54, Chapter 32, Idaho Code; (3-17-22)

<del>05.</del> <del>Title 54, Chapte</del>	Marriage and Family Therapist or Associate Marriage and Family Therapis r 34, Idaho Code;	<b>it</b> Licensed under (3-17-22)
<del>06.</del>	Nurse Practitioner. Licensed under Title 54, Chapter 14, Idaho Code;	<del>(3-17-22)</del>
<del>07.</del>	Clinical Nurse Specialist. Licensed under Title 54, Chapter 14, Idaho Code;	<del>(3-17-22)</del>

- **08.** Physician Assistant. Licensed under Title 54, Chapter 18, Idaho Code; (3-17-22)
- 09. Professional Counselor (LPC) or Clinical Professional Counselor (LCPC). Licensed under Title 54, Chapter 34, Idaho Code; (3-17-22)

<del>10.</del>	Psychologist or Psychologist Extender. Licensed under Title 54, Chapter 23, Idaho	<del>Code;</del> <del>(3-17-22)</del>
<del>11.</del>	Physician. Licensed under Title 54, Chapter 18, Idaho Code; and;	<del>(3-17-22)</del>
<del>12.</del>	Registered Nurse (RN). Licensed under Title 54, Chapter 14, Idaho Code.	<del>(3-17-22)</del>
<del>13.</del>	Pharmaeist. Licensed under Title 54, Chapter 17, Idaho Code.	<del>(3-17-22)</del>

**03. Licensed Professional.** Hold an active license or registration with the applicable jurisdiction for the profession and provide services within the practice authority for the applicable profession consistent with the laws and regulations of the state where services are provided and consistent with the applicable standard of care. (

#### 201. -- 209. (RESERVED)

#### 210. QUALIFIED SUBSTANCE USE DISORDERS PROFESSIONAL TRAINEE.

Each qualified substance use disorders professional trainee practicing in the provision of substance use disorders services must meet the following requirements. (3-17-22)

**01.** Work Qualifications for Qualified Substance Use Disorders Professional Trainee. A qualified substance use disorders professional trainee must meet one (1) of the following qualifications to begin work:

(3-17-22)

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a. Substance Use Disorder Associate certification; (3-17-22)

b. Formal documentation as a Northwest Indian Alcohol/Drug Specialist Counselor I; or (3-17-22)

**eb.** Formal documentation of current enrollment in a program for <u>qualifications in any licensed</u> <u>professional consistent with</u> Section 200 of these rules. (3-17-22)()

**02. Continue as Qualified Substance Use Disorders Professional Trainee**. An individual who has completed a program listed in Section 200 of these rules and is awaiting licensure can continue as a qualified substance use disorders professional trainee at the same agency for a period of six (6) months from the date of program completion. (3-17-22)

#### 211. -- <del>299.</del> (RESERVED)

#### **300. SERVICES FOR ADOLESCENTS.**

Behavioral health programs providing substance use disorders treatment to adolescents must comply with the following requirements: (3-17-22)

**01. Separate Services From Adults**. Each program providing adolescent program services must provide the services separate from adult program services. The program must ensure the separation of adolescent participants from adult participants except as specified in Subsections 300.03 and 300.04 of this rule. (3-17-22)

02. Residential Care as an Alternative to Parental Care. Any program that provides eare, control, supervision, or maintenance of adolescents for twenty-four (24) hours per day as an alternative to parental care must meet the following criteria: (3-17-22)

<del>a.</del>	Be licensed under the "Child Care Licensing Act," Title 39, Chapter 12, Idaho Code; or	<del>(3-17-22)</del>
<del>b.</del>	Be certified by the Department of Juvenile Corrections.	<del>(3-17-22)</del>

**03. Continued Care of an Eighteen Year Old**. An adolescent who turns the age of eighteen (18), and is receiving outpatient or intensive outpatient treatment in a state-approved behavioral health program, may remain in the program under continued care described in this rule. The individual may remain in the program for: (3-17-22)

<del>a.</del>	Up to ninety (90) days after their eighteenth birthday; or	<del>(3-17-22)</del>
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**b.** Until the close of the current school year for an individual attending school. (3 17-22)

04. Documentation Requirements for Continued Care. Prior to accepting an individual into continued care, the program must assure and document the following; (3 17 22)

**a.** A signed voluntary agreement to remain in the program or a copy of a court order authorizing continued placement after the individual's eighteenth birthday; (3 17 22)

**b.** Clinical staffing for appropriateness of continued care with clinical documentation; (3-17-22)

e. Verification the individual in continued care was in the care of the program prior to their eighteenth birthday; and (3-17-22)

**d.** Verification that the individual needs to remain in continued care to complete treatment, education, or other similar needs. (3-17-22)

**05.** Licensed Hospital Facilities. Facilities licensed as hospitals under Title 39, Chapter 13, Idaho Code, are exempt from the requirements in this rule. (3-17-22)

#### <del>301. - 349.</del> (RESERVED)

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#### 350. RECOVERY SUPPORT SERVICES.

Recovery Support Services are administered through contract. Recovery Support Services are non-clinical services that support recovery from a substance use disorder and are based on an individual participant's needs. Recovery Support Services may include: (3-17-22)

<del>01.</del>	Case Management.	<del>(3-17-22)</del>
<del>02.</del>	Alcohol and Drug Screening.	<del>(3-17-22)</del>
<del>03.</del>	Child Care.	<del>(3-17-22)</del>
<del>04.</del>	Transportation.	<del>(3-17-22)</del>
<del>05.</del>	Life Skills.	<del>(3-17-22)</del>
<del>06.</del>	Recovery Residence-Staffed Safe and Sober Housing for Adults.	<del>(3-17-22)</del>
<del>07.</del>	Recovery Residence Enhanced Staffed Safe and Sober Housing for Adults.	<del>(3-17-22)</del>
<del>08.</del>	Recovery Coaching.	<del>(3-17-22)</del>

**351.**—**394.** (RESERVED)

#### **395. RESIDENTIAL TREATMENT SERVICES.**

**01.** Residential Treatment Services. Residential Treatment Services are administered under the Department through a contractor and must be nationally accredited by the Joint Commission, the Council on Accreditation (COA), or Commission on Accreditation of Rehabilitation Facilities (CARF) and have an ASAM Level of Care certification. (3-17-22)(\_\_\_\_)

**02.** Licensed for Adolescent Residential Treatment. Each adolescent residential treatment program must be licensed as a Children's Residential Care Facility under IDAPA 16.06.02, "Child Care Licensing." (3-17-22)

#### **396.** -- **409.** (RESERVED)

#### 410. OUTPATIENT TREATMENT SERVICES.

Outpatient substance use disorder treatment services are contained in the Medicaid Idaho Behavioral Health Plan (IBHP) and delivered under contract. (3-17-22)

<del>01.</del>	Treatment Services.	Services	are	delivered	according	to ASAM	criteria	and	Level of Care
Placement guide	lines. Services include:				Ū				<del>(3-17-22)</del>
<del>8.</del>	Assessments;								<del>(3-17-22)</del>

<del>b.</del>	Service planning and placement;	<del>(3-17-22)</del>
e <del>.</del>	Group therapy; and	<del>(3-17-22)</del>

**02.** Treatment Providers. Outpatient treatment services are delivered by network providers enrolled with the Medicaid IBHP contractor. (3-17-22)

#### 411.--414. (RESERVED)

#### 415. MEDICATION ASSISTED TREATMENT.

01. Medication Assisted Treatment Services. A behavioral health program providing medication

assisted treatment for substance use disorders must make counseling and behavioral therapies available in combination with MAT services. (3 17 22)

02.Opioid Treatment Program. OTP must meet all requirements established under 42 CFR, Section8.12, Federal Opioid Treatment Standards.(3 17 22)

#### QUALITY ASSURANCE AND INSPECTIONS (Sections 416-419)

#### 416. INSPECTIONS.

As the State substance abuse authority, the Department will periodically inspect substance use disorder services providers or programs as provided in Section 39-305, Idaho Code, to determine compliance with these rules and Title 39, Chapter 3, Idaho Code. (3-17-22)

01. Department Inspection. The Department may inspect a substance use services provider or program at any reasonable time during regular business hours. Inspections may be made without prior notice to the substance use services provider or program. (3 17 22)

**02. Program Compliance with Inspection**. The program or provider must, in compliance with federal and state confidentiality requirements, provide for review of participant treatment records, behavioral health records, logbooks, staffing charts, time reports, claims data, administrative documents, complaints, grievances, and any other requested documents or data required by the Department. (3-17-22)

03.Department Protection of Participants. The Department will take steps to protect individuals<br/>receiving substance use disorder services during its inspections.(3-17-22)

#### 417. INVESTIGATIONS AND FINDINGS.

The Department may conduct inspections as provided in Section 416 of these rules, to investigate complaints, incidents, accidents, allegations of abuse, neglect, or exploitation. If the Department chooses to investigate, the investigation and a report of the Department's findings must be completed within thirty (30) calendar days of the date the Department learned of the complaint, incident, accident, or allegation. The Department may take any of the following actions:

**01.** Corrective Action Plan. Require the substance use disorders services provider, program, or the Department contractor administering the provider network to engage in a corrective action plan as determined and monitored by the Department or the contractor administering the provider network; or (3-17-22)

**02. Program Improvement Plan**. Require the substance use disorder services provider, program, or the Department contractor administering the provider network to develop a program improvement plan to be implemented and monitored over time. (3-17-22)

#### 418. NOTICES FOLLOWING INVESTIGATION.

Within thirty (30) calendar days of the date the Department learned of the complaint, incident, accident, or allegation, the Department must issue a notice to the provider, program, or the contractor administering the provider network. The notice must include: (3-17-22)

01. Statement of Department Findings. A statement of the Department's findings about whether the program, provider, or contractor is in compliance with these rules or has engaged in abuse, neglect, or exploitation; or whether an incident or accident occurred; (3-17-22)

**02. Department Plan Requirement**. Whether the Department will require a corrective action plan or program improvement plan; (3-17-22)

**03. Department Notifications**. Whether the Department will be notifying the program or provider's accrediting entity or licensing authority, if applicable; and (3-17-22)

04. Appealing the Decision. The process and timeline for appealing the decision under IDAPA

#### DEPARTMENT OF HEALTH AND WELFARE Substance Use Disorders Services

**02.** Notification of Licensing Authority. Must notify the licensing authority of any provider that must be licensed, of the Department decision. program or (3-17-22)

**420.**—999. (RESERVED)

of the Department decision; and

<del>01.</del>

**419**.

16.05.03, "Contested Case Proceedings and Declaratory Rulings."

When the Department issues a notice requiring corrective action or a program improvement plan, the Department: (3 17 22)Notification of Accrediting Entity. May notify the program or provider's accrediting entity, if any, (3-17-22)

**NOTIFICATION TO ACCREDITING OR LICENSING AUTHORITY.** 

Docket No. 16-0717-2401 Proposed Rulemaking

(3-17-22)