

Substance Use Disorder Facilities

Overview of Proposed Licensure ARM Revisions

Licensing Rules – Revised/Updated

- Align with current ASAM Criteria
- Submitted to ASAM for review
- Cleaned up language/formatting
- Consistency between programs
- State approval rules

Levels of Care

Current

- Inpatient
 - ASAM III.7 & ASAM III.5
- Community Based Social Detoxification
 - ASAM III.7D & ASAM III.2D
- Clinically Managed Medium Intensity Residential Treatment/ Halfway House Parent/Child
 - ASAM III.3
- Clinically Managed High/Low Intensity Residential Treatment/ Halfway House Single Gender
 - ASAM III.5 & ASAM III.1
- Day Treatment/Intensive Outpatient/Outpatient
 - State approval rules don't identify ASAM LOC

Proposed

- Medically Monitored Intensive Inpatient
 - ASAM 3.7
- Clinically Managed High Intensity Residential
 - ASAM 3.5
- Clinically Managed Population-specific High Intensity Residential
 - ASAM 3.3
- Clinically Managed Low Intensity Residential
 - ASAM 3.1
- Medically Monitored Withdrawal Management
 - ASAM 3.7WM
- Clinically Managed Residential Withdrawal Management
 - ASAM 3.2WM
- SUD Partial Hospitalization
 - ASAM 2.5
- SUD OP Center

ASAM 3.7

Current

- Physician, NP, PA – Exam and Screening within 24 hours of admission
- RN – on-site or on call 24/7
- Physician available for medical consultation
- Family Services made available
- Direct affiliation with acute care hospital
- Daily scheduled professional services – medical, medication management, individual, group, family and educational services.

Proposed

- Medical Director to oversee written protocols, medication management and all medical services
- Physician, APRN, NP or PA on-call 24/7 to provide medical consultation, evaluate patients and prescribe medication
- RN on-site or on call 24/7
- Additional RNs, LPNs or CNAs in sufficient number to assist in medical protocols and patient safety
- LACs or MHPs in sufficient number to provide counseling and therapy
- LAC or MHP on-site or on-call at least 16 hours per day
- Care Managers in sufficient numbers
- Rehab aides 24/7
- Physical exam within 24 hours on-site by physician, NP, or PA
- Comprehensive nursing assessment at admit
- Medication management
- Daily clinical and medical services on-site
- Daily recreational activities

ASAM 3.5

Current

Inpatient III.5

- Licensed physician, PA, NP, RN to conduct an assessment and evaluation within 72 hours of admission
- Nurse – on-site or on call 24/7
- Daily Services – Medical, nursing, individual and group counseling, psychotherapy, family therapy, educational groups, occupational and recreational therapies, art, music, or movement therapies, PT, vocational rehabilitation activities.

Halfway House III.5

- 24-hour staffing patterns or security patterns
- On-or-off site treatment services
- 24-hour telephone consultation with licensed clinician
- May include LAC, individuals trained in co-occurring disorders, rehab aides, case managers
- Services requirements policy – admission criteria indicating appropriateness for setting, how treatment needs identified and addressed, daily life skills, independent living, special needs such as legal services, medical care, transportation and safe visitation.

Proposed

- Clinical director
- LACs or MHPs in sufficient number to provide counseling and therapy
- LAC or MHP on-site or on call 24/7
- Care Managers in sufficient numbers
- Rehabilitation aides 24/7
- Daily scheduled treatment services on-site, 7 hours per day
- Daily recreational activities

ASAM 3.3

Current

- Incorrectly includes parent/child homes
- 24-hour staffing patterns or security patterns
- 24-hour telephone consultation with a licensed clinician
- On-or-off site treatment services
- May include LAC, Individuals trained in co-occurring disorders
- Case managers
- Rehab aides
- Delivery of ASAM Level 111.3 on-or-off site
- Policies describing – admission criteria, how treatment needs of parent/child identified & addressed, life skills, coordinate services such as childcare, services for child, safe visitation.

Proposed

- Clinical director
- Provide specialized services to individuals with significant cognitive deficits
- LACs or MHPs in sufficient number to provide counseling and therapy
- LAC or MHP on-site or on call 24/7
- Care managers
- Rehab Aides 24/7
- Daily treatment services on-site by a LAC or MHP adapted to the patient's developmental stage and level of comprehension in accordance with individualized treatment plan.

ASAM 3.1

Current

- Referenced several ways in current rule:
 - Clinically managed low intensity residential treatment
 - Halfway House Community-Based Residential Treatment
 - Community-based residential sober housing homes
- ASAM Level 111.1
- Staffing or security patterns
- May include LAC, Case manager, Rehab Aide
- Services requirement policies – admission & length of stay criteria defining appropriateness of setting
- All treatment generally off-site in community-based agencies
- Designed and focused on helping individuals with limited skills and focus on helping achieve employment, maintain daily work schedule, support group meetings, assigned treatment sessions, learning how to live in the community.

Proposed

- Clinical Director
- LAC or MHP to provide counseling and therapy
- Care managers
- Rehab Aides 24/7
- Skilled treatment services 5 hours per week
- Life skills training provided in one-on-one or classroom setting, as part of daily living regiment
 - Must utilize an EBP addressing independent living skills, vocational skills and parenting skills

ASAM 3.7WM

Current

- 24-inpatient care
- Under supervision of licensed physician
- Licensed physician available 24/7 to evaluate clients and prescribe medication
- Staff in sufficient number to respond to SUD and co-occurring disorders
- RN responsible for supervising nursing services and administer detox protocols
- Support staff such as LPN's, CNA's and rehab aides in sufficient number to assure safety of clients
- Service requirements: Written agreement with state approved program to provide ongoing treatment after detox
- Medication administration and on-going assessment

Proposed

- Must be licensed as ASAM 3.7 Facility and meet all requirements of ASAM 3.7
- Need physician approved protocols for WM
- RN on-site 24/7
- Additional facility and equipment requirements

ASAM 3.2WM

Current

- Physician approved protocols for monitoring clients in withdrawal
- Written agreement with the health care facility or physician providing emergency services
- Sufficient staff on duty trained in CPR and detox protocols
- If medication provided – staff trained in medication administration
- Service requirements: initial physical examination by a qualified professional assuring client can be detoxified in nonmedical setting
- Regular vital signs
- Meals and snacks
- Written agreement with approved provider assuring acceptance of client upon discharge

Proposed

- Must be licensed as inpatient or residential health care facility defined in 50-5-101 MCA
- Physician approved protocols for monitoring patients with withdrawal
- Written agreement with health care facility or physician providing emergency services when needed
- 24/7 staff trained on physician approved protocols and medication management if administered
- LACs or MHPs in sufficient number to provide counseling and therapy
- BH assessment reviewed by physician, NP, PA at admission
- Daily clinical services to address needs of patient such as: medical services, individual group therapy and withdrawal support as required in the individualized treatment plan.
- Regular vital signs

ASAM 2.5

Current

LACs in sufficient number to serve clients

Sufficient staff coverage 24 hours per day, 7 days per week

Direct access to medical, psychiatric, and laboratory services

Proposed

- Clinical Director
- LAC or MHP in sufficient numbers to provide counseling and therapy
- Minimum 20 hours per week of treatment services (document if unable to meet hourly requirement)
- Care manager
- Care managers and Rehab Aides in sufficient numbers
- Direct access to medical, psychiatric, and laboratory services
- Coordination of necessary services

SUD OP Center

Current

LACs in sufficient number to serve clients (ASAM 2.1/1.0)
Staff availability 24 hours per day, 7 days per week (ASAM 2.1/1.0)
Appropriate referrals (ASAM 2.1/1.0)
Referral, transfer, discharge, aftercare, and follow-up services that ensure a continuity of care. (ASAM 2.1)
Care is updated and evaluated monthly (ASAM 2.1)
Treatment plan and staffing every 30 days (ASAM 1.0)

Proposed

- Includes OP/IOP, but does not mention ASAM 2.1/1.0
- Clinical Director
- LACs or MHPs in sufficient number to provide therapy and counseling services
- Care Managers and Rehab Aides in sufficient numbers
- Skilled treatment services by interdisciplinary team
- Coordination of necessary services

Questions/Comments

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