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**IDAPA 16
TITLE 07
CHAPTER 17**

16.07.17 - ALCOHOL AND SUBSTANCE USE DISORDERS SERVICES

000. LEGAL AUTHORITY.

The Idaho Legislature has delegated to the Board of Health and Welfare, the responsibility to ensure that clinically necessary alcohol and substance use disorder services are available throughout the state of Idaho to individuals who meet certain eligibility criteria under the Alcoholism and Intoxication Treatment Act, Title 39, Chapter 3, Idaho Code. Under Section 39-311, Idaho Code, the Board of Health and Welfare is authorized to promulgate rules to carry out the purpose and intent of the Alcoholism and Intoxication Treatment Act. Under Section 39-304, Idaho Code, the Department is authorized to establish a comprehensive and coordinated program for the treatment of alcoholics, intoxicated persons, and drug addicts to carry out the purposes and intent of the Alcoholism and Intoxication Treatment Act. Section 56-1003, Idaho Code authorizes the Director of the Department to administer services dealing with the problem of alcoholism and the rehabilitation of persons suffering from alcoholism. (5-8-09)

001. TITLE AND SCOPE.

01. Title. The title of these rules is, IDAPA 16.07.17, "Alcohol and Substance Use Disorders Services." (5-8-09)

02. Scope. This chapter defines the scope of voluntary services administered under the Department's Division of Behavioral Health, and describes the eligibility criteria, application requirements, individualized treatment plan requirements, selection of providers, and appeal process under these rules. This chapter is not intended to and does not establish an entitlement for or to receive adult or adolescent alcohol or substance use disorder services, nor is it intended to be applicable to individuals ordered by the court to receive alcohol or substance use disorder services. (5-8-09)

002. WRITTEN INTERPRETATIONS.

There are no written interpretations for these rules. (5-8-09)

003. ADMINISTRATIVE APPEALS.

01. Appeal of Denial Based on Eligibility Criteria. Administrative appeals from a denial of alcohol and substance use disorder services based on eligibility criteria and priority population are governed by the provisions of IDAPA 16.05.03, "Rules Governing Contested Case Proceedings and Declaratory Rulings." (5-8-09)

02. Appeal of Decision Based on Clinical Judgement. All decisions involving clinical judgment, including the category of services, the particular provider of services, or the duration of services, are reserved to Department, and are not subject to appeal, administratively or otherwise, in accordance with *Maresh v. State*, 132 Idaho 221, 970 P.2d 14 (Idaho 1999). (5-8-09)

004. INCORPORATION BY REFERENCE.

The following are incorporated by reference in this chapter of rules: (5-8-09)

01. ASAM PPC-2R. American Society of Addiction Medicine (ASAM) Patient Placement Criteria for the Treatment of Substance-Related Disorders, Second Edition - Revised (ASAM PPC-2R). 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>. (5-8-09)

02. DSM-IV-TR. American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision (DSM-IV-TR) Washington, DC, American Psychiatric Association, 2000. Copies of the manual are available from the American Psychiatric Association, 1400 K Street, N.W., Washington, DC, 20005. 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. (5-8-09)

005. OFFICE -- OFFICE HOURS -- MAILING ADDRESS -- STREET ADDRESS -- TELEPHONE NUMBER -- INTERNET WEB SITE.

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. (5-8-09)

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. (5-8-09)

03. Street Address. The business office of the Idaho Department of Health and Welfare is located at 450 West State Street, Boise, Idaho 83702. (5-8-09)

04. Telephone. The telephone number for the Idaho Department of Health and Welfare is (208) 334-5500. (5-8-09)

05. Internet Web Site. The Department's internet website at <http://www.healthandwelfare.idaho.gov>. (5-8-09)

006. CONFIDENTIALITY OF RECORDS AND PUBLIC RECORDS REQUESTS.

01. Confidential Records. Any information about an individual covered by these rules and contained in the Department's records must comply with IDAPA 16.05.01, "Use and Disclosure of Department Records." (5-8-09)

02. Public Records. The Department will comply with Sections 9-337 through 9-350, Idaho Code, when requests 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. (5-8-09)

007. -- 008. (RESERVED)

009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.

01. Compliance With Department Criminal History and Background Check. All current Department employees, applicants, transfers, reinstated former employees, student interns, contract employees, volunteers, and others assigned to programs that involve direct contact with children or vulnerable adults as described in Section 39-5302, Idaho Code, must comply with the provisions in IDAPA 16.05.06, "Criminal History and Background Checks." (5-8-09)

02. Availability to Work or Provide Service. Certain individuals are allowed to provide services after the self-declaration is completed as provided in Section 56-1004A, Idaho Code, except when they have disclosed a designated crime listed in IDAPA 16.05.06, "Criminal History and Background Checks." The criminal history check requirements applicable to each provider type are found in the rules that state the qualifications or certification of those providers. (5-8-09)

010. DEFINITIONS.

For the purposes of these rules, the following terms are used as defined below: (5-8-09)

01. Adolescent. An individual between the ages of fourteen (14) and eighteen (18). (5-8-09)

02. Adult. An individual eighteen (18) years or older. (5-8-09)

03. Applicant. An adult or adolescent individual who is seeking alcohol or substance use disorders services through the Department who has completed or had completed on his behalf an application for alcohol or substance use disorder services. (5-8-09)

04. ASAM PPC-2R. Refers to the second edition, revised, manual of the patient placement criteria for the treatment of substance-related disorders, published by the American Society of Addiction Medicine. (5-8-09)

- 05. Biopsychosocial Assessment.** Those procedures by which a substance use disorder clinician evaluates an individual's strengths, weaknesses, problems, needs, and determines priorities so that a treatment plan can be developed. (5-8-09)
- 06. Child.** An individual under the age of 14. (5-8-09)
- 07. Client.** A person receiving treatment for an alcohol or substance use disorder. The term "client" is synonymous with the terms: patient, resident, consumer, or recipient of treatment. (5-8-09)
- 08. Clinical Judgment.** Refers to observations and perceptions based upon education, experience, and clinical assessment. This may include psychometric, behavioral, and clinical interview assessments that are structured, integrated, and then used to reach decisions, individually or collectively, about an individual's functional, mental, and behavioral attributes and alcohol and substance use disorders service needs. (5-8-09)
- 09. Clinical Necessity.** Alcohol or substance use disorder services are deemed clinically necessary when the Department, in the exercise of clinical judgment, would recommend services to an applicant for the purpose of evaluating, diagnosing, or treating alcohol or substance use disorders that are: (5-8-09)
- a.** Clinically appropriate, in terms of type, frequency, extent, site and duration, and considered effective for treating the applicant's alcohol or substance use disorder; and (5-8-09)
- b.** Not primarily for the convenience of the applicant or service provider and not more costly than an alternative service or sequence of services and at least as likely to produce equivalent therapeutic or diagnostic results as to the diagnosis or treatment of the applicant's alcohol or substance use disorder. (5-8-09)
- 10. Clinical Team.** A proposed client's clinical team may include: qualified clinicians, behavioral health professionals, professionals other than behavioral health professionals, behavioral health technicians and any other individual deemed appropriate and necessary to ensure that the assessment and subsequent treatment is comprehensive and meets the needs of the proposed client. (5-8-09)
- 11. Clinically Managed High-Intensity Residential Treatment.** Frequently referred to as long term residential care or a Therapeutic Community, twenty-four (24) hour intensive residential program designed to treat persons who have significant social and psychological problems. Individuals who are appropriate for this level of care typically have multiple deficits, which may include criminal activity, psychological problems, impaired functioning and disaffiliation from mainstream values. (5-8-09)
- 12. Clinically Managed Low-Intensity Residential Treatment.** Is a program that offers at least five (5) hours per week of outpatient or intensive outpatient treatment services along with a structured recovery environment, staffed twenty-four (24) hours per day, which provides sufficient stability to prevent or minimize relapse or continued use. This level of care is also known as a Halfway House. (5-8-09)
- 13. Clinically Managed Medium-Intensity Residential Treatment.** Frequently referred to as residential care, programs provide a structured, twenty-four (24) hour intensive residential program for clients who require treatment services in a highly structured setting. This type of program is appropriate for clients who need concentrated, therapeutic services prior to community residence. Community reintegration of residents in this level of care requires case management activities directed toward networking clients into community-based recovery support services such as housing, vocational services or transportation assistance so that the client is able to attend mutual/self-help meetings or vocational activities after discharge. (5-8-09)
- 14. Contracted Intermediary.** A third party contractor of the Department who handles direct contracting with network providers for treatment services to include network management, claims payment, data gathering per Federal and State requirements and census management. (5-8-09)
- 15. Department.** The Department of Health and Welfare or a person authorized to act on behalf of the Department. (5-8-09)

16. Early Intervention Services. Early intervention services are designed to explore and address an adolescent's problems or risk factors that appear to be related to substance use, i.e., alcohol, tobacco, or other drugs, and to assist the adolescent in recognizing the harmful consequences of substance use. Early intervention services are intended to be a combination of prevention and treatment services for at-risk youth. (5-8-09)

17. Emergency. An emergency exists if an adult or adolescent individual is gravely disabled due to mental illness or substance abuse or dependence or there is a substantial risk that physical harm will be inflicted by the proposed client: (5-8-09)

a. Upon his own person, as evidenced by threats or attempts to commit suicide or inflict physical harm on himself; or (5-8-09)

b. Upon another person as evidenced by behavior which has caused such harm or which places another person or persons in reasonable fear of sustaining such harm. (5-8-09)

18. Federal Poverty Guidelines. Guidelines issued annually by the Federal Department of Health and Human Services establishing the poverty income limits. The federal poverty guidelines for the current year may be found at: <http://aspe.hhs.gov/poverty/>. (5-8-09)

19. Gravely Disabled. An adult or adolescent who, as a result of mental illness or substance abuse or dependence, is in danger of serious physical harm due to the person's inability to provide for any of his basic needs for nourishment, or essential medical care, or shelter or safety. (5-8-09)

20. Individualized Treatment Plan. A written action plan based on an intake eligibility screening and full clinical assessment, that identifies the applicant's clinical needs, the strategy for providing services to meet those needs, treatment goals and objectives and the criteria for terminating the specified interventions. (5-8-09)

21. Intake Eligibility Screening. The collection of data, analysis, and review, which the Department, or its designee, uses to screen and determine whether an applicant is eligible for adult or adolescent alcohol or substance use disorder services available through the Department. (5-8-09)

22. Intensive Outpatient Services. An organized service delivered by addiction professionals or addiction-credentialed clinicians, which provides a planned regimen of treatment 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. (5-8-09)

23. Medical Detoxification. Means medically supervised twenty-four (24) hour care for patients who require hospitalization for treatment of acute alcohol intoxication or withdrawal, from one (1) or more other substances of abuse, and other medical conditions which together warrant treatment in this type of setting. Length of stay varies depending on the severity of the disease and withdrawal symptoms. (5-8-09)

24. Network Treatment Provider. A treatment provider who has facility approval through the Department and is contracted with the Department's Management Service Contractor. A list of network providers can be found at the Department's website given in Section 005 of these rules. The list is also available by calling these telephone numbers: 1 (800) 922-3406; or dialing 211. (5-8-09)

25. Outpatient Services. An organized non-residential service, delivered in a variety of settings, in which addiction treatment personnel provide professionally directed evaluation and treatment for alcohol and substance use disorders. (5-8-09)

26. Priority Population. Priority populations are populations who receive services ahead of other persons and are determined yearly by the Department based on Federal regulations and input from the Interagency Committee on Substance Abuse Prevention and Treatment. A current list of the priority population is available from the Department. (5-8-09)

27. Recovery Support Services. These services include: safe and sober housing that is staffed; transportation; child care; family education; life skills education; marriage education; drug testing; peer to peer

mentoring; and case management. (5-8-09)

28. Residential Social Detoxification. Means a medically supported twenty-four (24) hour, social rehabilitation residential program which provides physical care, education, and counseling as appropriate for the client's health and safety during his process of physical withdrawal from acute alcohol intoxication or withdrawal, or from one or more other substances of abuse. Social detoxification provides access into care and treatment of alcohol or substance use disorders through monitored withdrawal, evaluation of present or potential alcohol or substance dependency and other physical ailments, and intervention into the progression of the disease through timely utilization or resources. Length of stay in a social detoxification program varies from three (3) to seven (7) days depending on the severity of the disease and withdrawal symptoms. (5-8-09)

29. Sliding Fee Scale. A scale used to determine an individual's cost for services based on Federal Poverty Guidelines and found in IDAPA 16.07.01, "Behavioral Health Sliding Fee Schedules." (5-8-09)

30. Substance Dependence. Substance dependence is marked by a cluster of cognitive, behavioral, and physiological symptoms indicating that the individual continues to use alcohol or other drugs despite significant related problems. The cluster of symptoms can include: tolerance; withdrawal or use of a substance in larger amounts or over a longer period of time than intended; persistent desire or unsuccessful efforts to cut down or control substance use; a great deal of time spent in activities related to obtaining or using substances or to recover from their effects; relinquishing important social, occupational or recreational activities because of substance use; and continuing alcohol or drug use despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been cause or exacerbated by such use as defined in the DSM-IV-TR. (5-8-09)

31. Substance-Related Disorders. Substance-related disorders include disorders related to the taking of alcohol or another drug of abuse, to the side effects of a medication and to toxin exposures. They are divided into two (2) groups: the Substance Use Disorders and the Substance-Induced Disorders as defined in the DSM-IV-TR. (5-8-09)

32. Substance Use Disorder. Includes Substance Dependence and Substance Abuse, according to the DSM-IV-TR. Substance Use Disorders are one (1) of two (2) subgroups of the broader diagnostic category of Substance-Related Disorders. (5-8-09)

33. Substantial Material Change in Circumstances. A substantial and material change in circumstances which renders the Department's decision denying alcohol and substance use disorders services arbitrary and capricious. (5-8-09)

011. -- 099. (RESERVED)

100. ACCESSING ALCOHOL AND SUBSTANCE DISORDERS SERVICES.

Adult and adolescent alcohol and substance disorders services may be accessed by eligible applicants through an application and request for an intake eligibility screening. (5-8-09)

101. INTAKE ELIGIBILITY SCREENING AND FULL CLINICAL ASSESSMENT.

01. Intake Eligibility Screening. A screening for eligibility for alcohol and substance use disorders services through the Department is based on meeting priority population and ASAM PPC-2R criteria as incorporated by reference in Section 004 of these rules. If an applicant meets this criteria he may be eligible for alcohol and substance use disorders services through the Department. Applicants not meeting this criteria will be referred to other appropriate community services. All applicants are required to complete an Application for Alcohol and Substance Use Disorders Services either over the telephone or in person at a network treatment provider site. If an applicant refuses to complete the application, the Department reserves the right to discontinue the screening process for eligibility. The intake eligibility screening must be directly related to the applicant's substance dependence or substance-related disorder and level of functioning, and will include: (5-8-09)

- a. Application for Alcohol or Substance Use Disorders Services, pending document approval; (5-8-09)

- b.** Notice of Privacy Practice; (5-8-09)
- c.** Fee Determination; and (5-8-09)
- d.** Authorization for Disclosure. (5-8-09)

02. Full Clinical Assessment. If the applicant is found eligible for alcohol and substance use disorders services after completion of the intake eligibility screening, the applicant will either be placed on a waiting list to receive a full clinical assessment or will have an appointment made to receive a full clinical assessment with a Department's network treatment provider. (5-8-09)

102. ELIGIBILITY DETERMINATION.

01. Determination of Eligibility for Alcohol and Substance Use Disorders Services. The total number of adults and adolescents who are eligible for alcohol or substance use disorders services through the Department will be established by the Department, in consultation with the Idaho Interagency Committee on Substance Abuse Prevention and Treatment. The Department may, in consultation with the Idaho Interagency Committee on Substance Abuse Prevention and Treatment, limit or prioritize adult and adolescent alcohol or substance use disorder services, define eligibility criteria, and establish the number of persons eligible based upon such factors as court-ordered services, availability of funding, the degree of financial need, the degree of clinical need, or other factors. (5-8-09)

02. Eligibility Requirements. To be eligible for alcohol and substance use disorders services through a voluntary application to the Department, the applicant must: (5-8-09)

- a.** Be an adult or adolescent with family income at or below two hundred percent (200%) of federal poverty guidelines; (5-8-09)
- b.** Be a resident of the state of Idaho; (5-8-09)
- c.** Be a member of the priority population; (5-8-09)
- d.** Meet diagnostic criteria for substance dependence, or a substance-related disorder as described in the DSM-IV-TR; and (5-8-09)
- e.** Meet specifications in each of the ASAM PPC-2R dimensions required for the recommended level of care. (5-8-09)

02. Admission to Treatment Program Requirements. In order to be admitted into an adult or adolescent alcohol or substance use disorders treatment program, there must be clinical evidence that provides a reasonable expectation that the applicant will benefit from the alcohol or substance use disorder services. (5-8-09)

03. Ineligible Conditions. An applicant who has epilepsy, an intellectual disability, dementia, a developmental disability, physical disability, mental illness, or who is aged, is not eligible for alcohol and substance use disorders services, unless, in addition to such condition, they meet primary diagnostic criteria for substance abuse, substance dependence, or a substance related disorder as described in the DSM-IV-TR and the specification in each of the ASAM PPC-2R dimensions required for the recommended level of care. (5-8-09)

103. NOTICE OF CHANGES IN ELIGIBILITY FOR ALCOHOL AND SUBSTANCE USE DISORDERS SERVICES.

The Department may, upon ten (10) days' written notice, reduce, limit, suspend, or terminate eligibility for alcohol or substance use disorders services. (5-8-09)

104. NOTICE OF DECISION ON ELIGIBILITY.

01. Notification of Eligibility Determination. Within two (2) business days of a receiving a completed intake eligibility screening and risk assessment for outpatient services, and one (1) business day for social

detoxification and residential treatment services; the Department, or its contracted intermediary, will notify the applicant or the applicant's designated representative in writing of its eligibility determination. The written notice will include: (5-8-09)

- a. The applicant's name and identifying information; (5-8-09)
- b. A statement of the decision; (5-8-09)
- c. A concise statement of the reasons for the decision; and (5-8-09)
- d. The process for pursuing an administrative appeal regarding eligibility determinations. (5-8-09)

02. Right to Accept or Reject Alcohol and Substance Use Disorders Services. If the Department, or its contracted intermediary, determines that an applicant is eligible for alcohol and substance use disorders services through the Department, an individual has the right to accept or reject alcohol and substance use disorders services offered by the Department, unless imposed by law or court order. (5-8-09)

03. Reapplication for Alcohol and Substance Use Disorders Services. If the Department determines that an applicant is not eligible for alcohol and substance use disorders services through the Department, the applicant may reapply after six (6) months or at any time upon a showing of a substantial material change in circumstances. Also, if the individual screened is found not to meet admission criteria, but is in need of other types of services, the Department, or its contracted intermediary, will refer the individual to an agency or department which provides the appropriate services needed. (5-8-09)

106. -- 199. (RESERVED)

200. INDIVIDUALIZED TREATMENT PLAN, SELECTION OF SERVICE PROVIDERS AND AVAILABLE TREATMENT SERVICES.

The Department's contracted treatment provider will prepare for every client an individualized treatment plan that addresses the alcohol or substance disorders health affects on the client's major life areas. The treatment plan will be based on a biopsychosocial assessment of the client's alcohol or substance use disorders treatment needs. (5-8-09)

01. Individualized Treatment Plan. Overall responsibility for development and implementation of the plan will be assigned to a qualified professional staff member within a Department contracted network treatment provider program. A detailed individualized treatment plan will be developed within fourteen (14) days following the Department's determination that an applicant is eligible for alcohol and substance use disorders services through the Department. The individualized treatment plan will include the following: (5-8-09)

- a. The services clinically necessary to meet the client's alcohol and substance use disorders needs; (5-8-09)
- b. Referrals for needed adjunct services that the alcohol and substance use disorders treatment program does not provide; (5-8-09)
- c. Goals that the client must achieve; (5-8-09)
- d. Specific objectives that relate to the goals, written in measurable terms, with targeted expected achievement dates; (5-8-09)
- e. Frequency of services; (5-8-09)
- f. Specific criteria to be met for discharge from treatment; and (5-8-09)
- g. A specific plan for including the family or significant others. (5-8-09)

02. Selection of Providers. The client can choose from among the array of substance use disorders treatment providers approved to provide services. The services must be within the recommended level of care

according to ASAM PPC-2R and based on needs identified in the biopsychosocial assessment and resultant individualized treatment plan. The client does not have the option of choosing his treatment provider if he is within the criminal justice system and specific providers have been identified for the client. (5-8-09)

03. Treatment Services Available. Available alcohol or substance use disorders treatment services, as defined in Section 010 of these rules, include: (5-8-09)

- a. Early intervention; (5-8-09)
- b. Outpatient services; (5-8-09)
- c. Intensive outpatient services; (5-8-09)
- d. Residential social detoxification; (5-8-09)
- e. Medical detoxification; (5-8-09)
- f. Clinically managed low-intensity residential treatment; (5-8-09)
- g. Clinically managed medium intensity residential treatment; and (5-8-09)
- h. Clinically managed high-intensity residential treatment. (5-8-09)

04. Treatment Services Not Available. Alcohol or substance use disorder treatment services, do not include: (5-8-09)

- a. Experimental or investigational procedures; (5-8-09)
- b. Technologies and related services; (5-8-09)
- c. Electroconvulsive therapy; (5-8-09)
- d. Treatment or services for epilepsy, an intellectual disability, dementia, a developmental disability, physical disability, aged or the infirm; or (5-8-09)
- e. Any other services which are primarily recreational or diversional in nature. (5-8-09)

201. -- 299. (RESERVED)

300. CHARGES FOR ALCOHOL AND SUBSTANCE USE DISORDERS SERVICES.

Individuals receiving alcohol and substance use disorders services through the Department are responsible for paying for the services provided. Individuals must complete a "Fee Determination Form," in writing or by telephone, prior to the delivery of alcohol and substance use disorders services. The amount charged for each service will be in accordance with the individual's ability to pay as determined in: IDAPA 16.07.01, "Behavioral Health Sliding Fee Schedules," Section 500. (5-8-09)

301. -- 999. (RESERVED)

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