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**IDAPA 16
TITLE 07
CHAPTER 17**

16.07.17 - SUBSTANCE USE DISORDERS SERVICES

000. LEGAL AUTHORITY.

The Idaho Legislature has delegated to the Department and the Board of Health and Welfare, the responsibility to establish and enforce rules for a comprehensive and coordinated program for the treatment of substance use disorders. This authority is found in the Alcoholism and Intoxication Treatment Act, Title 39, Chapter 3, and Section 56-1003, Idaho Code. (7-1-16)

001. TITLE, SCOPE, AND PURPOSE.

01. Title. The title of these rules is, IDAPA 16.07.17, “Substance Use Disorders Services.” (7-1-16)

02. Scope. This chapter sets the standards for providing substance use disorders services administered under the Department’s Division of Behavioral Health. (7-1-16)

03. Purpose. The purpose of these rules is to: (7-1-16)

a. Provide participant eligibility criteria, application requirements, and appeals process for services administered under the Department’s Division of Behavioral Health; and (7-1-16)

b. Establish requirements for quality of substance use disorders treatment, care, and services provided by behavioral health and recovery support services programs. (7-1-16)

002. WRITTEN INTERPRETATIONS.

In accordance with Section 67-5201(19)(b)(iv), Idaho Code, this agency may have written statements that pertain to the interpretations of the rules of this chapter or to the documentation of compliance with the rules of this chapter. These documents are available for public inspection as described in Sections 005 and 006 of these rules. (7-1-16)

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, “Rules Governing Contested Case Proceedings and Declaratory Rulings.” (7-1-16)

02. Appeal of Decision Based on Clinical Judgment. Decisions involving 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, in accordance with *Maresh v. State*, 132 Idaho 221, 970 P.2d 14 (Idaho 1999). (7-1-16)

004. INCORPORATION BY REFERENCE.

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

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>. (7-1-16)

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. (7-1-16)

03. Guidelines for the Accreditation of Opioid Treatment Programs (OTP). Substance Abuse and Mental Health Services Administration, Office of Pharmacological and Alternative Therapies. Attention: OTP Certification Program, Room 2-1086, 1 Choke Cherry Road, Rockville, MD 20857; or on the internet at <http://www.samhsa.gov>

www.dpt.samhsa.gov/regulations/certification.aspx for an overview of certification regulations, and <http://www.dpt.samhsa.gov/pdf/OTPAccredGuidelines-2007.pdf> for specific guidelines dated July 20, 2007. (7-1-16)

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)

06. Substance Use Disorders Services Website. The Substance Use Disorders Services Internet website at <http://www.substanceabuse.idaho.gov>. (7-1-16)

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 Title, 74, Chapter 1, 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. -- 009. (RESERVED)

010. DEFINITIONS - A THROUGH F.

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

01. Adolescent. An individual under the age of eighteen (18) years. (7-1-16)

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. Refers to the third edition 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. (7-1-16)

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. (7-1-16)

06. 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 substance use disorders service needs. (7-1-16)

07. Clinical Necessity. 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 substance use disorders that are: (7-1-16)

a. Clinically appropriate, in terms of type, frequency, extent, site and duration, and considered effective for treating the applicant's substance use disorder; and (7-1-16)

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 substance use disorder. (7-1-16)

08. Department. The Idaho Department of Health and Welfare or its designee. (7-1-16)

09. Eligibility Screening. The collection of data, analysis, and review, which the Department uses to screen and determine whether an applicant is eligible for adult or adolescent substance use disorder services available through the Department. (7-1-16)

10. 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)

011. DEFINITIONS - G THROUGH Z. For the purposes of these rules, the following terms are used as defined below: (7-1-14)

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). 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. The IBADCC may be contacted at: PO Box 1548, Meridian, ID 83680; phone (208) 468-8802; Fax: (208) 466-7693; e-mail: IBADCC@ibadcc.org; <http://ibadcc.org/>. (7-1-16)

02. Idaho Student of Addiction Studies (ISAS). An entry-level certification for substance use disorder treatment granted by the Idaho Board of Alcohol/Drug Counselor Certification. (7-1-16)

03. Individualized Service Plan. A written action plan based on an eligibility screening and 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. (7-1-16)

04. 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. (7-1-16)

05. Medication Assisted Treatment (MAT). MAT is the use of medications, in combination with counseling and behavioral therapies, to provide a whole-patient approach to the treatment of substance use disorders. (7-1-16)

06. Network Treatment Provider. A treatment provider who has 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. (7-1-16)

07. Northwest Indian Alcohol/Drug Specialist Certification Board. A board that represents the Native American Chemical Dependency programs in the state of Washington, Oregon, and Idaho and offers certification for chemical dependency counselors. Information regarding certification standards may be obtained at the website at <http://www.nwiadcb.com/NWIADCB/index.html>. (7-1-16)

08. Opioid Treatment Program. This program is specifically offered to a participant who has opioids as his substance use disorder. Services are offered under the guidelines of a federally accredited program. (7-1-16)

09. 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. (7-1-16)

10. Priority Population. Priority populations are populations who receive services ahead of other persons and are determined yearly by the Department. A current list of the priority population is available from the Department. (7-1-16)

11. Recovery Support Services. Non clinical services designed to initiate, support, and enhance recovery. These services may include: safe and sober housing that is staffed; transportation; child care; life skills education; drug testing; peer to peer mentoring; and case management. (7-1-16)

12. Residential Treatment Services. A planned and structured regimen of treatment provided in a 24-hour residential setting. Residential programs serve individuals who, because of function limitations need safe and stable living environments and 24-hour care. (7-1-16)

13. Substance-Related Disorders. Substance-related disorders include disorders related to the taking of alcohol or another addictive drug, to the side effects of a medication, and to toxin exposures. They include substance use disorders, and substance intoxication, substance withdrawal, and substance-induced disorders as defined in the DSM5. (7-1-16)

14. Substance Use Disorder. A substance use disorder is 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. (7-1-16)

15. Withdrawal Management. Services necessary to monitor and manage the process of withdrawing a person from a specific psychoactive substance in a safe and effective manner. (7-1-16)

012. -- 099. (RESERVED)

PARTICIPANT ELIGIBILITY
(Sections 100 - 199)

100. ACCESSING SUBSTANCE USE DISORDERS SERVICES.
The Department's adult and adolescent substance use disorders services may be accessed by eligible applicants completing an application for services and eligibility screening. (7-1-16)

101. ELIGIBILITY SCREENING AND CLINICAL ASSESSMENT.

01. Eligibility Screening. A screening for eligibility substance use disorders services through the Department is based on the eligibility requirements under Section 102 of these rules. When an applicant meets eligibility screening criteria he may be eligible for substance use disorders services through the Department. An applicant not meeting eligibility screening criteria will be referred to other appropriate community services. Each applicant is required to complete an application for Substance Use Disorders Services. When an applicant refuses to complete the application, the Department reserves the right to discontinue the screening process for eligibility. The eligibility screening must be directly related to the applicant's substance-related disorder and level of functioning, and will include: (7-1-16)

a. Application for Substance Use Disorders Services; (7-1-16)

b. Notice of Privacy Practice; and (7-1-16)

- c. Authorization for Disclosure. (5-8-09)

02. Clinical Assessment. When the applicant is found eligible for a substance use disorders services assessment after completion of the eligibility screening, the applicant will be authorized to receive a clinical assessment with a Department's network treatment provider. (7-1-16)

102. ELIGIBILITY DETERMINATION.

01. Determination of Eligibility for Substance Use Disorders Services. The Department may limit or prioritize adult and adolescent substance use disorder services, impose income limits, 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. (7-1-16)

02. Eligibility Requirements. To be eligible for substance use disorders services through a voluntary application to the Department, the applicant must: (7-1-16)

- 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 a priority population; (7-1-16)
- d. Meet diagnostic criteria for a substance-related disorder as described in the DSM-5; and (7-1-16)
- e. Meet specifications in each of the ASAM dimensions required for the recommended level of care. (7-1-16)

103. NOTICE OF CHANGES IN ELIGIBILITY 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. (7-1-16)

104. NOTICE OF DECISION ON ELIGIBILITY.

01. Notification of Eligibility Determination. Within two (2) business days of receiving a completed eligibility screening or assessment, or both, the Department will notify the applicant or the applicant's designated representative of its eligibility determination. When the applicant is not eligible for services through the Department, the applicant or the applicant's designated representative will be notified in writing. The written notice will include: (7-1-16)

- 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 Substance Use Disorders Services. When the Department determines that an applicant is eligible for substance use disorders services through the Department, an individual has the right to accept or reject substance use disorders services offered by the Department, unless imposed by law or court order. (7-1-16)

03. Reapplication for Substance Use Disorders Services. If the Department determines that an applicant is not eligible for substance use disorders services through the Department, the applicant may reapply at any time upon a showing of a change in circumstances. (7-1-16)

105. -- 119. (RESERVED)

120. FINANCIAL RESPONSIBILITY FOR SUBSTANCE USE DISORDERS SERVICES.

An individual receiving substance use disorders services through the Department is responsible for paying for the services received. The financial responsibility for each service is based on the individual's ability to pay as determined in IDAPA 16.07.01, "Behavioral Health Sliding Fee Schedules." (7-1-16)

121. -- 149. (RESERVED)

150. SELECTION OF SERVICE PROVIDERS.

A participant who is eligible for substance use disorders services administered by the Department can choose a substance use disorders service provider from the approved list of Network Treatment Providers for services needed. Treatment services must be within the recommended level of care according to ASAM based on the individual's needs identified in the assessment and resulting individualized service plan. A participant within the criminal justice system may have a limited number of providers from which to choose. (7-1-16)

151. -- 199. (RESERVED)

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. (7-1-16)

01. Qualified Substance Use Disorders Professional. A qualified substance use disorders professional includes individuals with the following qualifications: (7-1-16)

- a.** Idaho Board of Alcohol/Drug Counselor Certification - Certified Alcohol/Drug Counselor; (7-1-16)
- b.** Idaho Board of Alcohol/Drug Counselor Certification - Advanced Certified Alcohol/Drug Counselor; (7-1-16)
- c.** Northwest Indian Alcohol/Drug Specialist Certification - Counselor II or Counselor III; (7-1-16)
- d.** National Board for Certified Counselors (NBCC) - Master Addictions Counselor (MAC); (7-1-16)
- e.** "Licensed Clinical Social Worker" (LCSW) or a "Licensed Masters Social Worker" (LMSW) licensed under Title 54, Chapter 32, Idaho Code, and IDAPA 24.14.01, "Rules of the State Board of Social Work Examiners"; (7-1-16)
- f.** "Marriage and Family Therapist" or "Associate Marriage and Family Therapist," licensed under Title 54, Chapter 34, Idaho Code, and IDAPA 24.15.01, "Rules of the Idaho Licensing Board of Professional Counselors and Marriage and Family Therapists"; (7-1-16)
- g.** "Nurse Practitioner" licensed under Title 54, Chapter 14, Idaho Code, and IDAPA 23.01.01, "Rules of the Idaho Board of Nursing"; (7-1-16)
- h.** "Clinical Nurse Specialist" licensed under Title 54, Chapter 14, Idaho Code, and IDAPA 23.01.01, "Rules of the Idaho Board of Nursing"; (7-1-16)
- i.** "Physician Assistant" licensed under Title 54, Chapter 18, Idaho Code, and IDAPA 22.01.03,

“Rules for the Licensure of Physician Assistants”; (7-1-16)

j. “Licensed Professional Counselor” (LPC) or a “Licensed Clinical Professional Counselor” (LCPC) licensed under Title 54, Chapter 34, Idaho Code, and IDAPA 24.15.01, “Rules of the Idaho Licensing Board of Professional Counselors and Marriage and Family Therapists”; (7-1-16)

k. “Psychologist” or “Psychologist Extender” licensed under Title 54, Chapter 23, Idaho Code, and IDAPA 24.12.01, “Rules of the Idaho State Board of Psychologist Examiners”; (7-1-16)

l. “Physician” licensed under Title 54, Chapter 18, Idaho Code; and (7-1-16)

m. “Registered Nurse (RN)” licensed under Title 54, Chapter 14, Idaho Code, and IDAPA 23.01.01, “Rules of the Idaho Board of Nursing.” (7-1-16)

02. Qualified Substance Use Disorders Professional Prior to May 1, 2010. When an individual was recognized by the Department as a qualified professional in a substance use disorders services program prior to May 1, 2010, and met the requirements at that time, he will continue to be recognized by the Department as a qualified substance use disorders professional. (7-1-16)

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 requirements in these rules. (7-1-16)

01. Informed of Qualified Substance Use Disorders Professional Trainee Providing Treatment. All behavioral health program staff, participants, their families, or guardians must be informed when a qualified substance use disorders professional trainee is providing treatment services to participants. (7-1-16)

02. Work Qualifications for Qualified Substance Use Disorders Professional Trainee. A qualified substance use disorders professional trainee must meet one (1) of the following qualification to begin work: (7-1-16)

a. Idaho Student in Addiction Studies (ISAS) certification; (7-1-16)

b. Formal documentation as a Northwest Indian Alcohol/Drug Specialist Counselor I; or (7-1-16)

c. Formal documentation of current enrollment in a program for qualifications in Section 200 of these rules. (7-1-16)

03 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. (7-1-16)

211. -- 299. (RESERVED)

300. SERVICES FOR ADOLESCENTS.

Behavioral health programs providing substance use disorders treatment to adolescents must comply with the following requirements: (7-1-16)

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 required in Subsections 300.03 and 300.04 of this rule. (7-1-16)

02. Residential Care as an Alternative to Parental Care. Any program that provides care, control, supervision, or maintenance of adolescents for twenty-four (24) hours per day as an alternative to parental care must meet the following criteria: (7-1-16)

a. Be licensed under the “Child Care Licensing Act,” Title 39, Chapter 12, Idaho Code, according to IDAPA 16.06.02, “Rules Governing Standards for Child Care Licensing”; or (7-1-16)

b. Be certified by the Department of Juvenile Corrections according to IDAPA 05.01.02, “Rules and Standards for Secure Juvenile Detention Centers.” (7-1-16)

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 Subsection 300.03 of this rule. The individual may remain in the program for: (7-1-16)

a. Up to ninety (90) days after his eighteenth birthday; or (7-1-16)

b. Until the close of the current school year for an individual attending school. (7-1-16)

04. Documentation Requirements for Continued Care. Prior to accepting an individual into continued care, the program must assure and document the following; (7-1-16)

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. (7-1-16)

b. Clinical staffing for appropriateness of continued care with clinical documentation; (7-1-16)

c. Verification the individual in continued care was in the care of the program prior to his eighteenth birthday. (7-1-16)

d. Verification that the individual needs to remain in continued care in order to complete treatment, education, or other similar needs. (7-1-16)

05. Licensed Hospital Facilities. Facilities licensed as hospitals under Title 39, Chapter 13, Idaho Code, are exempt from the requirements in Subsections 300.01 through 300.04 of this rule. (7-1-16)

301. -- 349. (RESERVED)

350. RECOVERY SUPPORT SERVICES.

Each program must meet the minimum requirements in these rules to provide recovery support services for the following services. (7-1-16)

01. Case Management. (7-1-16)

02. Alcohol and Drug Screening. (7-1-16)

03. Child Care. (7-1-16)

04. Transportation. (7-1-16)

05. Life Skills. (7-1-16)

06. Staffed Safe and Sober Housing for Adolescents. (7-1-16)

07. Staffed Safe and Sober Housing for Adults. (7-1-16)

351. -- 354. (RESERVED)

355. CASE MANAGEMENT SERVICES.

Each program providing case management services must comply with the requirements in this rule. (7-1-16)

01. No Duplication of Services. Case management services must not duplicate services currently provided under another program. (7-1-16)

02. Based on Assessment. Case management services must be based on an assessment of participant's needs. (7-1-16)

03. Required Service Plan. Case management services must be included on the participant's service plan. (7-1-16)

356. -- 359. (RESERVED)

360. ALCOHOL AND DRUG SCREENING.

Each program providing alcohol and drug screenings must comply with the requirements in this rule. (7-1-16)

01. Drug Testing Policies and Procedures. The program must have policies and procedures regarding the collection, handling, testing, and reporting of drug-testing specimens. Policies and procedures must include elements contributing to the reliability and validity of the screening and testing process. (7-1-16)

a. Direct observation of specimen collection; (7-1-16)

b. Verification temperature and measurement of creatinine levels in urine samples to determine the extent of water loading; (7-1-16)

c. Specific, detailed, written procedures regarding all aspects of specimen collection, specimen evaluation, and result reporting; (7-1-16)

d. A documented chain of custody for each specimen collected; (7-1-16)

e. Quality control and quality assurance procedures for ensuring the integrity of the process; and (7-1-16)

f. Procedures for verifying accuracy when drug test results are contested. (7-1-16)

02. Release of Results. The program must have a policy and procedures for releasing the results of an alcohol and drug screening. (7-1-16)

03. On-site Testing. A program performing on-site testing must use alcohol and drug screening tests approved by the U.S. Food and Drug Administration. (7-1-16)

04. Laboratory Used for Testing. Each laboratory used for lab-based confirmation or lab-based testing must meet the requirements in and be approved under IDAPA 16.02.06, "Rules Governing Quality Assurance for Idaho Clinical Laboratories." (7-1-16)

361. -- 364. (RESERVED)

365. CHILD CARE SERVICES.

Each program providing child care services must comply with the requirements in this rule. (7-1-16)

01. Documentation of Child Care. A program must maintain documentation of current daycare license or written documentation that child care is provided while parent is on-site. (7-1-16)

02. Policies and Procedures for Child Care Services. The program must have policies and procedures that ensure the well-being and safety of children receiving child care services. (7-1-16)

366. -- 369. (RESERVED)

370. TRANSPORTATION SERVICES.

Each program providing transportation services must comply with the requirements in this rule. (7-1-16)

01. Documentation of Driver's License. A program that provides transportation to participants must maintain documentation of a valid driver's license for each individual who provides the service. (7-1-16)

02. Transportation Vehicles and Drivers. A program must adhere to all state and federal laws, rules, and regulations applicable to drivers and types of vehicles used. (7-1-16)

03. Insurance Liability Coverage. A behavioral health provider must carry at least the minimum insurance coverage required by Idaho law for each vehicle used. When the program permits an employee to transport participants in an employee's personal vehicle, the program must ensure that insurance coverage is carried to cover those services. (7-1-16)

04. Direct Routes. A program must provide transportation by the most direct route practical. (7-1-16)

05. Safety of Participants. A program must ensure the safety and well-being of all participants transported. This includes maintaining and operating vehicles in a manner that ensures protection of the health and safety of each participant transported. The program must meet the following requirements: (7-1-16)

a. Prohibit the driver from using a cell phone while transporting a participant; (7-1-16)

b. Prohibit smoking in the vehicle; (7-1-16)

c. All vehicles must be equipped with a first aid kit and fire extinguisher; (7-1-16)

d. All vehicles must be equipped with appropriate safety restraints; and (7-1-16)

e. All vehicles must be in good working order. (7-1-16)

06. Driver Must be Eighteen. The driver of a motor vehicle who transports program participants must be at least eighteen (18) years of age. (7-1-16)

371. -- 374. (RESERVED)

375. LIFE SKILLS SERVICES.

Each program that provides life skills services must comply with the requirements in this rule. (7-1-16)

01. Personal and Family Life Skills. A program for life skills services must be non-clinical and designed to enhance personal and family skills for each participant's needs. Life skills services for work and home, reduce marriage and family conflict, and develop attitudes and capabilities that support the adoption of healthy, recovery-oriented behaviors and healthy re-engagement with the community for the participant. (7-1-16)

02. Individual and Group Activities. A program providing life skills services may be provided on an individual basis or in a group setting and can include activities that are culturally, spiritually, or gender-specific. (7-1-16)

03. No Duplication of Services. Life skills services provided by a program must not duplicate services currently provided under another program. (7-1-16)

376. -- 379. (RESERVED)

380. STAFFED SAFE AND SOBER HOUSING FOR ADOLESCENTS.

Each program that provides staffed safe and sober housing for adolescents must comply with the requirements in this rule. (7-1-16)

01. Licensed. A program providing staffed safe and sober housing services for adolescents must be licensed as a Children's Residential Care Facility under IDAPA 16.06.02, "Rules Governing Standards for Child Care

Licensing.” (7-1-16)

02. Policies and Procedures. A program providing safe and sober housing for adolescents must have written policies and procedures that establish house rules and requirements and include procedures for monitoring participant compliance and consequences for violating house rules and requirements. (7-1-16)

03. Safe and Sober Recovery Skills. Safe and sober housing services are directed toward applying recovery skills, preventing relapse, improving social functioning and ability for self-care, promoting personal responsibility, developing a social network supportive of recovery, and reintegrating the each adolescent into the worlds of school, work, family life, and preparing for independent living. (7-1-16)

381. -- 384. (RESERVED)

385. STAFFED SAFE AND SOBER HOUSING SERVICES FOR ADULTS.

Each program that provides staffed safe and sober housing for adults must comply with the requirements in this rule. (7-1-16)

01. Policies and Procedures. A program providing safe and sober housing must have written policies and procedures that establish house rules and requirements and include procedures for monitoring participant compliance and consequences for violating house rules and requirements. (7-1-16)

02. Staff Required. A staff person must be available to residents twenty-four (24) hours per day, seven (7) days a week, and conduct daily site visits: At a minimum, staff must include: (7-1-16)

a. A house manager who is on-site at a minimum of twenty (20) hours a week; or (7-1-16)

b. A housing coordinator who is off-site, but monitors house activities on a daily basis. (7-1-16)

03. Certified Home Inspection. Each staffed safe and sober housing for adults program must have a certified home inspection for each location. There must be documentation that any major health and safety issues identified in the certified home inspection are corrected. (7-1-16)

04. Safety Inspection. Each staffed safe and sober housing location must be inspected weekly by staff to determine if hazards or potential safety issues exist. A record of the inspection must be maintained that includes the date and time of the inspection, problems encountered, and recommendation for improvement. (7-1-16)

386. -- 389. (RESERVED)

390. THERAPEUTIC ENVIRONMENT OF RESIDENTIAL TREATMENT.

Each program providing twenty-four (24) hours per day residential treatment must provide a therapeutic environment that enhances the participants positive self-image, preserves their human dignity, and meets the minimum standards in these rules. (7-1-16)

01. Living Conditions. A residential treatment program must meet the following requirements regarding each participant's therapeutic environment: (7-1-16)

a. Each participant must be allowed to wear his own clothing. If clothing is provided by the program, it must be appropriate and not demeaning. (7-1-16)

b. Each participant must be allowed to keep and display personal belongings, and to add personal touches to the decoration of own room. (7-1-16)

c. A residential treatment program must have policies and procedures for storage, availability, and use of personal possessions, personal hygiene items, and other belongings. (7-1-16)

d. The residential treatment program must have ample closet and drawer space for the storage of personal property and property provided for each participant's use. (7-1-16)

- 02. Resident Sleeping Rooms.** A residential treatment program must assure that: (7-1-16)
- a.** Resident sleeping rooms are not in attics, stairs, halls, or any other room commonly used for other than bedroom purposes; (7-1-16)
 - b.** Sufficient window space must be provided for natural light and ventilation. Emergency egress or rescue windows must comply with the state-adopted Uniform Building Code. This code is available from the International Code Council, 4051 West Fossmoor Rd. Country Club Hills, IL 60478-5795, phone:1-888-422-7233 and online at <http://www.iccsafe.org>; (7-1-16)
 - c.** Square footage requirements for resident sleeping rooms must provide at least seventy (70) square feet, exclusive of closet space, in a single occupancy room. In a multiple occupancy room, there must be at least forty-five (45) square feet per occupant, exclusive of closet space. Existing multiple occupancy sleeping rooms may be approved relative to square feet per occupant until the room is remodeled or the building is extensively remodeled. (7-1-16)
 - d.** Window screens must be provided on operable windows; (7-1-16)
 - e.** Doorways to sleeping areas must be provided with doors in order to provide privacy; and (7-1-16)
 - f.** Separate bedrooms and bathrooms must be provided for men and women. (7-1-16)
- 03. Contributions of Therapeutic Environment.** The environment of the residential treatment program must contribute to the development of therapeutic relationships in the following ways: (7-1-16)
- a.** Areas must be available for a full range of social activities for all participants, from two (2) person conversations to group activities; (7-1-16)
 - b.** Furniture and furnishings must be comfortable and maintained in clean condition and good repair; and (7-1-16)
 - c.** All equipment and appliances must be maintained in good operating order. (7-1-16)

391. -- 394. (RESERVED)

395. RESIDENTIAL WITHDRAWAL MANAGEMENT SERVICES.

Each program providing substance use disorders residential withdrawal management services must comply with the requirements in this rule. (7-1-16)

- 01. Residential Withdrawal Management Services.** (7-1-16)
- a.** Residential withdrawal management programs must provide living accommodations in a structured environment for individuals who require twenty-four (24) hour per day, seven (7) days a week, supervised withdrawal management services. (7-1-16)
 - b.** Withdrawal management services must be available continuously twenty-four (24) hours per day, seven (7) days per week. (7-1-16)
 - c.** Each withdrawal management program must have clear written policies and procedures for the withdrawal management of participants. The policies and procedures must be reviewed and approved by a medical consultant with specific knowledge of best practices for withdrawal management. (7-1-16)
 - d.** The level of monitoring of each participant or the physical restrictions of the environment must be adequate to prevent a participant from causing serious harm to self or others. (7-1-16)
 - e.** Each withdrawal management program must have provisions for any emergency care required.

(7-1-16)

f. Each withdrawal management program must have written policies and procedures for the transfer of participants from one (1) withdrawal management program to another, when necessary. (7-1-16)

g. Each withdrawal management program must have written policies and procedures for dealing with a participant who leaves against professional advice. (7-1-16)

02. Residential Withdrawal Management Staffing. Each withdrawal management program must have twenty-four (24) hour per day, seven (7) days a week, trained personnel staff coverage. (7-1-16)

a. A minimum staff to participant ratio of one (1) trained staff to six (6) participants must be maintained twenty-four (24) hours per day, seven (7) days a week. (7-1-16)

b. Each staff member responsible for direct care during withdrawal management must have completed CPR training, a basic first-aid training course, and additional training specific to withdrawal management prior to being charged with the responsibility of supervising participants. (7-1-16)

03. Transfer to an Outside Program From Residential Withdrawal Management. The residential treatment program must have policies and procedures established for transferring a participant to another program. (7-1-16)

396. -- 399. (RESERVED)

400. RESIDENTIAL TREATMENT SERVICES FOR ADOLESCENTS.

A behavioral health program providing adolescent residential treatment for substance use disorders must comply with the requirements in this rule. (7-1-16)

01. Licensed for Adolescent Residential Treatment. Each residential treatment program must be licensed as a Children's Residential Care Facility under IDAPA 16.06.02, "Rules Governing Standards for Child Care Licensing." (7-1-16)

02. Admission Criteria for Adolescent Residential Treatment. A behavioral health program providing adolescent residential treatment for substance use disorders must only admit adolescents with a primary substance use disorder diagnosis. (7-1-16)

03. Focus of Adolescent Residential Treatment Services. Adolescent residential treatment services for substance use disorders must focus primarily on substance use disorders diagnosed problems. Care must include hours specific to substance use disorders treatment provided by clinical staff, including planned and structured education, individual and group counseling, family counseling, and motivational counseling. An adolescent residential treatment program must provide: (7-1-16)

a. Individual and group counseling sessions; (7-1-16)

b. Family treatment services; and (7-1-16)

c. Substance use disorders education sessions; (7-1-16)

04. Staff Training in Adolescent Residential. Annual staff training must include: (7-1-16)

a. Cultural sensitivity and diversity; (7-1-16)

b. Behavior management; and (7-1-16)

c. Adolescent development issues appropriate to the population served. (7-1-16)

05. Residential Care Provided to Adolescents and Adults. A behavioral health program providing

residential treatment services to adolescents and adults must ensure the separation of adolescent participants from adult participants. This includes not sharing the same wing, or the same floor for recreation, living, sleeping, and restroom facilities. Adolescents must not dine with adult residents. Adolescents must not share treatment groups, recreation, counseling sessions, educational programs, or treatment programs with adults except under continued care in compliance with IDAPA 16.06.02, "Rules Governing Standards for Child Care Licensing," and Subsections 300.03 and 300.04 of these rules. (7-1-16)

06. After Care Plan for Adolescent in Residential. An adolescent's residential care facility that provides substance use disorders treatment must develop a written plan of after care services for each adolescent that includes procedures for reintegrating the adolescent into the family and community as appropriate, and outpatient and other continued care services recommended. (7-1-16)

401. -- 404. (RESERVED)

405. RESIDENTIAL TREATMENT SERVICES FOR ADULTS.

A behavioral health program providing adult residential treatment for substance use disorders must comply with the requirements in this section. (7-1-16)

01. Residential Treatment Services for Adults. (7-1-16)

a. A residential treatment program provides living accommodations in a structured environment for adults who require twenty-four (24) hour per day, seven (7) days a week, supervision. (7-1-16)

b. Services must include assessment, treatment, and referral components. (7-1-16)

c. The residential treatment program must have policies and procedures for medical screening, care of participants requiring minor treatment or first aid, and handling of medical emergencies. These provisions must be approved by the staff and consulting physician. (7-1-16)

d. The residential treatment program must have written provisions for referral or transfer to a medical facility for any person who requires nursing or medical care. (7-1-16)

e. Recreational activities must be provided for the participants. (7-1-16)

02. Staffing Adult Residential. The residential treatment program must have must have qualified staff to maintain appropriate staff to participant ratios. (7-1-16)

a. The program must have one (1) qualified substance use disorders professional staff member for every ten (10) participants. (7-1-16)

b. The program must have other staff sufficient to meet the ratio of one (1) staff person to twelve (12) participants continuously, twenty-four (24) hours per day. (7-1-16)

03. Residential Care Provided to Adolescents and Adults. A behavioral health program providing residential care to adolescents and adults must ensure the separation of adolescent participants from adult participants. Adults and adolescents can not share the same wing, or the same floor for recreation, living, sleeping, and restroom facilities. Adolescents must not dine with adult residents. Adolescents must not share treatment groups, recreation, counseling sessions, educational programs, or treatment programs with adults unless there is a documented therapeutic reason. (7-1-16)

406. -- 409. (RESERVED)

410. OUTPATIENT TREATMENT SERVICES FOR ADOLESCENTS AND ADULTS.

A behavioral health program providing outpatient or intensive outpatient substance use disorder services must comply with the requirements in this section. (7-1-16)

01. Treatment Services. (7-1-16)

a. Counseling services must be provided through the outpatient program on an individual, family, or group basis; (7-1-16)

b. Services must include educational instruction and written materials on the nature and effects of alcohol and substance use disorders and the recovery process. (7-1-16)

c. The behavioral health program must provide adjunct services or refer the participant to adjunct services as indicated by participant need. (7-1-16)

02. Staffing Ratios. The behavioral health program must have qualified staff to maintain appropriate staff to participant ratios as required in Subsections 410.02.a. through 410.02.c. of this rule. (7-1-16)

a. An outpatient program must employ at a minimum one (1) qualified substance use disorders professional staff person for every fifty (50) participants. (7-1-16)

b. An intensive outpatient program must employ at a minimum one (1) qualified substance use disorders professional staff person for every thirty (30) participants. (7-1-16)

c. The maximum caseload for one (1) qualified substance use disorders professional in any outpatient or intensive outpatient program is fifty (50) participants. (7-1-16)

03. Off-site Treatment Service Delivery Settings. Provision of outpatient or intensive outpatient treatment services outside of an approved behavioral health program location: (7-1-16)

a. Services must be provided by qualified substance use disorders professional. (7-1-16)

b. Services must be provided in a setting that is safe and appropriate to the participant and participant's needs. (7-1-16)

c. Confidentiality according to 42 CFR and HIPAA regulations must be adhered to. (7-1-16)

d. The need and appropriateness of providing off-site treatment is documented. (7-1-16)

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 medication assisted treatment services. (7-1-16)

02. Opioid Treatment Program. An Opioid Treatment Program (OTP) must meet all requirements established under 42 CFR, Section 8.12, Federal Opioid Treatment Standards. These standards are incorporated by reference under Section 004 of these rules including how access the standards. (7-1-16)

416. -- 999. (RESERVED)

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