

PART He-W 513 SUBSTANCE USE DISORDER (SUD) TREATMENT AND RECOVERY SUPPORT SERVICES

He-W 513.01 Purpose. The purpose of this part is to establish the procedures and requirements for age and clinically appropriate substance use disorders (SUDs) treatment and recovery support services that are provided to the individuals who are eligible for medicaid.

Source. #10655, INTERIM, eff 8-15-14, EXPIRES: 2-11-15; ss by #10779, eff 2-11-15; ss by #10922, eff 9-1-15; ss by #11107, eff 7-1-16; ss by #12681, eff 11-27-18

He-W 513.02 Definitions.

(a) “Collaborative service model” means a model whereby SUD treatment and recovery support services, health care services, and mental health services are provided by practitioners from different programs who work together via formalized relationships.

(b) “Comprehensive SUD program” means:

(1) An agency under contract with or agreement with the department which provides specialty SUD treatment and recovery support services on a residential and outpatient basis and whose facility is:

a. Licensed as a residential treatment and rehabilitation facility in accordance with He-P 807; or

b. A state-owned SUD residential treatment and rehabilitation facility which is exempt from licensure in accordance with RSA 151:2, II (i) and He-P 807;

(2) A hospital enrolled in medicaid both as a hospital in accordance with He-W 543 and as a comprehensive SUD program in accordance with He-W 513, which provides specialty SUD treatment and recovery support services on a residential and outpatient basis; or

(3) Providers enrolled in medicaid in the state in which they practice to provide residential services consistent with criteria as set forth in the American Society of Addiction Medicine (ASAM) Criteria: Treatment Criteria for Substance-Related, Addictive, and Co-Occurring Conditions, Third Edition (2013), henceforth referred to as “ASAM Criteria (2013)” available as noted in Appendix A, and who are also enrolled in NH medicaid.

(c) “Crisis intervention” means a response to a crisis or emergency situation experienced by an individual, family member, or significant other(s) related to a recipient’s SUD.

(d) “Department” means the New Hampshire department of health and human services.

(e) “Direct supervision” means that the supervisor meets with the individual to review his or her clinical practice in order to evaluate his or her performance.

(f) “Evaluation” means a clinical interview conducted by a qualified individual using one or more standardized, evidence based evaluation tools to determine the existence and severity of substance use and specific problem areas.

(g) “Family treatment” means outpatient individual or group treatment services provided by a clinician to assist recipients and their families to achieve treatment objectives through the exploration of SUDs and their ramifications, including an examination of attitudes and feelings, and consideration of alternative solutions and decision making with regard to substance misuse.

(h) “Integrated service model” means a model whereby SUD treatment and recovery support services, health care services, and mental health services are provided by a team of practitioners within a single program.

(i) “Intensive outpatient SUD services” means intensive and structured individual and group alcohol or other drug treatment services and activities that are provided at least 9 hours a week for recipients age 21 and over, and at least 6 hours a week for recipients under age 21, according to an individualized treatment plan that include a range of outpatient treatment services and other ancillary alcohol or other drug services.

(j) “Licensed mental health provider” means a psychotherapist licensed by the NH board of mental health practice or the NH board of psychologists, or an advanced practice registered nurse (APRN) with a psychiatric specialty.

(k) “Lived Experience” means that an individual has direct, personal experience with either their own recovery from a substance use disorder or that of a family member.

(l) “Medicaid” means the Title XIX and Title XXI programs administered by the department, which makes medical assistance available to eligible individuals.

(m) “Office-based medication assisted substance use disorder treatment” means medication prescription and monitoring by a licensed prescriber for the purpose of treating a SUD, including clinically appropriate referral to, and coordination with, SUD treatment providers within the prescriber’s practice or externally.

(n) “Opioid treatment services” means treatment for opioid use disorders using a combination of approved medications, limited to methadone and buprenorphine, and behavioral health services which is delivered by an agency certified as an opioid treatment program in accordance with He-A 304.03.

(o) “Outpatient, group treatment” means services provided by a clinician to assist 2 or more individuals to achieve treatment objectives through the exploration of substance use disorders and their ramifications, including an examination of attitudes and feelings, and consideration of alternative solutions and decision making with regard to substance misuse.

(p) “Outpatient, individual treatment” means services provided by a clinician to assist an individual to achieve treatment objectives through the exploration of substance use disorders and their ramifications, including an examination of attitudes and feelings, and consideration of alternative solutions and decision making with regard to substance misuse.

(q) “Outpatient SUD program” means an agency which provides specialty SUD treatment and recovery support services on an outpatient basis and which is:

- (1) Under contract with or agreement with the department;
- (2) A hospital enrolled in medicaid both as a hospital in accordance with He-W 543 and as an outpatient SUD program in accordance with He-W 513;
- (3) A provider enrolled in medicaid in the state in which they practice to provide intensive outpatient services consistent with Level 2.1, as set forth in ASAM Criteria (2013), available as noted in Appendix A, or partial hospitalization consistent with Level 2.5, as set forth in ASAM Criteria (2013), available as noted in Appendix A, and who is also enrolled in NH Medicaid;
- (4) Under current primary care services contract obligation with the maternal and child health section of the NH division of public health services;
- (5) A medicaid enrolled community mental health center;

(6) A medicaid enrolled Federally Qualified Health Center (FQHC), as defined in section 1905(l)(2)(B) of the Social Security Act, or a medicaid enrolled Rural Health Clinic (RHC), as defined in section 1905(l)(1) of the Social Security Act; or

(7) An opioid treatment program which is certified as such in accordance with He-A 304.03.

(r) “Partial hospitalization services” means intensive and structured individual and group treatment of moderate to severe co-occurring substance use and other mental health disorder(s) that are provided at least 20 hours per week.

(s) “Peer recovery coach” means an individual who meets the requirements set out in He-W 513.05(r)(4).

(t) “Peer recovery program” means a recovery community organization or program that is accredited by the Council on Accreditation of Peer Recovery Support Services (CAPRSS), is accredited by Clubhouse International, is under contract with the department’s contracted facilitating organization, or is under contract with the department’s BDAS to provide peer recovery support services.

(u) “Peer recovery support services” means non-clinical recovery support services which are recipient directed and delivered by peers who have common life experiences with the recipients they are serving.

(v) “Recipient” means any individual who is eligible for and receiving medical assistance under the medicaid program.

(w) “Recovery support services” means non-clinical services that are provided to recipients to support their recovery from substance use disorders and prevent relapse.

(x) “Rehabilitative services” means 24-hour per day non-acute care in a non-hospital, residential treatment program where a planned program of professionally directed evaluation, care, and treatment for the restoration of functioning for persons with substance use disorders occurs.

(y) “Screening” means a brief process designed to identify an individual who is misusing substances, or is at risk for developing a substance use disorder, by using a screening instrument and evaluating responses to questions about alcohol and other drug use.

(z) “Screening, brief intervention, and referral to treatment (SBIRT)” means a comprehensive, integrated public health approach for early identification and intervention with patients whose alcohol or drug use may put their health at risk.

(aa) “Substance use disorder (SUD)” means a cluster of symptoms meeting the criteria for SUD as set forth in the Diagnostic and Statistical Manual of Mental Disorders, 5<sup>th</sup> edition (DSM-5) (2013), available as noted in Appendix A.

(ab) “Title XIX” means the joint federal-state program described in Title XIX of the Social Security Act and administered in New Hampshire by the department under the medicaid program.

(ac) “Title XXI” means the joint federal-state program described in Title XXI of the Social Security Act and administered in New Hampshire by the department under the medicaid program.

(ad) “Treatment plan” means an action plan, written in behavioral terms, which:

(1) Is consistent with the competencies described in Section 2: Practice Dimensions, II. Treatment Planning of the “Addiction Counseling Competencies, TAP 21” (2017 revision), available as noted in Appendix A;

- (2) Is based on evaluation data;
- (3) Identifies the recipient's clinical needs, treatment goals, and objectives;
- (4) Defines the strategy for providing services to meet those needs, goals, and objectives;
- (5) Provides the criteria for terminating specific interventions; and
- (6) Includes specification and description of the indicators to be used to assess the individual's progress.

Source. #10655, INTERIM, eff 8-15-14, EXPIRES: 2-11-15; ss by #10779, eff 2-11-15; ss by #10922, eff 9-1-15; ss by #11107, eff 7-1-16; amd by #12012, INTERIM, eff 10-25-16, EXPIRES: 4-23-17; amd by #12131, eff 3-10-17; ss by #12681, eff 11-27-18