

Administrative Rules Update for Substance Use Disorder (SUD) Programs

An Overview of the 2023 SUD Administrative Rules Changes

Opening Remarks by
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Presentation Agenda

- 1) Background on SUD Administrative Rules
- 2) Who works in LARA's State Licensing Section for SUD facilities?
- 3) Michigan Covered Providers
- 4) Statutory Acts
- 5) How are facilities licensed?
- 6) Outline of SUD Administrative Rules
- 7) SUD Administrative Rules Changes
- 8) Questions

About This Presentation



Background on the SUD Administrative Rules

- On June 26, 2023, LARA's updated Substance Use Disorder (SUD) administrative rules went into effect.
- The updated rules include important changes including the following: the addition of branch offices and mobile units, the removal of buprenorphine and naltrexone from facility licensure requirements, the expansion of staff development and training opportunities, and the broadening of the types of counselors who can provide counseling services – among others.

Key Takeaway

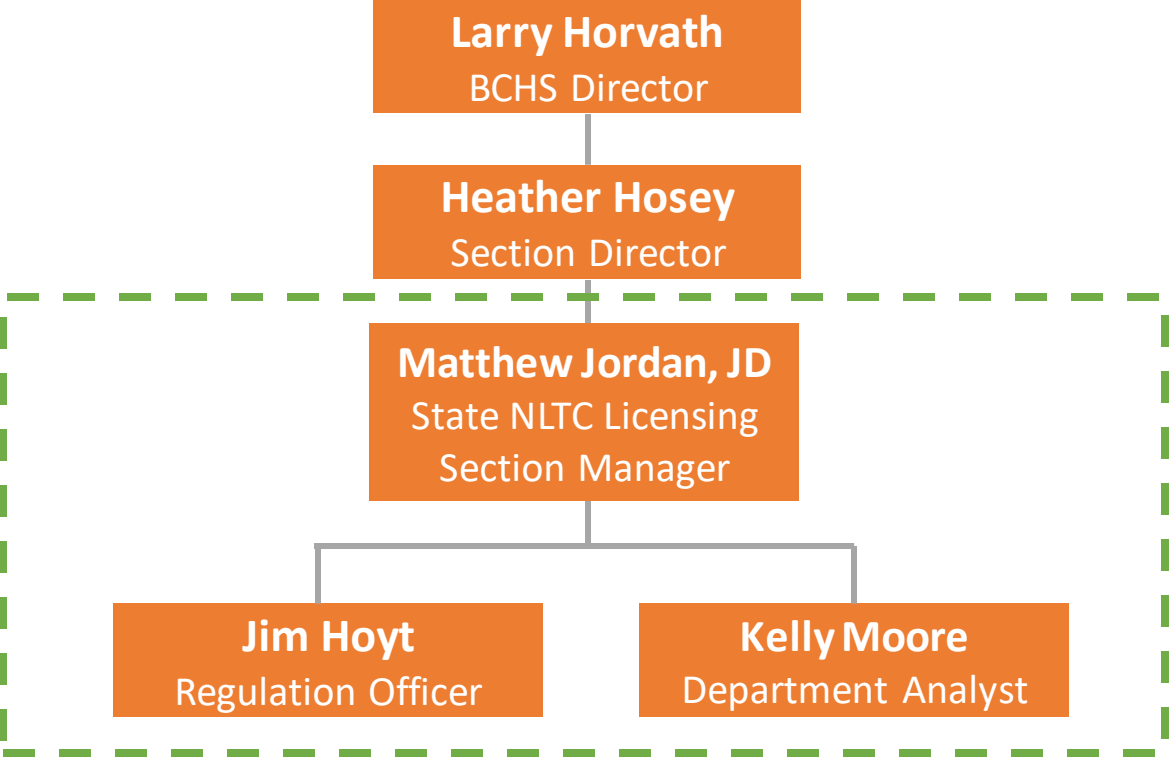
These rules serve to protect SUD service recipients and support the successful business practices of SUD service providers.

Background



Who Works in LARA's State Licensing Section for SUD Facilities?

Organizational Chart



Michigan Covered Providers

State & Federally Licensed Facilities

No. of Providers	Type	State License	Federally Certified
865	Substance Use Disorder Programs*	Yes	No
159	Hospitals	Yes	Yes
161	Freestanding Surgical Outpatient Facilities	Yes	Yes
55	Inpatient Psychiatric Hospitals/ Units	Yes	Yes

No. of Providers	Type	State License	Federally Certified
187	Hospice Agencies	Yes	Yes
16	Hospice Residences	Yes	Yes
432	Nursing Homes/ LTC Facilities	Yes	Yes
278	Homes for the Aged (HFA)	Yes	No

**Methadone programs require state licensure and federal certification*

Statutory Acts

State & Federal Regulations

State Regulations

- Public Health Code, Act 368 of 1978, Articles 6 and 17
- Mental Health Code, Act 258 of 1974, Chapters 1, 2A, and 7

Federal Regulations

- Social Security Act, Section 1864
- Code of Federal Regulations, 42 CFR Part 488
- Clinical Laboratory Improvement Amendments (CLIA)

Other Agencies

- Michigan Department of Health and Human Services
- Bureau of Professional Licensing
- Substance Abuse and Mental Health Services Administration
- Drug Enforcement Administration
- Food and Drug Administration

How are Facilities Licensed?

Licensing Michigan Facilities

- A state licensure survey is required to be performed before a license is issued, per the Public Health Code Act 368 of 1978. The Mental Health Code has similar applicable language, and the SUD Administrative Rules spell out flexibility on how and when to perform prelicensure and post-licensure surveys.
- A prelicensure inspection is required for outpatient, residential, withdrawal management, and methadone programs. Only a post-licensure survey is required for CAIT and outpatient.
- State licensing for SUD programs reviews operational, staffing, and procedural oversight.
- Substance Use Disorder programs have the same survey review cycle: Visit to each licensed health facility or agency at least once every three years. The Department can visit more frequently if warranted or for complaints.

Section 333.6233 states a person not otherwise licensed to provide psychological, medical, or social services shall not establish, conduct, or maintain a substance use disorder services program unless it is licensed under this part.

Section 333.6234 permits the Department (i.e., LARA) to create and administer administrative rules. These are the day-to-day rules that a substance use disorder facility must adhere to for licensing purposes.

How are Facilities Licensed?

Licensing Michigan Facilities

Licensing Action

Licensing action occurs every year and expires July 31st of each year

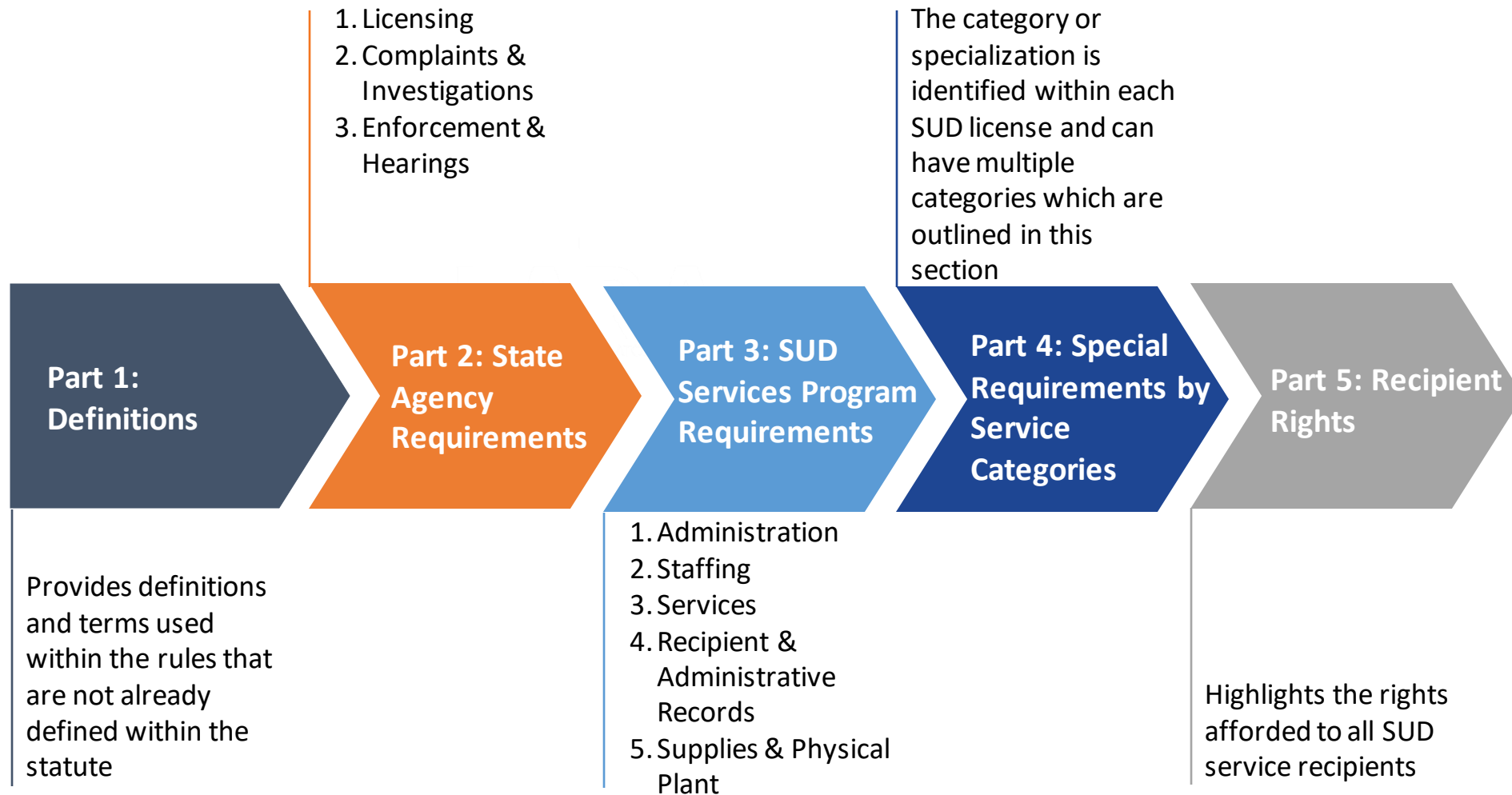
Fees

All SUD facilities (apart from branch offices) licensed by the state are subject to the \$500 licensing fee.



Outline of SUD Service Program Administrative Rules

SUD Rules Outline



SUD Administrative Rules Changes

New regulations introduced in LARA's updated SUD Service Program Administrative Rules, effective June 26, 2023



Branch Offices

- Must be associated with a parent office open for at least 2 years
- Must be within 75 miles of parent location
- No more than 3 locations per office
- Open under 20 hours per week



Mobile Units

- Must be associated with a parent office open for at least 2 years
- Must be within 75 miles of parent location
- Total number of units must not exceed 3 for the parent location



Naloxone Kits

- Programs must offer a naloxone kit to all recipients with a history of OUD or otherwise determined to be at risk of overdose



Discourage Treatment Termination

- Licensee policies and procedures may not allow discharge of a recipient due to a return to use if recipient reengages in treatment and complies with protocols

SUD Administrative Rules Changes

Changes to regulations that were in previous rules



Withdrawal Management

- Greater alignment with ASAM criteria
- Now the withdrawal management (WM) services are disaggregated into clinically managed and medically monitored



Outpatient Counseling

- Expanded the types of counselors that can provide counseling services
- Limited certified counselors (with supervision) can now be responsible for no more than 32 recipients



Staff Development & Training

- In-service education categories were expanded to include: first aid, medical emergencies, WM risks, naloxone, cultural competency and many other topics



Limited Certified Counselor

- Limited certified counselors can be employed or volunteer to offer counseling to SUD program recipients
- Must complete a minimum set of state approved requirements

SUD Administrative Rules Changes

Changes to withdrawal management & outpatient counseling rules

Withdrawal Management

Old Rules	New Rules
<ul style="list-style-type: none"> • “Residential detoxification” • Counseling services could only be provided by an array of licensed counselors and fully certified counselors • A physician, physician’s assistant, APRN, RN, or LPN under the supervision of an RN were required to be onsite at all hours of operation 	<ul style="list-style-type: none"> • “Clinically managed withdrawal management” & “medically monitored withdrawal management” • Counseling services can be provided by all counselors indicated in the old rules along with the following: LMFT, limited LMFT under the supervision of an LMFT, limited certified counselor under the supervision of a licensed or certified counselor • There are differences in required staff onsite during all hours of operation depending on the type of withdrawal management program: <ol style="list-style-type: none"> (1) In medically monitored programs, the staff requirements are the same in the old rules (2) In clinically managed programs, medical professionals must be on call at all hours of operation, and 1 trained staff member must be onsite at all hours of operation

Outpatient Counseling

Old Rules	New Rules
<ul style="list-style-type: none"> • Counseling services could only be provided by an array of licensed counselors and fully certified counselors • 1 counselor to 65 recipients 	<ul style="list-style-type: none"> • LMFT, limited LMFT under the supervision of an LMFT, limited certified counselor under the supervision of a licensed or certified counselor • All licensed and fully certified counselors: 1 counselor to 65 recipients; limited certified counselors (LCC): 1 LCC to 32 recipients

SUD Administrative Rules Changes

Changes to staff development and training & limited certified counselor rules

Staff Development &

Old Rules	New Rules
<ul style="list-style-type: none">Minimum standards for staff development and training were not specified	<ul style="list-style-type: none">In-service education must include, at a minimum:<ol style="list-style-type: none">(1) first aid and cardiopulmonary resuscitation;(2) training to identify signs and symptoms of a medical emergency;(3) training on potential medical risks associated with withdrawal from substances and combinations of substances and appropriate acute interventions;(4) medication administration and monitoring;(5) emergency response protocols, including medical, psychiatric, and safety emergencies;(6) signs and symptoms of intoxication and withdrawal, including seizures;(7) vital sign measurement and interpretation; and(8) naloxone administration

Limited Certified Counselor

Old Rules	New Rules
<ul style="list-style-type: none">Limited certified counselors could not contribute to the recipient-to-counselor ratio	<ul style="list-style-type: none">Limited certified counselors to be responsible for no more than 32 recipients of outpatient and/or methadone program services and no more than 10 recipients of residential and/or residential withdrawal management services

SUD Administrative Rules Changes

Administrative rules that were eliminated



SARF

- Screening, Assessment, Referral, Follow-up services are deregulated



Medication Assisted Treatment

- Additional license and associated counseling, drug testing, and other buprenorphine & naltrexone requirements eliminated
- Methadone rules are now harmonized w/ federal rules



Inpatient Services

- Only applicable to a licensed hospital
- Legislative changes are required for total removal of LARA's rules for inpatient services
- TBD



Prevention Services

- Legislative changes are required for the total removal of LARA's rules for prevention services
- TBD

Any Questions?

Thank you for providing quality
services in Michigan

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