



## Minnesota Department of **Human Services**

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**DATE:** November 1, 2015

**TO:** **CHEMICAL DEPENDENCY TREATMENT PROGRAMS (Rule 31)**

**RE:** Licensing Updates and Renewal Information for Licenses Effective January 1, 2016

### **A. NEW AND UPDATED INFORMATION**

- 1. 2015 Legislation affecting Chemical Dependency Treatment Programs.** The 2015 Minnesota Legislature passed amendments affecting Department of Human Services (DHS) license holders. A summary of those amendments is available in a separate legislative summary memo, [Select Highlights of 2015 Legislation](#). As a license holder, it is your responsibility to read the summary and to take the action necessary to comply with any new requirements.

The updated 2015 statutes are now available online through the [Office of the Revisor of Statutes](#) website.

- 2. Minnesota Adult Abuse Reporting Center.** Minnesota has a new centralized system for reporting suspected maltreatment of vulnerable adults. On July 1, 2015, the [Minnesota Adult Abuse Reporting Center](#) (MAARC) was established. MAARC provides a web-based reporting system and a call center available 24 hours a day, seven days a week for mandated reporters. Mandated reporters are professionals or professional's delegate identified by law ([Minnesota Statutes, section 626.5572, subdivision 16](#)) who **MUST** make a report if they have reason to believe that the abuse, neglect or financial exploitation of a vulnerable adult has occurred. Mandated reporters can use the Minnesota Adult Abuse Reporting Center's web based report at [Minnesota Adult Abuse Reporting Center](#), or make a phone report by calling the statewide toll-free number at 844-880-1574.
- 3. Positive Supports Rule.** The Positive Supports Rule (PSR) is a new Minnesota rule that requires DHS license holders to use person-centered principles and positive support strategies for persons with developmental disabilities or related conditions. The rule applies to all DHS licensed programs who serve a person with a developmental disability or related condition. Information about the positive supports rule is currently available on the [DHS website](#).

The Department is working to develop a frequently asked question (FAQ) document to provide more direction and address specific questions submitted by license holders. This information will be posted to the DHS website and emailed to your designated Authorized Agent. In addition, questions about the Positive Supports Rule can be emailed to the DHS-Disability Services Division at [positivesupports@state.mn.us](mailto:positivesupports@state.mn.us).

- 4. NETStudy 2.0, the new background study system.** The Background Study Division continues to move forward with development and implementation of NETStudy 2.0. This is the new portal to submit background study requests to DHS that includes use of the

background study subject's fingerprints for the criminal record search and use a photograph for identity verification. Currently, there are over [50 DHS authorized fingerprint and photo service locations](#) operating across the state. After the background study subject is fingerprinted and photographed, background study determinations in NETStudy 2.0 are expected to be completed within a few hours for over 90% of requests, some determinations will be provided within an hour or two. When the law requires additional information or review, the background study may take more time. In these cases, the program is informed of the subject's background study status and whether the person must be supervised. In the new system, providers receive status updates and background study determinations electronically eliminating the need to maintain paper files for licensing reviews.

DHS began pilot testing NETStudy 2.0 in June of 2014 and a small group of providers, representing multiple license types, have fully transitioned to the new system. The Background Study Division is continuing to work on additional system functionality and will extend pilot testing with counties and other providers over the coming months. Implementation to larger groups of providers will be based on the completion of system refinements and the results of testing. In all cases, entities will be contacted at least four weeks in advance of being transitioned to the new system. During this time, provider user accounts will be established through "on boarding" and training will be available. More information is available on the [Background Study web page](#) under the [NETStudy 2.0 / Background Study Changes](#) feature. [FAQs](#) are also posted as is a link to [subscribe to an email list](#) for updates about NETStudy 2.0.

## **B. Information FOR ALL Rule 31 CHEMICAL DEPENDENCY TREATMENT PROGRAMS**

- 1. Approval of Requirements for Consolidated Chemical Dependency Treatment Fund (CCDTF) Services.** We appreciate all the time and effort by license holder's to submit the items requested to assist in verifying programs are meeting the requirements for residential and enhanced services billed to the CCDTF. Through this process providers should now more clearly understand the requirements for providing services that are billed to the CCDTF and we hope this better understanding will lead to a greater level of compliance with the requirements in the future.
- 2. Providing the Required 5, 15, or 30 Hours of Clinical Services Each Week for Low, Medium, and High Intensity Residential Services and Children's Residential Chemical Dependency Services.** Providers have asked what to do in cases when, due to medical appointments, a client does not receive the required 5, 15, or 30 hours of clinical services during a week. In these cases providers should first attempt to make up the services at some point during the remainder of the week. If this is not possible, document in the client's file the reason the client was unable to receive the required hours of services for that week. If the client is not receiving the required number of hours for multiple weeks, the provider must assess whether the intensity level is appropriate for the client.
- 3. Information for Tuberculosis (TB).** We are requesting when providing clients in a chemical dependency treatment program with the required tuberculosis information, please give each client one of the following fact sheets from the Minnesota Department of Health.
  - [TB Fact Sheet \(English\)](#)
  - [TB Fact Sheets \(Additional Languages\)](#)
- 4. Consolidated Chemical Dependency Treatment Fund (CCDTF) Billing Requirements:** To assist license holders in complying with CCDTF Billing and Rate Enhancement Requirements DHS has released two Bulletins and one E-memo. These Bulletins and E-memo provide instructions on complying with qualified staff, service, billing and documentation requirements related to base rate and enhanced rate funding for payment from the CCDTF:

- [# 14-51-01 Complying with Chemical Dependency Treatment Fund Billing and Rate Enhancement Requirements](#)
- [# 15-51-01 Complying with Consolidated Chemical Dependency Treatment Fund Billing for Specifically Qualified Individuals](#)
- [#15-15 CCDTF E-MEMO Further Clarification of Bulletin #14-51-01, Complying with Chemical Dependency Treatment Fund Billing and Rate Enhancement Requirements](#)

These Bulletins and E-Memo replace previous ADAD policy interpretations, answers to Frequently Asked Questions, and other formal and informal guidance provided to chemical dependency treatment providers regarding CCDTF billing and rate enhancement requirements.

5. **Opioid addiction treatment education.** Minnesota Statutes, [Section 245A.1915](#) requires that all providers licensed to provide chemical dependency treatment services must provide educational information concerning treatment options for opioid addiction, including the use of a medication for the use of opioid addiction and recognition of and response to opioid overdose and the use and administration of naloxone to clients identified as having or seeking treatment for opioid addiction. The commissioner has developed educational material to comply with this requirement and is available at this link: [Options for Opioid Treatment in Minnesota and Overdose Prevention](#)
6. **Definitions for Weekly, Monthly, and Quarterly.** [Minnesota Statutes, section 245A.02, subdivisions 20 through 22](#) now includes definitions for Weekly, Monthly, and Quarterly.
7. **Description of treatment services provided by the program.** [Minnesota Rules, part 9530.6455, item J](#) requires the license holder's written policy and procedures manual to contain a description of treatment services including the amount and type of client services provided. When developing a description of the services, license holders must describe how each service will be implemented *in their programs*, and not only reiterate the rule's description of the treatment service.
8. **DSM-5.** On October 1, 2014, the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Health Disorders* (DSM), 5<sup>th</sup> Edition, became the required classification reference tool for clinicians and licensed mental health professionals. For more information, please click on the following link: [ICD-10 and DSM-5 Frequently Asked Questions](#)
9. **Electronic Health Records.** Information regarding the electronic health record requirements in [Minnesota Statutes, section 62J.495](#) may be obtained on the Minnesota Department of Health website at, [Minnesota Interoperable Electronic Health Record Mandate](#).
10. **Frequently cited violations.** The following requirements continue to be frequently cited violations during licensing reviews.
  - **Individual Treatment Plan:** Treatment plans must include specific methods that include the amount, frequency, and anticipated duration of treatment service as identified in [Minnesota Rules, part 9530.6425, subpart 2, item A](#).
  - **Progress Notes:** Progress notes are required to include the type and amount of each treatment service the client has received as identified in [Minnesota Rules, part 9530.6425, subpart 3, item A, subitem \(2\)](#).

- **Personnel file documentation:** The personnel files of treatment directors, supervisors, nurses, and counselors must contain documentation of 12 hours of training in co-occurring mental health problems and substances use disorder that includes the competencies identified in [Minnesota Rules, part 9530.6460, subpart 2, item E.](#)
- **Counselor documentation:** The license holder must maintain documentation that at least 25 percent of a counselor's scheduled work hours are allocated to indirect services as identified in [Minnesota Rules, part 9530.6445, subpart 4.](#)
- **Reporting of client death:** It is required that DHS licensed programs must have a written policy for reporting the death of an individual served by the program to the commissioner of human services within 24 hours of receiving knowledge of the death of an individual served by the program as identified in [Minnesota Statutes, 245A.04, subdivision 16.](#)
- **Client Rights:** Minnesota Rules 4747.1500 (Client Bill of Rights for Alcohol and Drug Counselors) was repealed effective August 1, 2012. The Client Bill of Rights for Alcohol and Drug Counselors is now located in [Minnesota Statutes, section 148F.165, subdivision 2,](#) which became effective August 1, 2012. Please ensure that all program documents related to client rights are revised to meet the new requirements.

It is recommended that license holders reinforce program procedures to ensure compliance with these requirements.

### C. Information specific to ALL *outpatient* Rule 31 CHEMICAL DEPENDENCY TREATMENT

1. **Vulnerable Adult Determination.** As required by [Minnesota Statutes, section 245A.65, subdivision 1a,](#) a license holder providing services to adults who are excluded from the definition of vulnerable adult under [Minnesota Statutes, section 626.5572, subdivision 21, paragraph \(a\), clause \(2\),](#) must determine whether the person is a vulnerable adult:
  - Within 24 hours of admission to the licensed program;
  - Within 24 hours of client transferring from a license holder's residential to outpatient program; and
  - Within 24 hours of any incident that was reported under section [626.557](#) or would have been required to be reported under section [626.557](#) if one or more of the adults involved in the incident had been vulnerable adults.

Use of the DHS [Vulnerable Adult Determination Form – Rule 31](#) based on the definition in [Minnesota Statutes, section 626.5572, subdivision 21, clause \(4\),](#) is recommended to help outpatient chemical dependency treatment program staff determine whether an individual is a vulnerable adult.

2. **Individual Abuse Prevention Plan.** [Minnesota Statutes, section 245A.65, subdivision 2, paragraph \(b\),](#) requires that an individual abuse prevention plan must be developed as part of the initial service plan for each person receiving services in an outpatient treatment program who has been determined to be a vulnerable adult during the intake interview, or when a later determination of vulnerability is made. A review and

evaluation of the vulnerable adult's individual abuse prevention plan must be done weekly as part of the treatment plan review.

#### **D. INFORMATION for Residential and outpatient Rule 31 programs that serve PARENTS WITH THEIR CHILDREN**

- 1. Parent Education and Supervision of Clients' Children Requirements.** All chemical dependency treatment facilities that serve parents with their children are required to meet the new requirements in [Minnesota Statutes, section 245A.1443](#) related to: the provision of education to the child's parent related to safe bathing and reducing the risk of sudden unexpected infant death and abusive head trauma from shaking infants and young children; assessments of parent's capacity to meet the health and safety needs of the child while on the facility premises; and procedures addressing whether the program permits a parent to arrange for supervision of the parent's child by another client in the program.
- 2. Supervision of Clients' Children at a Rule 31 Licensed Facility.** In addition to the requirements of Minnesota Rules, parts [9530.6405 to 9530.6505](#), all license holders that offer supervision of children of clients are subject to the requirements of [Minnesota Rules, part 9530.6490](#).
- 3. Infant and Child Safety Requirements.** A licensed chemical dependency treatment program that serves clients with infants or children through five years of age, who sleep at the program must provide staff persons and volunteers training on the standards in [Minnesota Statutes, section 245A.1435](#) and on reducing the risk of sudden unexpected infant death and abusive head trauma from shaking infants and young children as described in [Minnesota Statutes, section 245A.1444](#).
- 4. Crib Safety Requirements.** Chemical dependency treatment programs with children in care who utilize cribs must follow all requirements in [Minnesota Statutes, section 245A.146](#). The license holder must perform and document safety inspections of every crib at least monthly and certify the crib is safe annually. The form to document crib safety requirements is located at, [DHS Monthly Safety Crib Inspection Form](#).

#### **E. INFORMATION SPECIFIC FOR opioid treatment PROGRAMS**

- 1. New Treatment of Opioid Addiction Requirements.** License holders providing opioid treatment services must meet the requirements of laws passed in the 2013 session and updated in 2014 and 2015 to strengthen regulation of methadone clinics and improve treatment for people who are addicted to opiates. These requirements are contained in [Minnesota Statutes, section 245A.192](#). Updated requirements that became effective in 2015 include the areas of:
  - Physician's order requirements in [Minnesota Statutes, section 245A.192, subdivision 3](#).
  - Requirements for clients being administered or dispensed doses that exceeds 150 milligrams of methadone or 24 milligrams of buprenorphine daily as required in [Minnesota Statutes, section 245A.192, subdivision 3a](#).
  - Comprehensive assessment, progress notes, and treatment plan reviews timelines for completion as required in [Minnesota Statutes, section 245A.192, subdivision 10](#).
  - Specific timeline requirements for physician review and subsequent actions related to prescription monitoring program (PMP) data as required in [Minnesota Statutes, section 245A.192, subdivision 11](#).

2. **Central Registry required information.** Reminder: the information submitted to the central registry must include a valid government-issued photo identification card. The government-issued photo identification card cannot be expired.

## F. GENERAL INFORMATION, UPDATES, AND RESOURCES

1. **Online information.** The [Licensing Division public website](#) is your primary source of information on licensing standards and requirements. As a license holder, it is your responsibility to frequently check for updates, changes, and additions to this information. Below are highlights of the available online information.
2. **Chemical Dependency Treatment licensing laws and rules.** Chemical Dependency Treatment program licensing laws and rules are available to you online through the [Minnesota Office of the Revisor of Statutes](#) as follows:
  - [Minnesota Rules, Parts 9530.6405 to 9530.6505 \(DHS Rule 31\)](#)
  - [Minnesota Statutes, Chapter 245A \(Human Services Licensing Act\)](#)
  - [Minnesota Statutes, Chapter 245C \(Human Services Background Study Act\)](#)
  - [Minnesota Statutes, Chapter 148F \(Alcohol and Drug Counselor Requirements\)](#)
  - [Minnesota Statutes, Section 626.557 \(Reporting of Maltreatment of Vulnerable Adults\)](#)
  - [Minnesota Statutes, Section 626.556 \(Reporting of Maltreatment of Minors Act\)](#)
  - [Minnesota Rules, Chapter 9544 \(Positive Rule\)](#)
3. **Mental health and chemical health programs licensing forms.** License holders have access to various [licensing forms](#) developed by DHS, intended for use by programs, and in compliance with current licensing requirements. Many forms are designed for general use by all licensed programs. Additionally, several optional forms are available to assist in meeting Rule 31 requirements.
4. **Self-monitoring checklists.** The DHS Licensing website maintains a [self-monitoring checklist](#) for use by Rule 31 license holders to evaluate their program's compliance with applicable licensing standards.
5. **Maltreatment information.** [Sample maltreatment reporting policies and procedures](#) and general information on [maltreatment investigations](#) are available online from the DHS Licensing web site.
6. **Alert information.** Information from our maltreatment investigations unit highlighting areas where injuries and harm to persons receiving services from DHS licensed facilities is available online from the DHS Licensing web site under [Alerts](#). Alerts are posted as needed throughout the year.
7. **Online mandated reporter training.** DHS Licensing offers online training courses for both [Vulnerable Adults Mandated Reporting](#) and [Maltreatment of Minors Mandated Reporting](#).  
**The Vulnerable Adults Mandated Reporting course** introduces mandated reporters to:
  - The Vulnerable Adults Act
  - Definition of maltreatment

- Who are the mandated reporters
- The Common Entry Point (CEP)

**The Maltreatment of Minors Mandated Reporter training** includes:

- The Reporting of Maltreatment of Minors Act
- An overview of the Minnesota Child Protection System
- Definition of maltreatment
- Who are mandated reporters

License holders are reminded that they must ensure mandated reporters under their control also receive training on the program's own maltreatment reporting policies and procedures in addition to the online course.

- 8. Licensing Lookup:** Public searches for DHS licensed programs can be done using the online [DHS Licensing Information Lookup](#) search tool or by reviewing the online DHS [licensed program list](#).

Since July 1, 2010, the Licensing Division has posted licensing actions and decisions issued to DHS licensed programs online through [DHS Licensing Information Lookup](#). The licensing actions and decisions that are available include:

- Correction orders;
- Orders for conditional license;
- Sanctions which include fines, suspensions, and revocations;
- Commissioner's response to license holders' requests for reconsideration of correction; orders and orders of conditional licenses;
- Commissioner's final orders resulting from contested case hearings; and
- Statements of final agency decision after appeal

Documents are posted in accordance with the requirements of the Minnesota Government Data Practices Act, [Minnesota Statutes, Section 13.46](#).

New licensing documents are posted daily on DHS Licensing Information Lookup. You may [sign up to receive daily emails](#) with links to newly published documents.

- 9. Applying for a new license.** If you plan to submit an application for a license for a new Rule 31 Program, please note that the application forms for new licenses have changed. When applying for a new license, the application must be submitted in this new format. The application is available on the [DHS/Chemical Health web page](#) in the Chemical Dependency Treatment Program section, and on the [Licensing Division's Forms page](#). Previous versions of the licensing application form are no longer acceptable and will be returned to the applicant.

- 10. The Licensing Division's telephone numbers and email.** Please ensure that your program's phone list and any applicable policies and procedures include current DHS telephone numbers:

- Licensing Division – (651) 431-6500
- Licensing Division's Main Fax – (651) 431-7673

- MH/CD Licensing Unit Email - [dhs.mhcdlicensing@state.mn.us](mailto:dhs.mhcdlicensing@state.mn.us)
- Maltreatment Intake – (651) 431-6600
- Maltreatment Fax – (651) 431-7601

**11. Background Studies.** The DHS website includes information on [Background Studies](#), which is now a separate division in the Office of the Inspector General. For questions regarding background studies or the NETStudy system, you can email [DHS.NETStudyAdmin@state.mn.us](mailto:DHS.NETStudyAdmin@state.mn.us) or call (651) 431-6620.

**2014 Background Study Changes:**

- a. When a background study must occur (Minnesota Statutes, section 245C.04)
  - 1) This provision extends the amount of time someone can be absent from a position from 90 to 120 days without needing a new background study.
  - 2) This provision also requires the license holder or program to initiate a new background study when an individual changes his or her legal name.
- b. Background studies initiated by the program (Minnesota Statutes, section 245C.20)
  - 1) This provision requires licensed programs to document the date of the background study and when the subject first had direct contact with people served by the licensed program.

**12. License renewal notice.** The annually published [License Renewal Notice](#) for each service class is located under general information on the Division of Licensing website. An archive of past license renewal information is maintained.

**G. LICENSE HOLDER REQUIREMENTS FOR LICENSE RENEWAL**

- 1. License fee payment for your 2016 license.** All license holders must pay for their 2016 license online. Your Authorized Agent will receive an email with instructions and a direct link to pay for your 2016 license fee(s). License fee payments must be made within 30 days from receipt of the email to allow enough time for your 2016 license(s) to be issued by January 1, 2016.
- 2. Failure to pay 2016 license fee.** Your current license expires December 31, 2015. If you fail to pay the 2016 license fee, you will need to apply for a new license. You cannot operate under an expired license while your new application is being processed. In addition, you will lose access to NETStudy to submit online background study requests.
- 3. Unpaid fines.** If you have an outstanding debt related to a fine or settlement agreement for which payment is delinquent, your 2016 license cannot be issued until the payment is received.
- 4. Programs closing on or before December 31, 2015.** If you plan on closing your program on or before December 31, 2015, please notify your licensor immediately so we can cancel the bill for your 2016 license.
- 5. Your onsite licensing review.** The annual renewal of your license is separate from the onsite licensing review conducted by your DHS licensor. You will receive notice from your licensor about the license review prior to your next scheduled review.
- 6. Change of license information.** If you wish to change any information on your license, please contact your licensor immediately so those changes can be approved before we issue

your 2016 license. If you hold multiple licenses and want the change to apply to each license you must complete a separate Change of License Information form for each license. If you have not identified an Authorized Agent or your Authorized Agent information is not current, it will delay the email to your Authorized Agent and the renewal of your 2016 license.

- 7. Questions regarding the license renewal process.** If you have any questions regarding the license renewal process, please contact the DHS licensor assigned to your program, or call the main Licensing Division phone number at 651-431-6500 and select option 4 to speak with a licensor, and then select option 4 to speak with a licensor of mental health or chemical dependency services.