OhioMHAS and Behavioral Health* Regulation
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Licensure and Certification
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Objectives

1. Describe the different types of entities OhioMHAS regulates, and the treatment services and activities that are licensed or certified.
2. Summarize the regulatory process that treatment providers undergo, and utilize this information to help a court make decisions on whether to partner with a provider.
The Acronym Game

- MHAS = Ohio Department of Mental Health and Addiction Services
- MH = Mental Health
- MI = Mental Illness
- AoD = Alcohol and Other Drugs
- SUD = Substance Use Disorder
- DIP = Driver Intervention Program
- DX = Diagnosis
- Dual DX = diagnosed with both MH and Substance Use disorder
- CMS = Centers for Medicare and Medicaid Services
- RSS = Residential State Supplement Program

The Acronym Game

- ADAMH/ADAMHS = Alcohol, Drug Addiction and Mental Health Services (Board)
- MHR/MHRS = Mental Health and Recovery Services (Board)
- CMH = Community Mental Health (Board)
- ADAS = Community Alcohol and Drug Addiction Services (Board)
- ASAM = American Society of Addiction Medicine
- TX = Treatment
- OTP = Opioid Treatment Program
Licensure vs. Certification

• License
  • Private Psychiatric Hospitals (ORC 5119.33)
  • Residential Facilities (ORC 5119.34)
  • Methadone Treatment Providers (ORC 5119.391 & 5119.392)
• Certify
  • Community Behavioral Health Providers (ORC 5119.36 & 5119.361)
  • Driver Intervention Programs (ORC 5119.38)

Required vs. Optional (6/21/2018)

• Required
  • Private Psychiatric Hospitals (ORC 5119.33)
  • Residential Facilities (ORC 5119.34)
  • Methadone Treatment Providers (ORC 5119.391 & 5119.392)
  • Driver Intervention Programs (ORC 5119.38)

• Optional
  • Community Behavioral Health Providers (ORC 5119.36 & 5119.361)
    ▪ MH, SUD, Dual DX
Prohibited from Regulating

- Sober Housing (aka Sober Home)/Sober Living/Recovery Housing
  - ORC 340.034 (A)(B)
  - Exception is Level 4, which is an SUD Residential Treatment Program
- Residential facility licensed/certified by:
  - Ohio Dept of Developmental Disabilities
  - Ohio Dept of Job and Family Services
  - Veteran’s Administration
  - Home of person w/ MI living with relative/guardian

Do Not Regulate

- Gambling Addiction
  - No specific regulations or “gambling addiction” service that is certified
  - Certified addiction treatment programs may offer treatment
- Veteran’s Administration MH and SUD services
- MHAS operated psychiatric hospitals (TJC accredited)
Required vs. Optional (Future State)

House Bill 111, Signed by Governor Kasich 6/29/18

• Required
  • Private Psychiatric Hospitals (ORC 5119.33)
  • Residential Facilities (ORC 5119.34)
  • Methadone Treatment Providers (ORC 5119.391 & 5119.392)
  • Driver Intervention Programs (ORC 5119.38)
  • Addiction Treatment Providers (ORC 5119.36 & 5119.361)
    • Includes Dual DX

• Optional
  • Mental Health Treatment Providers (ORC 5119.36 & 5119.361)

House Bill 111 Summary

• Requires OTP licensure (same process as Methadone licensure)
• Requires the following to be certified:
  ➢ Withdrawal management addiction services provided in a setting other than an acute care hospital;
  ➢ Addiction services provided in a residential treatment setting & services provided on an outpatient basis
• Exemptions:
  ➢ Individual authorized to practice a health care profession in Ohio... regardless of whether the services are performed as part of a sole proprietorship, partnership, or group practice
  ➢ Individual who provides services as part of employment or contractual relationship with a hospital outpatient clinic that is accredited by an accreditation agency or organization that the ODMHAS Director approves.
### Time Frames License/Certification

- One year
  - Private Psych Hospital
  - Methadone (OTPs in the future)
- Two years
  - Class Two Residential Facility
  - Class Three Residential Facility
- Three years
  - Class One Residential Facility
  - Certified BH Agency
  - DIP

### Private Psychiatric Hospitals (OAC 5122-14)

- Provide inpatient psychiatric treatment
- May provide inpatient dual diagnosis (MH/MI) treatment
- Licensed by MHAS, **and**
- Accredited by one of:
  - The Joint Commission (TJC)
  - Healthcare Facilities Accreditation Program (HFAP), sometimes mistakenly referred to as AOA
  - Det Norske Veritas (DNV)
- Complaints:
  - MHAS Licensure and Certification
  - Accrediting Body
  - Department of Health (survey on behalf of CMS)
Residential Facilities (OAC 5122-30)

• Class One
  • Accommodations & Supervision, Personal Care Services, and Certified Mental Health Services
    ➢ 1 or more unrelated persons with mental illness
• Class Three
  • Room and Board
    ➢ 5 or more unrelated adults with mental illness

Residential Facilities (OAC 5122-30)

• Class Two
  • Accommodations & Supervision, Personal Care Services
    ➢ 1 – 2 unrelated adults receiving RSS*
    ➢ 3 – 16 unrelated adults, at least three receiving personal care services
      ➢ Persons with mental illness
      ➢ Persons w/o mental illness, but unable to care for selves. Typically elderly. *
    ➢ 1 – 2 unrelated persons with mental illness
Residential Facilities (OAC 5122-30)

- Complaints:
  - MHAS Licensure and Certification
  - ADAMH/MHR Board
  - Local Ombudsman

Certification

- OAC 5122-24 through 5122-29
  (Standards for DIP & MH/SUD tx certification)
  - 5122-24 – definitions
  - 5122-25 – certification process
  - 5122-26 – policies and procedures
  - 5122-27 – documentation
  - 5122-28 – performance improvement, consumer outcomes, and research
  - 5122-29 – service/program standards, providers & supervisors, & interactive videoconferencing
For persons sentenced under ORC 4511.19

“...The rules shall include...methods of identifying and testing participants to isolate participants with alcohol and drug abuse problems, referral of such persons to community addiction services providers,...” ORC 5119.38

“The court may require the offender, as a condition of community control and in addition to the required attendance at a drivers' intervention program, to attend and satisfactorily complete any treatment or education programs that comply...

“...with the minimum standards adopted pursuant to Chapter 5119. of the Revised Code by the director of mental health and addiction services that the operators of the drivers' intervention program determine that the offender should attend and to report periodically to the court on the offender's progress in the programs.” ORC 4511.19 (G)(1)(a)(i)

Varying lengths of DIP

- 72, 48, & 13 hours
**All Other Certification**

<table>
<thead>
<tr>
<th>Certifiable Services</th>
<th>Certifiable Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Services (assessment, counseling &amp; medical services)</td>
<td>Peer Run Organization</td>
</tr>
<tr>
<td>MH Day Treatment</td>
<td>(MH) Community Psychiatric Supportive Treatment (CPST)</td>
</tr>
<tr>
<td>Forensic Evaluation</td>
<td>Therapeutic Behavioral Services and Psychosocial Rehabilitation</td>
</tr>
<tr>
<td>Behavioral Health Hotline</td>
<td>Consultation</td>
</tr>
<tr>
<td>Residential, Withdrawal Management, and Inpatient (non-acute) SUD</td>
<td>Prevention</td>
</tr>
<tr>
<td>Crisis Intervention</td>
<td>Referral and Information</td>
</tr>
<tr>
<td>Employment</td>
<td>Supplemental Behavioral Health</td>
</tr>
<tr>
<td>SUD Case Management</td>
<td>Intensive Home Based Treatment (IHBT)</td>
</tr>
<tr>
<td>Peer Recovery</td>
<td>Assertive Community Treatment (ACT)</td>
</tr>
</tbody>
</table>

**Certification Process**

- Submit application
- Desk review “Complete and Compliant”
- Application Plan of Correction, if applicable
Deemed vs Non-Deemed Status

- Deemed Status
  - Department recognized behavioral health accredit ing body has granted accreditation
    - CARF (Commission on Accreditation of Rehabilitation Facilities)
    - COA (Council on Accreditation)
    - The Joint Commission
    - *Excludes DIP and Methadone*
- Non-Deemed Status
  - MHAS conducts all application and survey functions

Certification Process continued

- Complete and Compliant Application
  - Deemed status application
    - Approved without further evaluation, including on-site survey. ORC 5119.361 (B)
      - Excludes DIP
  - Non-Deemed status application
    - Most services require on-site survey
Certification Process continued

• On-site survey review (may not be applicable to all)
  ➢ Physical plant environment
  ➢ Personnel files
  ➢ Clinical records
  ➢ Performance improvement
  ➢ Client rights & grievances
  ➢ Incident reporting
• Survey Plan of Correction (POC), if applicable
• Approve POC and/or conduct validation survey

Prevention, Assessment, & Treatment

• Prevention, Assessment and Treatment
  ➢ Mental Health
  ➢ Addiction
  ➢ Dual DX (or prevention activities)
• Assessment determines the need for treatment, and drives amount and type of treatment services.
• Treatment Plan
  ➢ Goals and objectives, services, SUD level of care (if applicable), frequency and duration
  ➢ Rules require collaboration with client
Treatment Services

Common
• Assessment
• Counseling (individual, group, family)
• Medical Services (Pharmacotherapy/Medication Assisted Treatment)
• SUD Case Management or (MH) CPST

Increasing Availability or Recovery Supports
• Employment
• Peer Recovery
• Intensive Home Based Treatment (IHBT)
• Assertive Community Treatment (ACT)
• Methadone (Licensed, not certified)

Methadone

• Must provide certified non-methadone services directly or through agreement
  • General services, SUD Case Management, and Crisis (must be provided by licensed methadone provided at program location)
  • Employment, Vocational Rehab and Education (at program location or through written agreement)
• Heavily regulated by Federal Government
  • Every state has a State Opioid Treatment Authority
Treating Opioid Use Disorders

Perspective: A chronic disease requires monitoring and treatment that corresponds to the evolution of that disease over time

• Stabilization
• Effective psychosocial treatment
• Pharmacological treatments (Medication Assisted Treatment)
• Recovery supports (safe housing, employment, etc.)
• Harm reduction approaches

References: Dr. Mark Hurst, Medical Director, OhioMHAS

Medication Assisted Treatment

• Not certified/licensed as a specific service
  ➢ Methadone, OTP license
  ➢ Medical services as part of “General Services”
• Evidenced-based practice
• Individualized treatment, including type of medication
• Includes psychosocial services
• Methadone, Suboxone (buprenorphine), Vivitrol (naltrexone) alone are NOT MAT
All MATs Improve Abstinence Rates

<table>
<thead>
<tr>
<th>Medication</th>
<th>With MAT (% Opioid Free)</th>
<th>Without MAT (% Opioid Free)</th>
<th>NNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Naltrexone ER</td>
<td>36 %</td>
<td>23 %</td>
<td>7.7</td>
</tr>
<tr>
<td>Buprenorphine</td>
<td>20-50 %</td>
<td>6%</td>
<td>7.1-2.3</td>
</tr>
<tr>
<td>Methadone</td>
<td>60 %</td>
<td>30 %</td>
<td>3.3</td>
</tr>
</tbody>
</table>

NOTES:
• COMPARATIVE CONCLUSIONS CANNOT BE DRAWN FROM THIS
• ALL MAT WAS PROVIDED ALONG WITH RELAPSE PREVENTION COUNSELING


Drug Testing

- Random
- Check for unexpected substances
- Check for lack of expected substances
- Treatment Tool
- The ASAM Appropriate Use of Drug Testing in Clinical Addiction Medicine
  ➢ http://eguideline.guidelinecentral.com/i/840070-drug-testing-pocket-guide/0?
- Addiction is chronic disease
ASAM Criteria

• Six Dimensions of Multi-Dimension Assessment
  1. Acute Intoxication and/or Withdrawal Potential
  2. Biomedical Conditions and Complications
  3. Emotional, Behavioral, or Cognitive Conditions and Complications
  4. Readiness to Change
  5. Relapse, Continued Use or Continued Problem Potential
  6. Recovery/Living Environment

ASAM Levels of Care

• Outpatient SUD Services
  ➢ Level 1: Outpatient
  ➢ OTP Level 1: Opioid Treatment Program
  ➢ Level 2.1: Intensive Outpatient
  ➢ Level 2.5: Partial Hospitalization
  ➢ Level 2-WM Ambulatory Withdrawal Management w/ Extended On-site Monitoring
• Withdrawal Management (24 Hour)
  ➢ Level 3.2-WM Clinically Managed Residential Withdrawal Management
  ➢ Level 3.7-WM Medically Monitored Inpatient Withdrawal Management
ASAM Levels of Care

- Residential
  - Level 3.1 Clinically Managed Low-Intensity Services
  - Level 3.3 Clinically Managed Population Specific Residential
  - Level 3.5 Clinically Managed High Intensity Residential
  - Level 3.7 Medically Monitored Intensive Inpatient (Residential; not acute care hospital)
- Hospital
  - Level 4.0 = Medically Managed Intensive Inpatient

Withdrawal Management vs. Detoxification

Withdrawal management refers to the medical and psychological treatment of individuals who are experiencing a withdrawal syndrome due to either reducing their use of a particular drug or totally ceasing their use.¹

Detoxification occurs when body removes toxins. Physical process.

¹ Reference: World Health Organization Definition 2009
Drug Testing

- Random
- Treatment Tool
- The ASAM Appropriate Use of Drug Testing in Clinical Addiction Medicine
- Addiction is chronic disease

Recovery Housing (not regulated)

- 4 Levels of Recovery Housing defined by National Alliance for Recovery Housing
  ▪ [https://www.ohiorecoveryhousing.org/narr-levels-overlay](https://www.ohiorecoveryhousing.org/narr-levels-overlay)
- Ohio recovery housing providers can seek voluntary certification from Ohio Recovery Housing
- ORH Recovery Housing Locator
  ▪ [https://find.ohiorecoveryhousing.org/?orhl_sc_gender&orhl_sc_within=9999&orhl_sc_location &orhl_sc_name&orhl_sc_NARR_level&orhl_search=Search%20Now#orhl_search_results](https://find.ohiorecoveryhousing.org/?orhl_sc_gender&orhl_sc_within=9999&orhl_sc_location &orhl_sc_name&orhl_sc_NARR_level&orhl_search=Search%20Now#orhl_search_results)
Information Available On-Line

• Licensed/Certified entities (transitioning to more accurate information. Expected completion by 12/31/18.)
• On-line: https://lacts.mh.state.oh.us/Account/Login?ReturnUrl=%2f
  – Do not create account.

Incident Reporting (Providers Self-Report)

• Alleged abuse, neglect, defraud (exploitation)
• Missing medication (theft or unknown)
• Suicide
• Homicide by client
• Accidental death (on premises, or during care or treatment)
• Restraint/seclusion categories
• Medication diversion
• Selling drugs on property
• Involuntary termination without appropriate client involvement
• Assault
• Med error/adverse reaction
• Medical events impacting operations (contagious w/ other parameters)
• Temporary closure
Complaints

• E-Mail
  ➢ LicCert@mha.ohio.gov
• Fax
  ➢ 614-485-9739
• Complaint Form On-Line (not required)
  ➢ http://mha.ohio.gov/Portals/0/assets/Regulation/LicensureAndCertification/compliant-form-dmh-0982.pdf
• Telephone (not preferred method)
  ➢ 614-752-8880

What Can Court Expect from Provider

• Quality treatment by qualified clinicians
• Appropriate clinical supervision
• SUD Treatment
  • Assessment using ASAM criteria
  • Placement into level of care based on ASAM criteria, unless not available or client refuses
  • Client movement through levels of care
  • Drug testing (either directly or through referral)
• Individualized treatment, rather than a defined days/weeks program
• Appropriate post treatment planning
**What Can Courts Do?**

- Require accountability from treatment providers
- Listen to the people appearing in court
  - Pattern of similar complaints?
- Submit complaints to MHAS when warranted
- If provider not certified, ask about accreditation as evidence of compliant to quality standards (voluntary)
- SUD TX - Understand relapse may be part of the process
- Resolve conflict when court orders treatment and individual is assessed as having no MH or SUD diagnosis

**SAMSHA Store**

https://store.samhsa.gov/

- Order free publications or download. Examples:
  - Tips for Teens: The Truth About Heroin
    - https://store.samhsa.gov/product/Tips-for-Teens-The-Truth-About-Heroin/PEP18-02
  - TIP 51: Substance Abuse Treatment: Addressing the Specific Needs of Women
  - Understanding A First Episode Of Psychosis Young Adult: Get the Facts