**Title 10 MARYLAND DEPARTMENT OF HEALTH**

**Subtitle 63 COMMUNITY-BASED BEHAVIORAL HEALTH PROGRAMS AND SERVICES**

**Chapter 01 Requirements for All Licensed Programs**

***Symbol Key***

* Roman type indicates existing text regulations
* Italic type indicates proposed new text
* [Single bracket} indicates text proposed for deletion

*10.63.01.02*

**.02 Definitions.**

A. (text unchanged)

B. Terms Defined.

(1) “Accreditation” means the approval granted by an approved accreditation organization of a provider, or the process of obtaining the approval.

(2) “Accreditation-based license” means a license that, in accordance with COMAR 10.63.02, may be issued **[**or received**]** only if the provider is accredited by an approved accreditation organization.

*(3) Active monthly caseload” means the count of unique individuals who have received services from the program in a given calendar month.*

**[**(3)**]** *(4)*—**[**(4)**]***(5)* (text unchanged)

*(6) Agency means Provider as defined in this section.*

*(7) “Agency-sponsored employment” means an employment arrangement in which a recipient of supported employment services is employed by a facility, entity, subsidiary, affiliate, or contract site that is owned, operated, or managed by the supported employment program in which the individual receives his or her services or by its parent or umbrella organization*.

**[**(5)**]** *(8)* “Agreement to cooperate” means a written agreement, *on a form specified by the administration*, between the program and a core service agency, local addictions authority, or local behavioral health authority that provides for coordination and cooperation in carrying out behavioral health activities in a given jurisdiction.

**[**(6)**]** *(9)* “American Society of Addiction Medicine (ASAM) Criteria” means an instrument designed to indicate *current* placement guidelines for admission, continued stay, and discharge of individuals with a substance-related disorder*, or at risk for a substance-related disorders*.

*(10) “Applicant” means the owner, manager, alternate manager, board member or required management staff submitting an application for licensure under COMAR 10.63.*

**[**(7)**]** *(11)*—**[**(8)**]** *(12)* (text unchanged)

*(13) “Assertive Community Treatment (ACT)” means an evidence-based practice approved by the Administration which offers a specified level of Mobile Treatment Services to participants.*

**[**(9)**]** *(14)* “Assessment” means the process of ascertaining the **[**treatment**]** *behavioral health* needs of an individual seeking behavioral health services.

**[**(10)**]** *(15)* “Behavioral health program” means:

(a) A substance-related disorders program;

(b) A mental health disorders program;

(c) An addictive **[**disorder**]** *disorders* program; or

(d) A program that consists of a combination of **[**disorder**]** programs listed above.

*(16) “Behavioral Health Professional” means a psychiatrist, CRNP-PMH, APRN-PMH, LCSW-C, LCPC, LCADC, or properly supervised LGPC, LMSW, LGADC.*

**[**(11)**]***(17)*—**[**(12)**]**(18) (text unchanged)

*(19) “Campus setting” means a site on which a program conducts a single program in multiple buildings on the same property, on two or more properties which are contiguous, or on multiple levels of the same building.*

**[**(13)**]***(20)* “Certification” means, unless otherwise specifically stated, the **[**approval**]** *authorization* issued by the former Maryland Alcohol and Drug Abuse Administration **[**authorizing**]** *allowing a* substance use disorder treatment programs to operate in Maryland.

**[**(14)**]***(21)* (text unchanged)

*(22) “Competitive integrated employment” means work that is performed on a full-time or part-time basis within the competitive labor market, including self-employment, for which an individual with a disability is:*

*a. Compensated at or not less than federal minimum wage requirements or state or local minimum wage requirements, whichever is higher, and not less than the customary rate paid by the employer for the same or similar work performed by other individuals without a disability;*

*b. At a location where the individual with a disability interacts with other individuals without a disability, exclusive of supervisory or service provider staff, to the same extent that individuals without a disability who are in comparable positions interact with other individuals; and*

*c. Presented, as appropriate, with opportunities for advancement that are similar to those offered other individuals without a disability who are in comparable positions.*

**[**(15)**]***(23)—***[**(20)**]***(28)* (text unchanged)

**[**(21) “Deemed status” means the procedure, pursuant to COMAR 10.21.16.10 or COMAR 10.47.04.05E under which programs with accreditation from an approved accreditation organization are permitted to operate in Maryland.**]**

**[**(22)**]***(29)* “Demonstration project” means an experimental project that, if deemed successful, **[**will**]** *may* be considered for future adoption.

**[**(23)**]***(30)* (text unchanged)

**[**(24)**]***(31)* “Designated **[**approval**]** *licensing* unit” means the office within the Department that is designated by the Secretary to:

(a)—(d) (text unchanged)

*(32) “Designee” means any entity designated to act on behalf of the Department.*

**[**(25)**]***(33)*—**[**(27)**]***(35)* (text unchanged)

**[**(28)**]***(36)* “Exempt provider” means a provider that, under Health-General Article, §7.5-401, Annotated Code of Maryland, is not required to be licensed by the Secretary *under COMAR 10.63* to provide services in Maryland.

*(37) “Entitlement Management Record” means the form submitted to the local designated authority that documents, at the time of residential rehabilitation program admission and annually thereafter, that the resident has applied for and secured all benefits for which the individual is eligible or entitled*.

**[**(29)**]***(38)* “Family” means an individual’s immediate relatives or significant others *designated by the individual*.

**[**(30)**]***(39)* “Family provided support services” means a set of non-clinical activities provided by family members of individuals with mental health**[**or **]***,* substance-related **[**and**]***, or* addictive disorders*, which are designed* to support individuals **[**with the disorders**]** or **[**their**]** families *affected by these disorders*.

*(40) “Governing Body” means the individual, group, board, or agency that has ultimate authority and responsibility for establishing policy; maintaining quality of care, treatment or services; and providing for organization management and planning.*

*(a) This includes owners, shareholders, and board members.*

**[**(31)**]***(41)* Group Home.

(a) (text unchanged)

(b) “Group home” does not include:

(i)—(iii) (text unchanged)

(iv) *A facility that is* **[**Organized**]** *organized* wholly or partially to make a profit.

*(42) Group Practice – A group practice is a group of two or more individuals licensed under the Health Occupations Act, legally organized in a partnership, professional corporation, foundation, not-for-profit corporation, faculty practice plan, or similar association: and for which substantially all of the services of the members of the group are provided through the group and are billed in the name of the group.*

**[**(32)**]***(43)* (text unchanged)

*(44) “Halfway House” means a transitional, 24‐hour structured supportive living/treatment/recovery facility, licensed at the Residential-Low Intensity 3.1 level, for reintegration into the community generally after primary treatment at a more intense level. This service provides safe housing, structure and support affording individuals an opportunity to develop and practice their interpersonal and group living skills, strengthen recovery skills, reintegrate into their community, and find or return to employment or further education.*

*(45) “Individual practitioner” means practitioner authorized to practice independently under the Health Occupations Act.*

*(46) “Intern” means an individual who is:*

*a. Pursuing a degree at an accredited colleges or university toward state licensure as a mental health professional;*

*b. Delivering services or performing work as part of a formal fieldwork placement through an accredited colleges or university;*

*c. Complying with respective professional licensing laws, including supervision requirements, and*

*d. Is appropriately screened and oriented to the program's policies and procedures, and supervised*

**[**(33)**]***(47)* (text unchanged)

*(48) “Key staff” means members of the governing body, required staff, and other staff who, while not members of the governing body, “required management staff” or “required staff", have significant leadership roles in management of provider services and systems.*

**[**(34)**]***(49)* “License” means the **[**approval**]** *authorization* issued by the Secretary or designee that permits a behavioral health provider to operate in Maryland.

**[**(35)**]***(50)*—**[**(36)**]***(51)* (text unchanged)

*(52) “Local Designated Authority (LDA)” means any of the following, as designated by the Department:*

*a. CSA,*

*b. LAA, or*

*c. LBHA*

**[**(37)**]***(53)* “Maintenance” means medically supervised continuation of the administration of methadone*, buprenorphine,* or other drugs approved by the Administration.

**[**(38)**]***(54)* (text unchanged)

*(55) “Medication Assisted Treatment” (MAT) means the use of FDA- approved medications, in combination with counseling and behavioral therapies, to provide a “whole-patient” approach to the treatment of substance use disorders.*

**[**(39)**]***(56)—***[**(40)**]***(57)* (text unchanged)

**[**(41) “Office of Health Care Quality (OHCQ)” means the Office of Health Care Quality of the Maryland Department of Health.**]**

*(58) “Organization” means a legal entity that provides an environment in which programs or services are offered.*

**[**(42)**]***(59)* **[**“Patient”**]** *“Participant”* means an individual receiving care and treatment in a community behavioral health program.

**[**(43)**]***(60)* “Peer support services” means a set of non-clinical activities provided by individuals in recovery from mental health **[**or**]***,* substance-related **[**and**]***,* *or* addictive disorders who use their personal, lived experiences and training to support other individuals with mental health or substance-related **[**and**]***,* *or* addictive disorders.

**[**(44)**]***(61)* (text unchanged)

**[**(45)**]***(62)* “Pilot project” means an experimental project that, if deemed successful, **[**will**]** *may* be adopted as a permanent policy or program.

**[**(46)**]***(63)* “Plan of correction” means the program’s proposed response to findings of deficiency identified by the Department’s designated **[**approval**]** *licensing* unit or the Department.

**[**(47)**]***(64)* “Program” means **[**an organization that provides or seeks a license to provide community-based behavioral health services**]** *the site and service combination which is recognized through licensure to offer an organized system of activities performed for the benefit of persons served..*

**[**(48)**]***(65)* (text unchanged)

**[**(49)**]***(66)* “Provider” means:**[** a program that is approved, certified or licensed to provide community-based behavioral health services.**]**

*(a) An individual, association, partnership, corporation, unincorporated group, or any other person authorized, licensed, or certified to provide services for Program recipients and who, through appropriate agreement with the Department, has been identified as a Program provider by the issuance of a license;*

*(b) An agent, employee, or related party of a person identified in (UPDATE) of this regulation; or*

*(c) An individual or any other person with an ownership interest in a person identified in this regulation.*

**[**(50)**]***(67)* (text unchanged)

**[**(51)**]***(68)* “Recovery residence” means a service that provides alcohol-free and illicit drug-free housing to individuals with substance-related disorders or addictive disorders*,* or co-occurring mental health **[**and**]***,* substance-related disorders or addictive disorders**[**, and that does not include clinical treatment services**]**.

**[**(52)**]***(69)* (text unchanged)

*(70) “Required managements staff” means staff identified in each program description in COMAR 10.63.03.*

*(71) “Required staff” means staff required under:*

*(a) COMAR 10.63;*

*(b) COMAR 10.09.06*

*(c) COMAR 10.09.59, or*

*(d) COMAR 10.09.80.*

**[**(53)**]***(72)* (text unchanged)

**[**(54)**]***(73)* (text unchanged)

*(74) “Residential Treatment” means professionally directed evaluation, observation, medical monitoring, and addiction treatment in a single facility or campus setting in which the individual resides.*

**[**(55)**]***(75)* (text unchanged)

*(76) “Student” means an intern.*

*(77) “Substance-Related Disorders” means disorders related to the taking of alcohol/tobacco or another addictive drug, to the side effects of a medication, and to toxin exposures as defined by ASAM.*

*(78) “Substance Use Disorder” means a disorder marked by a cluster of cognitive, behavioral, and physiological symptoms indicated that the individual continues to use alcohol, tobacco, and/or other drugs despite significant related problems, as defined by ASAM.*

**[**(56)**]***(79)* “Treatment” means *licensed,* professionally rendered therapeutic interventions provided to an individual to address behavioral health disorders *that does not include assessment and referral services or educational services*.

**[**(57)**]***(80)*—**[**(60)**]***(83)* (text unchanged)

*10.63.01.04*

**.04 Exempt Providers.**

A. In accordance with Health-General Article, §7.5-401, Annotated Code of Maryland, the following providers are exempt from the requirements of, and are not required to be licensed under, this subtitle:

(1)—(9) (text unchanged)

*(10) A Federally Qualified Health Center (FQHC) - except for:*

*(a) Opioid Treatment Services and associated Level 1, 2.1, or 2.5 Substance Use Treatment programs.*

*(b) Withdrawal Management Services and associated Level 1, 2.1, or 2.5 Substance Use Treatment programs.*

*(b) Sites offering predominantly Behavioral Health Services as described in COMAR 10.63.*

B. Notwithstanding the provisions of §A of this regulation, a provider shall have a valid and current license under this subtitle in order to provide the following services:

(1) (text unchanged)

(2) *Residential* **[**Substance-related**]** *substance-related* disorder programs as described in COMAR 10.63.03.11—.14.

C. (text unchanged)

10.63.01.05

.05 Requirements for Licensed Community-Based Behavioral Health **[**Program**]***Programs*.

A. (text unchanged)

B. Post-Licensing Inspections.

(1) The Department or its designees may make announced or unannounced visits **[**to inspect a program to investigate a complaint**]**.

(2) The Department or its designees may inspect*, scan,* and copy *business* records, including, but not limited to:

(a) Financial records;

(b) Treatment records; **[**and**]**

(c) Service records*; and*

*(d) Staffing records*.

C. Criminal Background Investigation.

(1) (text unchanged)

*(2) The program shall obtain a criminal background check on each employee, contractor, or volunteer every three years.*

*(3) The program may accept a criminal background check performed within the six months prior to hire if the provider verifies and documents its authenticity.*

*(4) A programs background check shall include:*

*(a)Federal and state criminal history;*

*(b) Maryland Medicaid federal and state provider exclusion list;*

*(c) Federal Department of Health and Human Services OIG website; and*

*(d) Sex offender registry:*

**[**(2)**]***(5)*—**[**(3)**]***(6)* (text unchanged)

*(7) The program shall require staff to report any pending criminal charges and dispositions.*

**[**(4)**]***(8)*—**[**(6)**]**(*10) (text unchanged)*

D. Applicable Laws. A program licensed in accordance with this chapter shall comply with all applicable federal and State laws and regulations, including *but not limited to,* the following:

(1)—(6) (text unchanged)

*E. Supervision: Supervision in all licensed programs must be provided by the appropriate staff as required by the Health Occupations Statute.*

**[**E.**]***F.* Agreement to Cooperate.

(1) Before applying for licensure, a program shall enter into an agreement to cooperate with the **[**CSA, LAA, or LBHA**]***LDA* that operates in the relevant county or Baltimore City.

(2) The agreement to cooperate shall provide for coordination and cooperation between the parties in carrying out behavioral health activities in the jurisdiction *where services are to be provided*, including but not limited to **[**facilitating**]***conducting*:

(a) (text unchanged)

(b) The transition of services if:

(i) The program closes; **[**or**]**

(ii) A program discontinues a service**[**.**]***; or*

*(iii) A program is at risk of closing or discontinuing a service.*

(3) The agreement to cooperate may not include a provision that authorizes the **[**CSA, LAA, or LBHA**]***LDA* to prohibit a program from offering services at any location.

**[**F**]***G*. **[**Opioid Treatment**]** *Medication Assisted Treatment (MAT)* Services—Non-Discrimination. A program may not exclude or discriminate against an individual on the basis of the individual receiving **[**opioid treatment services**]***or participating in MAT*.

*(1) Programs licensed under 10.63.03.11-14 shall accept delivery of MAT medications prescribed to individuals that receive program services.*

**[**G**]***H*. (text unchanged)

*I. Required Management Staff Vacancies.*

*(1) When required management staff, as defined in this chapter, vacates a management staff position, the organization shall immediately:*

*(a) Notify notify BHA’s Licensing Unit of the departure within 14 days;*

*(b) Implement a good faith effort to fill the position; and*

*(c) Notify BHA’s licensing unit of the name and credentials of a replacement when hired.*

*(2) Submit a written variance to BHA licensing unit for positions that may remain vacant more than 60 days, submit after 30 days which outlines:*

*a. Title and description of the vacant position.*

*b. Efforts made and planned to fill the position.*

*J. When key staff leave a program, the organization shall immediately notify BHA’s licensing unit of the departure.*

*K. The program shall maintain, either manually or electronically, adequate documentation of each contact with a participant as part of the medical record, which, at a minimum, meets the following requirements:*

*(1) Includes the date of service with service start and end times;*

*(2) Includes the participant’s primary behavioral health complaint or reason for the visit;*

*(3) Includes a brief description of the service provided, including progress notes;*

*(4) Includes an official e-Signature, or a legible signature, along with the printed or typed name of the individual providing care, with the appropriate credentials;*

*(5) An electronic signature may be substituted for a written signature if it meets the following conditions:*

*(a) It does not allow cutting, pasting, editing, or removal from a finalized document without an audit record thereof.*

*(b) It is linked to the data in such a manner that, if the data are changed, the electronic signature is invalidated.*

*(c ) It is incorporated into the document, not part of a separate file.*

*(d) It is unique to the individual using it.*

*(e) It can be verified.*

*(f) It is under the sole control of the individual using it, and*

*(g) It has a time-stamped audit trail indicating dates, times of signature, and reflecting any changes made to the record.*

*L. The Program shall require that unlicensed staff hired to provide direct services:*

*(1) Be W-2 payroll Employees of the organization.*

*(2) Maintain timekeeping records including hours and times worked which shall be accessible for audit by the Administration or any of its designees.*

*M. The Program shall maintain and make available to State auditors or their designees timekeeping records on all required staff.*

*N. The Program is permitted to engage student interns only as permitted by regulations of the interns’ respective professions and payer organizations. Interns shall not function in any of the roles identified as required in these regulations.*