

## **ODADAS/ODMH Department Consolidation Provider Regulation Consolidation Workgroup Summary and Recommendations**

The Provider Regulation workgroup convened beginning in August of 2012, and a series of meetings were held to discuss current regulations of both agencies with the goal of forming recommendations of a consolidated approach to regulation. The team consisted of representatives from Boards, provider organizations, trade associations and state employees. Education and information were provided to and by team members related to specific topics, in order to inform the team and make consensus decisions.

The group operated from the premise that there was no single agency 'ownership' of current regulatory processes. With that in mind, the team conducted four formal meetings in a one month period, with an emphasis on supporting a forum for open discussion, decision making and education on existing revised code and operational functions and providing relevant written material for review and discussion. The approach included the consensus development of 'key' concepts and a regulatory conceptual framework that supports the health and safety of client(s), while acknowledging the business needs of organizations. This proposed model will inform future regulatory changes. The team also developed recommendations for future activity, including a process to work with other consolidation teams on key areas or topics.

The final recommendations of this team include the development and future work on a Provider Regulation model that is closely aligned with SAMHSA's 'Description of a Modern Addictions and Mental Health Service System', development and alignment of a common set of definitions, and an approach to national accreditation, deemed status and fees in the consolidated agency. A facilitated approach is recommended.

Future work on development of these recommendations will be accomplished, in part, by the existing Rules and Policy group in tandem with the Consolidation Project Team members, adherence to our Rules process and by the development of focus groups, if needed, to work on implementation of the team's proposals. The success of the future regulation consolidation depends on the development of a model that integrates and allows for regulation of addiction services and mental health services that is centered on the holistic treatment of individual(s) and their significant family members or partners, the elimination of obstacles or barriers to care, the ease of access to care and the positive and sustained health care promotion and outcomes.

**Recommendations:**

Function	Activity/Recommendation	Description/Additional Information/Future Work
<b>Develop Conceptual Provider Regulation Model</b>	Recommend a new process model for regulation. License or certify a category that includes numerous relevant services. Allow providers to select from the 'menu' of services and move freely among the services to meet the needs of their business and of the individuals they serve.	Conceptual 'model' attached. Development of a focus group to further explore this concept.
	Utilize provider services continuum of care from prevention/wellness up to and including acute services.	Based on SAMHSA's <i>Description of a 'Good and Modern Addictions and Mental Health Service System'</i>
	<b>HOSPITAL LICENSURE:</b> <ul style="list-style-type: none"> <li>• Maintain some level of state regulation.</li> <li>• One regulatory process/license issued by consolidated agency.</li> <li>• Explore concept (focus group) related to deemed status if a hospital maintains specific behavioral health accreditation.</li> <li>• Recognize as part of Acute Intensive Services in conceptual model.</li> <li>• Explore changing application renewal process to every three years instead of annually.</li> </ul>	ODMH private psych licensure: ORC 5119.20 <a href="http://66.161.141.164/orc/5119.20">http://66.161.141.164/orc/5119.20</a>  ODADAS certification for AoD programs: ORC 3793.06 <a href="http://codes.ohio.gov/orc/3793.06">http://codes.ohio.gov/orc/3793.06</a>
	<b>RESIDENTIAL TREATMENT FACILITIES:</b> <ul style="list-style-type: none"> <li>• ODADAS certifies residential treatment as a service and ODMH licenses facilities; these approaches need to be unified.</li> <li>• MH licenses all facilities though some have integrated treatment and others have no associated treatment services. ADAS only certifies residential treatment facilities that provide clinical intervention with no regulatory role for recovery-focused living/housing.</li> <li>• Identify where each residential model fits within conceptual model of continuum of care (Community Support, Out-of Home Residential Services, etc.)</li> </ul>	Recommend future work to align approach to residential licensure in consolidated agency.  Hospital Licensure and Residential Treatment are part of the continuum of services in the Conceptual Model. Decisions related to work in these areas need to be considered within the continuum of services.

Function	Activity	Description
<b>Common Set of Definitions</b>	Consolidate and align terminology consistent with state/federal regulations; impacts ORC and SPA.	Development of a focus group to review definitions and align.
	Adopt certification of services; eliminate certification of programs.	ODADAS certification for alcohol/drug addiction programs: ORC 3793.06 <a href="http://codes.ohio.gov/orc/3793.06">http://codes.ohio.gov/orc/3793.06</a>
	Implement a unified approach to the use of terms "certify" and "license".	Recommend 'certification' of services (not programs) and 'licensure'; of facilities.

Function	Activity	Description
<b>Coding Alignment</b>	Reference the work of other consolidation teams to maintain a consistent approach.	

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<b>National Accreditation/Deemed Status/Fees</b>	<p>Review mandate for national accreditation. Maintain deemed status or determine an alternative approach.</p> <p>Deem compliance if provider demonstrates meeting other federal or state requirements through certification/licensure by another state department (i.e. ODJFS, ODH, etc.)</p> <p>Deemed status could be approved for services that ODMH/ODADAS determine meets or exceeds minimum standards.</p> <p>Develop a fee schedule for licensure and non-accredited providers.</p> <p>Note: Medicaid provider enrollment is every five years and a fee is associated.</p>	<p>ODMH deemed status/ national accreditation: ORC 5119.612 <a href="http://66.161.141.164/orc/5119.612">http://66.161.141.164/orc/5119.612</a> and OAC 5122-25-02 <a href="http://codes.ohio.gov/oac/5122-25-02">http://codes.ohio.gov/oac/5122-25-02</a> and OAC 5122-25-03 <a href="http://codes.ohio.gov/oac/5122-25-03">http://codes.ohio.gov/oac/5122-25-03</a></p> <p>ODADAS deemed status/national accreditation: ORC 3793.061 <a href="http://codes.ohio.gov/orc/3793.061">http://codes.ohio.gov/orc/3793.061</a></p> <p>See summary documentation for reference to other State agency fees. 8/26/12</p> <p>ODMH fee authority; for certification: ORC 5119.611(E)(4) <a href="http://66.161.141.164/orc/5119.611">http://66.161.141.164/orc/5119.611</a></p> <p>ODMH private psych licensure: OAC 5122-14-03 <a href="http://codes.ohio.gov/oac/5122-14-03">http://codes.ohio.gov/oac/5122-14-03</a></p>

August 2012, Reference: Appendix A – Description of a Good & Modern Addiction and Mental Health Service System, SAMHSA

## Concept/Framework Suggestions

