

including, but not limited to, sexual *abuse*, or exploitation of funds or other things of value to such an extent that his health or mental or emotional well-being is endangered. Injury may include, but is not limited to: physical injury, mental disorientation, or emotional harm, whether it is caused by physical action or verbal statement or any other act or omission classified as abuse by Louisiana law, including, but not limited to, the *Louisiana Children's Code*.

*Accredited*—the process of review and acceptance by an accreditation body.

*Active Client*—a client that is being treated for addictive disorders at least every 90 days or a client that is being treated for mental health disorders at least every 180 days.

*Addiction Counselor*—any person who is licensed, certified, or registered in accordance with state statute and procedures established by the Addictive Disorder Regulatory Authority and who, by means of his special knowledge acquired through formal education or practical experience, is qualified to provide addiction counseling services to those individuals afflicted with or suffering from an addictive disorder or certain co-occurring disorders.

*Addiction Outpatient Treatment Services (ASAM Level I)*—an outpatient program that offers comprehensive, coordinated, professionally directed and defined addiction treatment services that may vary in level of intensity and may be delivered in a wide variety of settings. Services are provided in regularly scheduled sessions of fewer than nine contact hours a week.

*Addictionologist*—a licensed physician who is either of the following:

1. certified by the American Board of Psychiatry and Neurology with a subspecialty in addiction psychiatry; or
2. certified by the American Board of Addiction Medicine.

*Addictive Disorder*—the repeated pathological use of substances including but not limited to alcohol, drugs, or tobacco, or repeated pathological compulsive behaviors including but limited to gambling, which cause physical, psychological, emotional, economic, legal, social, or other harms to the individual afflicted with the addiction or to others affected by the individual's affliction. Addiction disorder includes instances where withdrawal from or tolerance to the substance or behaviors are present, and also instances involving use and abuse of substances.

*Administrative Procedure Act (APA)*—R.S. 49:950 et seq.

*Admission*—the formal acceptance of an individual for assessment and/or therapeutic services provided by the BHS provider.

*Adolescent*—an individual 13 through 17 years of age.

*ADRA*—Addictive Disorder Regulatory Authority.

*Adult*—an individual 18 years of age or older.

*Advance Practice Registered Nurse (APRN)*—a licensed registered nurse who meets the criteria for an *advanced*

### §5603. Definitions

*Abuse*—the infliction of physical or mental injury or the causing of the deterioration of an individual by means

*practice registered nurse* as established by the Louisiana State Board of Nursing and is licensed as an *APRN* and in good standing with the Louisiana State Board of Nursing.

*Alternate Service Delivery Area*—an area that is not contiguous to the geographic service area of the licensed BHS parent location and/or is in an LDH region where a BHS provider may be allowed to provide Homebuilders services when the provider has less than three staff providing such services in that region.

*Ambulatory Withdrawal Management with Extended on-site Monitoring (ASAM Level 2-WM)*—an organized outpatient addiction treatment service that may be delivered in an office setting or health care or behavioral health services provider by trained clinicians who provide medically supervised evaluation, withdrawal management and referral services. The services are designed to treat the client's level of clinical severity to achieve safe and comfortable withdrawal from mood-altering chemicals and to effectively facilitate the client's entry into ongoing treatment and recovery. The services are provided in conjunction with intensive outpatient treatment services (level 2.1).

*ASAM*—American Society of Addiction Medicine.

*Authorized Licensed Prescriber*—a physician, PA, nurse practitioner, or medical psychologist (MP) licensed in the state of Louisiana and with full prescriptive authority who is authorized by the BHS provider to prescribe treatment to clients of the specific BHS provider at which he/she practices.

*Behavioral Health Service (BHS) Provider or Provider*—a facility, agency, institution, person, society, corporation, partnership, unincorporated association, group, or other legal entity that provides behavioral health services, presents itself to the public as a *provider* of behavioral health services.

*Behavioral Health Services*—mental health services, substance use/addiction treatment services, or a combination of such services, for adults, adolescents and children. Such services may be provided in a residential setting, in a clinic setting on an outpatient basis, or in a home or community setting.

*Building and Construction Guidelines*—structural and design requirements applicable to the BHS provider which does not include occupancy requirements.

*Business Location or Primary Business Office Location*—the physical location/address that is designated by the provider as the main or primary business office location; there shall be only one designation of the main or primary business office location per provider; the main or primary business office location may be a licensed residential location, a licensed outpatient clinic, or other office location within the geographic service area authorized by the license.

*Campus*—for purposes of this Chapter, a location where BHS services are provided that is within the geographic service area as the licensed BHS provider. A campus may have multiple buildings/multiple addresses as long as those

buildings are contiguous and not separated by public streets, and are within the same geographic service area as the licensed BHS provider.

*Case Management*—the coordination of services, agencies, resources, or people within a planned framework of action toward the achievement of goals established in the treatment plan that may involve liaison activities and collateral contracts with other providers.

*Certified Addiction Counselor (CAC)*—pursuant to R.S. 37:3387.1, any person who, by means of his specific knowledge acquired through formal education and practical experience, is qualified to provide addictive disorder counseling services and is certified by the ADRA as a CAC. The CAC shall not practice independently and shall not render a diagnostic impression.

*Certified Clinical Supervisor*—any person holding the necessary credential of licensed, certified, or registered addiction counselor or any person who holds a specialty substance use credential in another professional discipline in a human services field at the master's level or higher; and who has satisfied the requirements established by the Addictive Disorder Regulatory Authority (ADRA) to provide clinical supervision.

*Cessation of Business*—provider is non-operational and/or has stopped offering or providing services to the community.

*Change of Ownership (CHOW)*—the addiction, substitution, or removal, whether by sale, transfer, lease, gift or otherwise, of a licensed health care provider subject to this rule by a person, corporation, or other entity, which results in a change of controlling interest of assets or other equity interests of the licensed entity may constitute a CHOW of the licensed entity. An example of an action that constitutes a CHOW includes, but is not limited to, the leasing of the licensed entity.

*Child*—an individual under the age of 13.

*Client*—any person who seeks and receives treatment or services, including but not limited to rehabilitation services or addiction counseling services, furnished by a provider licensed pursuant to this Chapter.

*Client Education*—information that is provided to clients and groups concerning alcoholism and other drug abuse, positive lifestyle changes, mental health promotion, suicide prevention and intervention, safety, recovery, relapse prevention, self-care, parenting, and the available services and resources. Educational group size is not restricted and may be offered as an outreach program.

*Client Record*—a single complete record kept by the provider which documents all treatment provided to the client and actions taken by the provider on behalf of the client. The record may be electronic, paper, magnetic material, film or other media.

*Clinical Services*—treatment services that include screening, assessment, treatment planning, counseling, crisis mitigation and education.

*Clinically Managed High-Intensity Residential Treatment Services (ASAM Level 3.5)*—a residential program that offers continuous observation, monitoring, and treatment by clinical staff designed to treat clients experiencing substance-related disorders who have clinically-relevant social and psychological problems, such as criminal activity, impaired functioning and disaffiliation from mainstream values, with the goal of promoting abstinence from substance use and antisocial behavior and affecting a global change in clients' lifestyles, attitudes and values.

*Clinically Managed Low Intensity Residential Treatment Services (ASAM Level 3.1)*—a residential program that offers at least five hours a week of a combination of low-intensity clinical and recovery-focused services for substance-related disorders. Services may include individual, group and family therapy, medication management and medication education, and treatment is directed toward applying recovery skills, preventing relapse, improving emotional functioning, promoting personal responsibility and reintegrating the client into the worlds of work, education and family life (e.g., halfway house).

*Clinically Managed Population Specific High-Intensity Residential Treatment Services (ASAM Level 3.3)*—a residential program that offers at least 20 hours per week of a combination of medium-intensity clinical and recovery-focused services in a structured recovery environment to support recovery from substance-related disorders; is frequently referred to as extended or long term care.

*Clinically Managed Residential Withdrawal Management (Social) (ASAM LEVEL 3.2-WM)*—an organized residential program utilizing 24 hour active programming and containment provided in a non-medical setting that provides relatively extended, sub-acute treatments, medication monitoring observation, and support in a supervised environment for a client experiencing non-life threatening withdrawal symptoms from the effects of alcohol/drugs and impaired functioning and who is able to participate in daily residential activities.

*Community Psychiatric Support and Treatment (CPST)*—goal-directed supports and solution-focused interventions intended to achieve identified goals or objectives as set forth in the client's individualized treatment plan. These supports and interventions are designed to improve behavioral health outcomes by utilizing evidence-based driven care.

*Compulsive Gambling*—persistent and recurrent maladaptive gambling behavior that disrupts personal, family, community, or vocational pursuits, and is so designated by a court, or diagnosed by a licensed physician or LMHP.

*Controlled Dangerous Substance*—any substance defined, enumerated, or included in federal or state statute or regulations or any substance which may hereafter be designated as a *controlled dangerous substance* by amendment of supplementation of such regulations or statute. The term shall not include distilled spirits, wine, malt beverages, or tobacco.

*Co-Occurring Disorder*—a disorder in which an individual has at least one psychiatric disorder as well as an addictive disorder.

*Core Services*—the essential and necessary elements required of every BHS provider, when indicated, including assessment, orientation, client education, consultation with professionals, counseling services, referral, crisis mitigation, medication management, rehabilitation services, and treatment.

*Counselor in Training (CIT)*—any person who has not yet met the qualification to become a licensed, certified, or registered counselor, but who has made application to the ADRA in accordance with state statute and procedures established by the ADRA. The CIT shall not practice independently and shall only work under the direct supervision of a licensed addiction counselor (LAC), CAC, or registered addiction counselor; or in the absence of a licensed, certified, or registered addiction counselor, under the direction of a qualified mental health professional.

*Crime of Violence*—an offense listed as a *crime of violence* in R.S. 14:2.

*Crisis Intervention*—face to face intervention provided to a client who is experiencing a psychiatric crisis. The services are designed to interrupt and/or ameliorate a crisis experience, via a preliminary assessment, immediate crisis resolution and de-escalation with referral and linkage to appropriate community services to avoid more restrictive levels of treatment.

*Crisis Mitigation Services*—a BHS provider's assistance to clients during a crisis that provides 24-hour on call telephone assistance to prevent relapse or harm to self or others, to provide referral to other services, and to provide support during related crises. Referral to 911 or a hospital's emergency department alone does not constitute crisis mitigation services.

*Deemed Status*—following the issuance of an initial license, the department's acceptance of the BHS provider's accreditation as compliance with this Chapter in lieu of on-site licensing surveys.

*Department*—the LDH or any office or agency thereof designated by the secretary to administer the provisions of this Chapter.

*Dependent Children*—any child/adolescent under the age of 18 that relies on the care of a parent or legal guardian.

*Diagnosis*—the act of identifying a disease or behavioral health disorder as defined by the current version of the Diagnostic and Statistical Manual (DSM). A *diagnosis* is determined by a qualified LMHP or physician based on comprehensive assessment of physical evidence (if related to diagnosis), signs and symptoms, clinical and psycho-social evidence, and individual/family history.

*Direct Care Staff*—any member of the staff, including an employee, contractor or volunteer, that provides the services delineated in the comprehensive treatment plan. Food

services, maintenance, and clerical staff are not considered as *direct care staff*.

*Disaster or Emergency*—a local, community-wide, regional or statewide declared health crisis or event.

*Dispense or Dispensing*—the interpretation, evaluation, and implementation of a prescription drug order, including the preparation and delivery of a drug or device to a patient or patient's agent in a suitable container appropriately labeled for subsequent administration to, or use by, a patient. *Dispense* necessarily includes a transfer of possession of a drug or device to the patient or the patient's agent.

*Dispensing Physician*—any physician in the state of Louisiana who is registered as a dispensing physician with the Louisiana State Board of Medical Examiners (LSBME) and who dispenses to his/her patients any drug, chemical, or medication, except a bona fide medication sample.

*Division of Administrative Law (DAL)*—the Louisiana Department of State Civil Service, Division of Administrative Law or its successor.

*Exploitation*—act or process to use (either directly or indirectly) the labor or resources of an individual or organization for monetary or personal benefit, profit, or gain.

*Facility Need Approval (FNA)*—the letter of approval from the Office of Behavioral Health (OBH) which is required for licensure applicants for opioid treatment programs prior to applying for a BHS provider license or the letter of approval from the Facility Need Review (FNR) Committee within the department which is required for licensure applicants for psychosocial rehabilitation (PSR) or CPST services prior to applying for a BHS provider license.

*FDA*—the Food and Drug Administration of the United States Department of Health and Human Services.

*Financial Viability*—the provider seeking licensure is able to provide verification and continuous maintenance of all of the following pursuant to R.S. 40:2153:

1. a line of credit issued from a federally insured, licensed lending institution in the amount of at least \$50,000;
2. proof of professional liability insurance of at least \$500,000 or proof of self-insurance of at least \$100,000, along with proof of enrollment as a qualified health care provider with the Louisiana Patient's Compensation Fund (PCF):
  - a. if the BHS provider is self-insured and is not enrolled in the PCF, professional liability limits shall be \$1 million per occurrence/\$3 million per annual aggregate.

NOTE: the LDH-HSS shall specifically be identified as the certificate holder on any policies and any certificates of insurance issued as proof of insurance by the insurer or producer (agent).

3. proof of workers' compensation insurance; and
4. proof of general liability insurance of at least \$500,000.

*Geographic Service Area*—the geographic service location for a public or private behavioral health services provider licensed pursuant to this Part shall be defined to include:

1. the parish in which the provider's business office is located;
2. any parish contiguous to the parish in which the provider's business office is located; and
3. any distance within a fifty mile radius of the provider's business office.

*Grievance*—a formal or informal written or verbal complaint that is made to the provider by a client or the client's family or representative regarding the client's care, abuse or neglect when the complaint is not resolved by staff present at the time of the complaint.

*Health Standards Section (HSS)*—the licensing and certification section of the LDH.

*High Risk Behavior*—includes substance use, gambling, violence, academic failure, delinquency behavior, and mental health issues such as depression, anxiety, and suicidal ideations.

*Human Services District or Authority*—an existing or newly created local governmental entity with local accountability and management of behavioral health and developmental disabilities services as well as any public health or other services contracted to the district by the department.

*Human Services Field*—an academic program with a curriculum content in which at least 70 percent of the required courses are in the study of behavioral health or human behavior.

*Intensive Outpatient Treatment Services (ASAM Level 2.1)*—professionally directed assessment, diagnosis, treatment and recovery services provided in an organized non-residential treatment setting, including individual, group, family counseling and psycho-education on recovery as well as monitoring of drug use, medication management, medical and psychiatric examinations, crisis mitigation coverage and orientation to community-based support groups. Services may be offered during the day, before or after work or school, in the evening or on a weekend, and the program shall provide nine or more hours of structured programming per week for adults and six or more hours of structured programming per week for children/adolescents.

*LDH Authorized Accreditation Organization*—any organization authorized by LDH to accredit behavioral health providers.

*Level of Care*—intensity of services provided by the provider.

*Licensed Addiction Counselor (LAC)*—any person who, by means of his specific knowledge, acquired through formal education and practical experience, is qualified to provide addiction counseling services and is licensed by the

ADRA as a licensed addiction counselor or pursuant to R.S. 37:3387.

*Licensed Clinical Social Worker (LCSW)*—a person duly licensed to independently practice clinical social work under R.S. 37:2702 et seq.

*Licensed Marriage and Family Therapist (LMFT)*—a person to whom a license has been issued and who is licensed to perform the professional application of psychotherapeutic and family systems theories and techniques in the assessment and treatment of individuals, couples and families. An *LMFT* is not permitted to diagnose a behavioral health disorder under his/her scope of practice under state law.

*Licensed Mental Health Professional (LMHP)*—an individual who is currently licensed and in good standing in the state of Louisiana to practice within the scope of all applicable state laws, practice acts and the individual's professional license, as one of the following:

1. medical psychologist;
2. licensed psychologist;
3. licensed clinical social worker (LCSW);
4. licensed professional counselor (LPC);
5. licensed marriage and family therapist (LMFT);
6. licensed addiction counselor (LAC);
7. advanced practice registered nurse (APRN); or
8. licensed rehabilitation counselor (LRC).

*Licensed Professional Counselor*—any person who holds himself out to the public for a fee or other personal gain, by any title or description of services incorporating the words “*licensed professional counselor*” or any similar term, and who offers to render professional mental health counseling services denoting a client-counselor relationship in which the counselor assumes responsibility for knowledge, skill and ethical considerations needed to assist individuals, groups, organizations, or the general public, and who implies that he is licensed to practice mental health counseling.

*Licensed Psychologist*—any person licensed as a psychologist pursuant to R.S. 37:2352.

*Licensed Rehabilitation Counselor (LRC)*—any person who holds himself out to the public, for a fee or other personal gain, by any title or description of services incorporating the words “*licensed professional vocational rehabilitation counselor*” or any similar terms, and who offers to render professional rehabilitation counseling services denoting a client-counselor relationship in which the counselor assumes responsibility for knowledge, skill, and ethical considerations needed to assist individuals, groups, organizations, or the general public, and who implies that he is licensed to engage in the practice of rehabilitation counseling. An LRC is also known as a licensed professional vocational rehabilitation counselor. An LRC is not permitted to provide assessment or treatment services for substance

use/addiction, mental health or co-occurring disorders under his/her scope of practice under state law.

*Master's-Prepared*—an individual who has completed a master's degree in social work or counseling, but has not met the requirements for licensing by the appropriate state board.

*Medical Psychologist*—a licensed psychological practitioner who has undergone specialized training in clinical psychopharmacology and has passed a national proficiency examination in psychopharmacology approved by the LSBME.

*Medically Monitored Inpatient Withdrawal Management (Medically Supported) (ASAM Level 3.7-WM)*—a residential program that provides 24-hour observation, monitoring and treatment delivered by medical and nursing professionals to clients whose withdrawal signs and symptoms are moderate to severe and thus require residential care, but do not need the full resources of an acute care hospital.

*Medically Monitored Intensive Inpatient Treatment Services (Co-occurring) (ASAM Level 3.7)*—a residential program that provides a planned regimen of 24-hour professionally directed evaluation, observation, medical monitoring and addiction treatment to clients with co-occurring psychiatric and substance disorders whose disorders are so severe that they require a residential level of care but do not need the full resources of an acute care hospital. The program provides 24 hours of structured treatment activities per week, including, but not limited to, psychiatric and substance use assessments, diagnosis treatment, and habilitative and rehabilitation services.

*Medication Administration*—preparation and/or giving of a legally prescribed individual dose of medication to a client by qualified staff including observation and monitoring of a client's response to medication.

*Mental Health Clinic*—an entity through which outpatient behavioral health services are provided, including screening, diagnosis, management or treatment of a mental disorder, mental illness, or other psychological or psychiatric condition or problem, mental health intensive outpatient services, and 24-hour emergency services that are provided either directly or through formal affiliation with other agencies by an interdisciplinary team of mental health professionals and subordinates in accordance with a plan of treatment or under the direction of a psychiatrist or another qualified physician with psychiatric consultation.

*Mental Health Intensive Outpatient Programs (MH IOPs)*—professionally directed assessment, diagnosis, and treatment provided in an organized non-residential treatment setting, including individual, group, family counseling and psycho-education as well as, medication management, medical and psychiatric examinations, and crisis mitigation coverage. Services may be offered during the day, before or after work or school, in the evening or on a weekend, and the program shall provide nine or more hours of structured programming per week for adults and six or more hours of structured programming per week for children/adolescents.

*Mental Health Rehabilitation (MHR)*—an outpatient healthcare program provider of any PSR, crisis intervention (CI) and/or CPST services that promotes the restoration of community functioning and well-being of an individual diagnosed with a mental health or mental or emotional disorder. The MHR provider utilizes evidence based supports and interventions designed to improve individual and community outcomes.

*Mental Health Rehabilitation Services (MHRS)*—outpatient services for adults with serious mental illness and children with emotional/behavioral disorders which are medically necessary to reduce the disability resulting from mental illness and assist in the recovery and resiliency of the recipient. These services are home and community-based and are provided on an as needed basis to assist recipients in coping with the symptoms of their illness. The intent of MHRS is to minimize the disabling effects on the individual's capacity for independent living and to prevent or limit the periods of inpatient treatment.

*Mental Health Service*—a service related to the screening, diagnosis, management, or treatment of a mental disorder, mental illness, or other psychological or psychiatric condition or problem.

*Minor*—any person under the age of 18.

*Mobile Crisis Response Team (MCRT)*—unlicensed staff and recognized peer support specialist deploy in teams initially to assess and address a crisis as part of mobile crisis intervention response services, enlisting the assistance of an LMHP if needed. Exceptions to the team deployment may be made by the team leader. One staff person may deploy after the initial assessment, if appropriate as determined by the team leader. Unlicensed individuals work under the supervision of an LMHP or psychiatrist who is acting within the scope of his/her professional license and applicable state law. MCRTs operate under an agency or facility license issued by LDH Health Standards.

*Mobile Unit*—any trailer or self-propelled unit equipped with a chassis on wheels and intended to provide behavioral health services on a temporary basis at a temporary location. These units shall be maintained and equipped to be moved.

*Mothers with Dependent Children Program or Dependent Care Program*—a program that is designed to provide substance use/addiction treatment to mothers with dependent children who remain with the parent while the parent is in treatment.

*Neglect*—the failure to provide the proper or necessary medical care, nutrition or other care necessary for a client's well-being or any other act or omission classified as *neglect* by Louisiana law.

*Non-Ambulatory*—unable to walk or accomplish mobility without assistance.

*Non-Prescription Medication*—medication that can be purchased over-the-counter without an order from a licensed practitioner.

*Nurse*—any registered nurse licensed and in good standing with the Louisiana State Board of Nursing (LSBN) or any practical nurse licensed and in good standing with the Louisiana State Board of Practical Nurse Examiners (LSBPE).

*OBH*—the LDH Office of Behavioral Health.

*Off-Site*—a parent facility's alternate location or premises that provides behavioral health services on a routine basis within the geographic service area of the licensed BHS provider that:

1. is detached from the parent provider and does not share the same campus;
2. the geographic service location for a public or private behavioral health services provider licensed pursuant to this Part shall be defined to include:
  - a. the parish in which the provider's business office is located;
  - b. any parish contiguous to the parish in which the provider's business office is located; and
  - c. any distance within a fifty mile radius of the provider's business office.
3. is owned by, leased by or donated or loaned to the parent provider for the purpose of providing behavioral health services; and
4. has a sub-license issued under the parent facility's license.

*OHSEP*—Office of Homeland Security and Emergency Preparedness.

*On Call*—immediately available for telephone consultation and less than one hour from ability to be on duty.

*On Duty*—scheduled, present and awake at the site to perform job duties.

*Onsite Access*—for purposes of §5712 of this Rule, the delivery of the treatment to the patient at the location of the residential substance use disorder facility. For purposes of §5712, onsite access does not mean that the residential substance use disorder facility is required to maintain stock of the medication-assisted treatment at the facility.

*OPH*—the LDH Office of Public Health.

*Opioid Treatment Program*—a program that engages in medication-assisted opioid treatment of clients with an opioid agonist treatment medication.

*OSFM*—the Louisiana Department of Public Safety and Corrections (LDPSC), Office of State Fire Marshal (OSM).

*Outpatient Clinic*—a BHS provider that provides behavioral health services on-site at the provider's geographic location but is not a residential provider.

*Outpatient Services*—behavioral health services offered in an accessible non-residential setting to clients whose

physical and emotional status allows them to function in their usual environment.

*Parent Facility*—the main building or premises of a BHS provider where services are provided on-site and administrative records are maintained.

*Partial Hospitalization Services (ASAM Level 2.5)*—an organized outpatient service that delivers treatment to adolescents and adults. This level encompasses services that meet the multidimensional instability and complex needs of people with addiction and co-occurring conditions which do not require 24-hour care.

*Peer Support Specialist*—an individual with personal lived experience with a minimum of 12 consecutive months of recovery from behavioral health conditions and successfully navigating the behavioral health services system. Recognized peer support specialists must successfully complete an OBH-approved peer training program, continuing education requirements, and clinical supervision prior to providing peer support services.

*Physical Environment*—the BHS provider's licensed exterior and interior space where BH services are rendered.

*Physician*—an individual who is currently licensed and in good standing in the state of Louisiana to practice medicine in Louisiana and who is acting within the scope of all applicable state laws and the individual's professional license.

*Physician Assistant*—a licensed health care practitioner who is acting within the practice of his/her respective licensing boards(s) and/or certifications.

*Plan Review*—the process of obtaining approval for construction plans and specifications for the BHS provider.

*Prescription Medication*—medication that requires an order from a licensed practitioner and that can only be dispensed by a pharmacist on the order of a licensed practitioner or a dispensing physician and requires labeling in accordance with R.S. 37:1161 et seq.

*Prevention Specialist*—an individual who works with individuals, families and communities to create environments and conditions that support wellness and the ability of individuals to withstand changes. Prevention specialists are trained in needs assessment, planning and evaluation, prevention education and service delivery, communication, community organization, public policy and environmental change. A Prevention specialist is any person who has received credentials from the ADRA to be a licensed, certified, or registered prevention professional.

*Prevention Specialist-in-Training*—any person who has not yet met the qualifications to become a licensed, certified, or registered prevention professional, but who has made application to the ADRA in accordance with the provisions of state statute and procedures established by the ADRA, and works under the supervision as required by ADRA.

*Professional Board(s)*—the entity responsible for licensure or certification for specific professions (e.g., nursing, counselors, social workers, physicians, etc.).

*Psychosocial Rehabilitation (PSR)*—face to face intervention with the client designed to assist with compensating for or eliminating functional deficits and interpersonal and/or environmental barriers associated with his/her mental illness.

*Qualifying Experience*—experience used to qualify for any position that is counted by using 1 year equals 12 months of full-time work.

*Recovery Focused Services*—services such as life skills training, job readiness, self-help meetings, parenting skills, training and recreation activities that should be coordinated with clinical services.

*Referral*—the BHS provider identifies needed services not provided by the provider and assists the client/family to optimally utilize the available support systems and community resources to meet the client's needs.

*Registered Addiction Counselor (RAC)*—pursuant to R.S. 37:3387.2, any person who, by means of his/her specific knowledge acquired through formal education and practical experience, is qualified to provide addictive disorder counseling services and is registered by the ADRA as a RAC. The RAC shall not practice independently and shall not render a diagnostic impression.

*Rehabilitative Services*—services intended to promote the maximum reduction of symptoms and/or restoration of the client to his/her best age-appropriate functional level according to an individualized treatment plan.

*Residential Treatment Program*—a planned regimen of 24-hour professionally-directed evaluation, observation, monitoring and treatment of behavioral health conditions according to a treatment plan.

*Secretary*—the secretary of the LDH or his/her designee.

*Self-Administration*—the client's preparation and direct application of a medication to his/her own body by injection, inhalation, ingestion or any other means.

*Shelter in Place*—a provider's decision to stay on-site rather than evacuate during a disaster or emergency.

*Site/Premises*—a single identifiable geographic location owned, leased, or controlled by a provider where any element of treatment is offered or provided. Multiple buildings may be contained in the license only if they are connected by walkways and not separated by public streets.

*Staff*—individuals who provide services for the provider including employees, contractors, consultants and volunteers.

*State Opioid Authority (SOA)*—the agency or other appropriate officials designated by the governor or his/her designee, to exercise the responsibility and authority within the state for governing the treatment of opiate addiction with

an opioid drug. The *state opioid authority* for the state of Louisiana is the Office of Behavioral Health.

*State Opioid Treatment Authority (SOTA)*—the agency or other appropriate officials designated by the governor or his/her designee, to exercise the responsibility and authority within the state for governing the treatment of opiate addiction with an opioid drug. The SOTA for the state of Louisiana is the OBH.

*Stock Medication*—any medication obtained through a pharmacy or pharmacy contract that is not designated for a specific client.

*Substance Use/Addiction Treatment Service*—a service related to the screening, diagnosis, management, or treatment for the use of or addiction to controlled dangerous substances, drugs or inhalants, alcohol, problem gambling or a combination thereof; may also be referred to as substance use disorder service.

*Take-Home Dose(s)*—a dose of opioid agonist treatment medication dispensed by a dispensing physician or pharmacist to a client for unsupervised use, including for use on Sundays, state and federal holidays, and emergency closures per LDH directive.

*Therapeutic Counseling Services or Sessions*—individual or group therapeutic treatment that teaches skills to assist clients, families, or groups in achieving objectives through exploration of a problem and its ramifications, examination of attitudes and feelings, consideration of alternative solutions and decision making and problem solving. *Therapeutic counseling sessions* consist of no more than 15 clients and last at least 15 minutes.

*Treatment*—the application of planned procedures to identify and change patterns of behaviors that are maladaptive, destructive and/or injurious to health; or to restore appropriate levels of physical, psychological and/or social functioning.

*Treatment Plan*—the provider's documentation of the client's issues, needs, ongoing goals and objectives of care based on admission information and updated based on the client's response to treatment.

*Unlicensed Professional (UP)*—for purposes of this Rule, any unlicensed behavioral health professional who cannot practice independently or without supervision by a LMHP. This includes but is not limited to CACs, RACs and unlicensed addiction counselors, social workers or psychologists.

*Volunteer*—an individual who offers services on behalf of the provider for the benefit of the provider willingly and without pay.

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## Subchapter B. Licensing

### §5605. General Provisions

A. All BHS providers shall be licensed by the LDH. It shall be unlawful to operate as a BHS provider without a license issued by the department.

B. A BHS provider license authorizes the provider to provide behavioral health services.

C. A BHS provider license shall:

1. be issued only for the person/entity and premises named in the license application;
2. be valid only for the BHS provider to which it is issued and only for one geographic address of that provider approved by LDH;
3. be valid for up to one year from the date of issuance, unless revoked, suspended, or modified prior to that date, or unless a provisional license is issued;
4. expire on the expiration date listed on the license, unless timely renewed by the BHS provider;
5. be invalid if sold, assigned, donated or transferred, whether voluntary or involuntary;
6. be posted in a conspicuous place on the licensed premises at all times;
7. be valid for only one geographic service area; and
8. enable the BHS provider to render delineated behavioral health services within its geographic service area as defined in Section 5603.

D. To be considered operational and retain licensed status, the BHS provider shall meet the following applicable operational requirements.

1. A BHS provider providing on-site services shall:

- a. have established operational hours for a minimum of 20 hours per week, as indicated on the license application or change notification approved by LDH;
- b. have services available and the required direct care staff on duty at all times during operational hours to meet the needs of the clients;
- c. be able to accept referrals during operational hours; and
- d. at any time that the BHS provider has an interruption in services or a change in the licensed location due to an emergency situation, the provider shall notify the HSS no later than the next business day.

2. A BHS provider providing services only in the home and community shall:

- a. have a business location which conforms to the provisions of §5691.B of this Chapter;
- b. have at least one employee on duty at the business location during stated hours of operation; and



c. have direct care staff and professional services staff employed and available to be assigned to provide services to persons in their homes or in the community upon referral for services.

E. The licensed BHS provider shall abide by any state and/or federal law, rule, policy, procedure, manual or memorandum pertaining to BHS providers.

F. Provider Names. A BHS provider is prohibited from using:

1. the same name as another provider;
2. a name that resembles the name of another BHS provider licensed by the department as determined by the Louisiana Secretary of State;
3. a name that may mislead the client or public into believing it is owned, endorsed or operated by the state of Louisiana when it is not.

G. Off-Sites. A licensed BHS provider may have an off-site location with the approval of HSS that meets the following requirements.

1. The off-site may share a name with the parent facility if a geographic indicator (e.g. street, city or parish) is added to the end of the off-site name.
2. Each off-site shall be licensed as an off-site under the parent facility's license.
3. The off-site shall have written established operating hours.
4. The off-site shall operate within the same geographic service area, as defined in Section 5603, as the parent facility.
5. A residential off-site shall be reviewed under the plan review process.
6. An initial survey may be required prior to opening a residential off-site.
7. An off-site shall have staff to comply with all requirements in this Chapter and who are present during established operating hours to meet the needs of the clients.
8. Personnel records and client records may be housed at the parent facility.
9. Clients who do not receive all treatment services at an off-site may receive the services at the parent facility or be referred to another licensed provider that provides those services.
10. The off-site may offer fewer services than the parent facility and/or may have less staff than the parent facility.
11. The off-site together with the parent facility provides all core functions of a BHS provider and meets all licensing requirements of a BHS provider.

#### H. Plan Review

1. Plan review is required for outpatient clinics and residential BHS provider locations where direct care services or treatment will be provided, except for the physical environment of a substance use/addiction treatment facility or licensed mental health clinic at the time of this Chapter's promulgation.

2. Notwithstanding the provisions in this Section, any entity that will operate as a BHS provider and is required to go through plan review shall complete the plan review process and obtain approval for its construction documents in accordance with:

- a. R.S. 40:1574;
- b. the current *Louisiana Administrative Code* (LAC) provisions;
- c. OSFM requirements; and
- d. the requirements for the provider's physical environment in Subchapter H of this Chapter.

3. Any change in the type of the license shall require review for requirements applicable at the time of licensing change.

4. Upon plan review approval, the provider shall submit the following to the department:

- a. a copy of the final construction documents approved by OSFM; and
- b. OSFM's approval letter.

#### I. Waivers

1. The secretary of the LDH may, within his/her sole discretion, grant waivers to building and construction guidelines which are not part of or otherwise required under the provisions of the *LAC Title 51, Public Health Sanitary Code* or the OSFM.

2. In order to request a waiver, the provider shall submit a written request to HSS that demonstrates:

- a. how client safety and quality of care are not compromised by the waiver;
- b. the undue hardship imposed on the provider if the waiver is not granted; and
- c. the provider's ability to completely fulfill all other requirements of service.

3. The department will make a written determination of each waiver request.

4. Waivers are not transferable in a CHOW or geographic change of location, and are subject to review or revocation upon any change in circumstances related to the waiver.

J. The BHS provider shall maintain and make available to the department any information or records related to compliance with this Chapter.

K. The BHS provider shall permit designated representatives of the department, in performance of their duties, to:

1. inspect all areas of the BHS provider's operations; and
2. conduct interviews with any provider staff member, client or other person as necessary.

L. An owner, officer, member, manager, administrator, clinical director, medical director, managing employee or clinical supervisor is prohibited from being a BHS provider, who has been convicted of or entered a guilty or nolo contendere plea to a felony related to:

1. violence, abuse or neglect against a person;
2. sexual misconduct and/or any crimes that requires the person to register pursuant to the Sex Offenders Registration Act;
3. cruelty, exploitation or the sexual battery of a juvenile or the infirmed;
4. the misappropriation of property belonging to another person;
5. a crime of violence;
6. an alcohol or drug offense, unless the offender has:
  - a. completed his/her sentence, including the terms of probation or parole, at least five years prior to the ownership of or working relationship with the provider; and
  - b. been sober per personal attestation for the last two years;
7. possession or use of a firearm or deadly weapon;
8. Medicare or Medicaid fraud; or
9. fraud or misappropriation of federal or state funds.

#### M. Geographic Service Area

1. The geographic service area is the geographic area that a BHS provider's license allows services (including all telehealth services) to be provided to clients.

2. For purposes of this licensing rule, the geographic service area shall be established as follows:

- a. for providers owned and/or operated by a human service district or authority, the geographic service area shall be the parishes and jurisdiction of the district or authority in statute;
- b. for providers participating in the Homebuilders program, the geographic service area shall be the parishes of the LDH region in which the provider is licensed and has its primary business office location;
  - i. upon receipt of a written waiver request from such provider, the LDH Health Standards Section may grant a waiver to a Homebuilders provider to operate in another LDH region for good cause shown;

ii. the LDH Health Standards Section may request from the Homebuilders provider any documentation or information necessary to be able to evaluate and make a determination to grant or deny the waiver request; and

iii. if granted, the waiver shall be for a limited time, and not to exceed six months.

c. for mobile crisis response teams, the geographic service area shall be the parishes of the LDH region in which the provider is licensed and has its primary business office location;

d. for all other BHS providers, the geographic service area shall be as follows:

i. for providers of residential services the geographic service area shall be the fixed, licensed residential location geographic address and any licensed offsite residential location geographic address only;

ii. for providers of outpatient services (other than providers with a mental health service program that provide services only in the home and community – see below) the geographic service area shall be:

(a). the geographic address of the licensed outpatient clinic;

(b). the geographic address of any licensed offsite outpatient clinic;

(c). in a home or community location in the parish in which the primary business office of the BHS provider is located;

(d). in a home or community location in any parish contiguous to the parish in which the BHS provider's primary business office is located, and

(e). in a home or community location that is within a 50 mile radius of the BHS provider's primary business office.

iii. for providers of a mental health service program that provide services only in the home and community (defined as providers without a fixed, licensed outpatient clinic that only provide behavioral health services to clients in a home or community setting) the geographic service area shall be:

(a). the geographic address of the home or community location in the parish in which the designated primary business office of the BHS provider is located;

(b). the geographic address of the home or community location in any parish contiguous to the parish in which the BHS provider's primary business office is located; and

(c). the geographic address of the home or community location that is within a 50 mile radius of the BHS provider's designated primary business office.

3. A BHS provider may not provide telehealth services outside of its geographic service area.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2151-2162.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 41:1687 (September 2015), amended by the Department of Health, Bureau of Health Services Financing, LR 43:1380 (July 2017), LR 46:588 (April 2020), LR 48:1281 (May 2022).

### **§5606. License Restrictions and Exceptions**

A. A BHS provider shall provide only those services or modules:

1. specified on its license; and
2. only to clients residing in the provider's designated geographic service area or at the provider's licensed location.

B. A BHS provider may apply for a waiver from the HSS to provide home or community services to a client residing outside of the provider's designated geographic service area only under the following conditions:

1. A waiver may be granted by HSS if there is no other BHS provider in the client's service area that is licensed and that has the capacity to provide the required services to the client.

2. The provider shall submit a written waiver request to HSS.

3. The written waiver request shall be specific to one client and shall include the reasons for which the waiver is requested.

4. HSS shall approve or deny the waiver request within 30 days of receipt of the written waiver request, and shall provide written notice to the provider via mail or electronic transmission (email or facsimile).

5. The provider shall notify the client of HSS's decision.

C. The provider shall not provide services to a client residing outside of the provider's designated geographic service area unless the provider has received a written waiver request approval from HSS.

D. There is no appeal from a decision by HSS to deny a waiver request under this Section.

E. Exception to Service Delivery Area. A BHS homebuilders provider may request the approval of an alternate service delivery area that shall include the following submitted to the HSS:

1. letter of FNR approval for the alternate geographic service delivery area; and
2. attestation that the homebuilders program currently has less than three staff providing homebuilders services in the alternate geographic service delivery area;

F. Exceptions during a Gubernatorial Declared State of Emergency or Disaster

1. To ensure the health and safety of clients, and the coordination and continuation of services to clients, during a

gubernatorial declared state of emergency or disaster in Louisiana, the department, through written notice sent electronically to licensed BHS providers, may allow a licensed BHS provider to operate and provide services to existing clients who are receiving outpatient BHS services and who have evacuated or temporarily relocated to another location in the state when the following apply:

- a. the client has evacuated or temporarily relocated to a location outside of the provider's licensed region due to the declared state of emergency or disaster;

- b. the client shall have been a client of the BHS provider as of the declared state of emergency or disaster, with an approved treatment plan;

- c. the provider has sufficient and qualified staff to provide services at the client's temporary location;

- d. the provider is responsible for ensuring that all essential services, are provided in accordance with the treatment plan; and

- e. the provider shall not interfere with the client's right to choose a provider of his/her choice if the client elects a new BHS provider in the area where the client relocates. The provider shall facilitate client's selection.

2. Under the provisions of §5606.F.1-4, the department's initial written notice to licensed BHS providers to authorize these allowances shall be for a period not to exceed 45 days. The department may extend this initial period, not to exceed an additional 45 days, upon written notice sent electronically to the licensed BHS providers.

3. Under the supervision of §5606.F.1-4, the department, in its discretion, may authorize these allowances statewide or to certain affected parishes.

4. A BHS provider who wants to provide services to a client that has temporarily relocated out of state must contact that state's licensing/certification department to obtain any necessary licensing and/or certification before providing services in that state.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2151-2162.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 46:588 (April 2020), amended LR 48:1281 (May 2022).

## Subchapter E. Personnel

### §5641. General Requirements

A. The BHS provider shall maintain an organized professional staff who is accountable to the governing body for the overall responsibility of:

1. the quality of all clinical care provided to clients;
2. the ethical conduct and professional practices of its members;
3. compliance with policies and procedures; and
4. the documented staff organization that pertains to the provider's setting and location.

B. The direct care staff of a BHS provider shall:

1. have the qualifying experience to provide the services required by its clients' treatment plans; and
2. not practice beyond the scope of his/her license, certification and/or training.

C. The provider shall ensure that:

1. Qualified direct care staff members are present with the clients as necessary to ensure the health, safety and well-being of clients;
2. Staff coverage is maintained in consideration of:
  - a. acuity of the clients being serviced;
  - b. the time of day;
  - c. the size, location, physical environment and nature of the provider;
  - d. the ages and needs of the clients;
  - e. ensuring the continual safety, protection, direct care and supervision of clients;
3. applicable staffing requirements in this Chapter are maintained;
4. mechanisms are developed for tracking staff attendance and hours worked during operational hours whether onsite or off-site;
5. there is adequate justification for the provider's assigned staffing patterns at any point in time.

D. Criminal Background Checks

1. For any provider that is treating children and/or adolescents, the provider shall either:
  - a. obtain a statewide criminal background check by an agency authorized by the Office of State Police to conduct criminal background checks on all staff that was conducted within 90 days prior to hire or employment; or
  - b. request a criminal background check on all staff prior to hire or employment in the manner required by R.S. 15:587.1 et seq.

2. For any provider that is treating adults, the provider shall obtain a statewide criminal background check on all unlicensed direct care staff within 90 days prior to hire or employment by an agency authorized by the Office of State Police to conduct criminal background checks. The background check shall be conducted within 90 days prior to hire or employment.

3. A provider that hires a contractor to perform work which does not involve any contact with clients is not required to conduct a criminal background check on the contractor if accompanied at all times by a staff person when clients are present in the provider.

E. Prior to hiring the unlicensed direct care staff member, and once employed, at least every six months thereafter or more often, the provider shall review the Louisiana state nurse aide registry and the Louisiana direct service worker registry to ensure that each unlicensed direct care staff member does not have a negative finding on either registry.

F. Prohibitions

1. The provider is prohibited from knowingly employing or contracting with, or retaining the employment of or contract with, a member of the direct care staff who:

a. has entered a plea of guilty or nolo contendere, no contest, or has been convicted of a felony involving:

- i. abuse or neglect of a person;
- ii. an alcohol or drug offense, unless the employee or contractor has:

(a). completed his/her court-ordered sentence, including community service, probation and/or parole; and

(b). been sober per personal attestation for at least the last 2 years;

iii. any crimes that requires the person to register pursuant to the Sex Offenders Registration Act;

iv. misappropriation of property belonging to another person when:

- (a). the offense was within the last five years; or
- (b). the employee/contractor has not completed his/her sentence, including, if applicable, probation or parole;

v. a crime of violence;

b. has a finding placed on the Louisiana state nurse aide registry or the Louisiana direct service worker registry.

G. Orientation and Training

1. All staff shall receive orientation. All direct care staff shall receive orientation prior to providing direct client care without supervision.

2. All staff shall receive in-service training:

- a. at least once a year;

b. that complies with the provider's policies and procedures;

c. that is necessary depending on the needs of the clients; and

d. that is specific to the age of the provider's population.

3. The content of the orientation and in-service training shall include the following:

a. confidentiality in accordance with federal and state laws and regulations;

b. grievance process;

c. fire and disaster plans;

d. emergency medical procedures;

e. organizational structure and reporting relationships;

f. program philosophy;

g. policies and procedures;

h. detecting and mandatory reporting of client abuse, neglect or misappropriation;

i. detecting signs of illness or dysfunction that warrant medical or nursing intervention;

j. basic skills required to meet the health needs and challenges of the client;

k. crisis intervention and the use of nonphysical intervention skills, such as de-escalation, mediation conflict resolution, active listening and verbal and observational methods to prevent emergency safety situations;

l. telephone crisis mitigation for those staff members who provide such services;

m. client's rights;

n. duties and responsibilities of each employee;

o. standards of conduct required by the provider;

p. information on the disease process and expected behaviors of clients;

q. maintaining a clean, healthy and safe environment;

r. infectious diseases and universal precautions; and

s. basic emergency care for accidents and emergencies until emergency medical personnel can arrive at provider.

4. The orientation and in-service training shall:

a. be provided only by staff who are qualified by education, training, and qualifying experience; and

b. includes documentation of demonstrated competency of direct care staff, ongoing and prior to providing services to clients.

5. The in-service trainings shall serve as a refresher for subjects covered in orientation or training as indicated through the QI process.

I. The provider shall document an annual staff performance evaluation of all employees.

J. The provider shall report violations of laws, rules, and professional and ethical codes of conduct by provider staff and volunteers to the appropriate professional board or licensing authority.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2151-2161.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 41:1699 (September 2015).

### **§5643. Core Staffing Personnel Qualifications and Responsibilities**

A. All BHS providers shall abide by the following minimum core staffing requirements and shall meet the additional requirements. All BHS providers shall also meet the additional requirements for each specialized program or module pursuant to the provisions of this Chapter as applicable to each BHS provider.

B. Professional Staffing Standards. All BHS providers shall, at a minimum, have the following staff:

1. a medical director who:

a. is a physician, or an APRN, or a MP, with a current, unrestricted license to practice in the state of Louisiana with two years of qualifying experience in treating psychiatric disorders;

EXCEPTION: Mental health rehabilitation providers exclusively providing the evidence-based practice multi-systemic therapy (MST), functional family therapy (FFT), or Homebuilders® are excluded from the requirement of having a medical director. Such shall have a clinical director in accordance with §5643.B.2.

b. has the following assigned responsibilities:

i. ensures that the necessary medical services are provided to meet the needs of the clients;

ii. provides oversight for provider policy/procedure, client treatment plans and staff regarding the medical needs of the clients according to the current standards of medical practice;

iii. directs the specific course of medical treatment for all clients;

iv. reviews reports of all medically related accidents/incidents occurring on the premises and identify hazards to the administrator;

v. participates in the development and implementation of policies and procedures for the delivery of services;

vi. periodically reviews delivery of services to ensure care meets the current standards of practice; and

vii. participates in the development of new programs and modifications;

c. has the following responsibilities or designates the duties to a qualified practitioner:

- i. writes the admission and discharge orders;
- ii. writes and approves all prescription medication orders;
- iii. develops, implements and provides education regarding the protocols for administering prescription and non-prescription medications on-site;
- iv. provides consultative and on-call coverage to ensure the health and safety of clients;
- v. collaborates with the client's primary care physician and psychiatrists as needed for continuity of the client's care; and

d. may also fulfill the role of the clinical director, if the individual is qualified to perform the duties of both roles;

2. a clinical director who, for those mental health rehabilitation providers which exclusively provide the evidenced-based practice multi-systemic therapy (MST), functional family therapy (FFT) or Homebuilders:

a. is a licensed psychiatrist, psychologist, clinical social worker, professional counselor (LPC) or marriage and family therapist (LMFT) with a minimum of two years qualifying experience in treating psychiatric disorders and who maintains a current, unrestricted license to practice in the state of Louisiana;

b. has the following assigned responsibilities:

- i. ensures that the necessary services are provided to meet the needs of the clients;
- ii. provides oversight for provider policy/procedure, client treatment plans and staff regarding the clinical needs of the clients according the current standards of clinical practice;
- iii. directs the specific course of clinical treatment for all clients;
- iv. reviews reports of all accidents/incidents occurring on the premises and identifies hazards to the administrator;
- v. participates in the development and implementation of policies and procedures for the delivery of services;
- vi. periodically reviews delivery of services to ensure care meets the current standards of practice; and
- vii. participates in the development of new programs and modifications; and

c. has the following responsibilities or designates the duties to a qualified practitioner:

- i. provides consultative and on-call coverage to ensure the health and safety of clients; and

ii. collaborates with the client's primary care physician and psychiatrist as needed for continuity of the client's care;

3. an administrator who:

a. has either a bachelor's degree from an accredited college or university or one year of qualifying experience that demonstrates adequate knowledge, experience and expertise in business management;

b. is responsible for the on-site day to day operations of the BHS provider and supervision of the overall BHS provider's operation commensurate with the authority conferred by the governing body; and

c. shall not perform any programmatic duties and/or make clinical decisions unless licensed to do so;

4. a clinical supervisor who, with the exception of opioid treatment programs:

a. is an LMHP that maintains a current and unrestricted license with its respective professional board or licensing authority in the state of Louisiana;

b. shall be on duty and on call as needed;

c. has two years of qualifying clinical experience as an LMHP in the provision of services provided by the provider;

d. shall have the following responsibilities:

i. provide supervision utilizing evidenced-based techniques related to the practice of behavioral health counseling;

ii. serve as resource person for other professionals counseling persons with behavioral health disorders;

iii. attend and participate in care conferences, treatment planning activities, and discharge planning;

iv. provide oversight and supervision of such activities as recreation, art/music or vocational education;

v. function as client advocate in treatment decisions;

vi. ensure the provider adheres to rules and regulations regarding all behavioral health treatment, such as group size, caseload, and referrals;

vii. provide only those services that are within the person's scope of practice; and

viii. assist the clinical director and/or medical director and governing body with the development and implementation of policies and procedures;

5. nursing staff who, for those BHS providers whose services include medication management and/or addiction treatment services:

a. provide the nursing care and services under the direction of a registered nurse (RN) necessary to meet the needs of the clients; and

b. have a valid current nursing license in the State of Louisiana.

i. A BHS provider with clients who are unable to self-administer medication shall have a sufficient number of nurses on staff to meet the medication needs of its clients.

ii. Nursing services may be provided directly by the BHS provider or may be provided or arranged via written contract, agreement, policy, or other document. The BHS provider shall maintain documentation of such arrangement.

C. Other Staffing Requirements. The provider shall abide by the following staffing requirements that are applicable to its provider:

#### 1. Licensed Mental Health Professionals

a. The provider shall maintain a sufficient number of LMHPs, who are licensed to practice independently in the state of Louisiana to diagnose and treat mental illness and/or substance use, to meet the needs of the provider's clients.

b. The LMHP has the following responsibilities:

i. provide direct care to clients utilizing the core competencies of addiction counseling and/or mental health counseling and may serve as primary counselor to specified caseload;

ii. serve as resource person for other professionals in their specific area of expertise;

iii. attend and participate in individual care conferences, treatment planning activities, and discharge planning;

iv. provide on-site and direct professional supervision of any UP or inexperienced professional;

v. function as the client's advocate in all treatment decisions affecting the client; and

vi. prepare and write notes or other documents related to recovery (e.g. assessment, progress notes, treatment plans, discharge, etc.).

#### 2. Unlicensed Professionals

a. The provider shall maintain a sufficient number of UPs to meet the needs of its clients;

b. The UP shall:

i. provide direct care to clients and may serve as primary counselor to specified caseload under clinical supervision;

ii. serve as resource person for other professionals and paraprofessionals in their specific area of expertise;

iii. attend and participate in individual care conferences, treatment planning activities and discharge planning;

iv. function as the client's advocate in all treatment decisions affecting the client; and

v. prepare and write notes or other documents related to recovery (e.g. assessment, progress notes, treatment plans, etc.).

#### 3. Direct Care Aides

a. A residential provider shall have a sufficient number of direct care aides to meet the needs of the clients;

b. A provider that provides outpatient services shall use direct care aides as needed;

c. Direct care aides shall meet the following minimum qualifications:

i. has obtained a high school diploma or equivalent;

ii. be at least 18 years old in an adult provider and 21 years old in a provider that treats children and/or adolescents.

d. Direct care aides shall have the following responsibilities:

i. ensure a safe environment for clients;

ii. exercise therapeutic communication skills;

iii. take steps to de-escalate distressed clients;

iv. observe and document client behavior;

v. assist with therapeutic and recreational activities;

vi. monitor clients' physical well-being;

vii. provide input regarding client progress to the interdisciplinary team;

viii. oversee the activities of the facility when there is no professional staff on duty;

ix. possess adequate orientation and skills to assess situations related to relapse and to provide access to appropriate medical care when needed; and

x. function as client advocate.

#### 4. Volunteers

a. If a BHS provider utilizes volunteers, the provider shall ensure that each volunteer is:

i. supervised to protect clients and staff;

ii. oriented to the provider, job duties, and other pertinent information;

iii. trained to meet requirements of duties assigned;

iv. given a written job description or written agreement;

v. identified as a volunteer;

vi. trained in privacy measures;

vii. required to sign a written confidentiality agreement; and

viii. required to submit to a statewide criminal background check by an agency authorized by the Office of the State Police to conduct criminal background checks prior to providing direct care.

41:1700 (September 2015), amended by the Department of Health, Bureau of Health Services Financing, LR 43:1383 (July 2017), LR 48:1283 (May 2022).

b. If a BHS provider utilizes student volunteers, it shall ensure that each student volunteer:

i. has current registration with the applicable Louisiana professional board, when required, and is in good standing at all times that is verified by the provider;

ii. is actively pursuing a degree in a human service field or professional level licensure or certification at all times;

iii. provides direct client care utilizing the standards developed by the professional board;

iv. provides care only under the direct supervision of the appropriate supervisor; and

v. provides only those services for which the student has been trained and deemed competent to perform.

c. A volunteer's duties may include:

i. direct care activities only when qualified provider personnel are present;

ii. errands, recreational activities; and

iii. individual assistance to support services.

d. The provider shall designate a volunteer coordinator who:

i. has the experience and training to supervise the volunteers and their activities; and

ii. is responsible for selecting, evaluating and supervising the volunteers and their activities.

#### 5. Care Coordinator

a. The provider shall ensure that each care coordinator:

i. has a high school diploma or equivalent;

ii. is at least 18 years old in an adult provider and 21 years old in provider that treats children and/or adolescents; and

iii. has been trained to perform assigned job duties.

E. Multiple Positions. If a BHS provider employs a staff member in more than one position, the provider shall ensure that:

1. the person is qualified to function in both capacities; and

2. one person is able to perform the responsibilities of both jobs.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2151-2161.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR



**§5689. Community Psychiatric Support and Treatment**

A. The provider that provides community psychiatric support and treatment (CPST) services shall:

1. provide services in community locations where the client lives, works, attends school and/or socializes in addition to or instead of at the licensed entity;
2. provide CPST services with the client present;
3. provide services to minimize the negative effects of the symptoms, emotional disturbances or associated environmental stressors which interfere with the client's daily living;
4. provide individual supportive counseling, solution-focused interventions, emotional and behavioral management and problem behavior analysis with the client;
5. participates in and utilizes strengths-based planning and treatments, that includes identifying strengths and needs, resources, natural supports and developing goals and objectives to address functional deficits associated with the client's mental illness; and
6. provides restoration, rehabilitation and support to develop skills to locate, rent and keep a home.

B. Staffing Requirements

1. Unlicensed Professionals Providing CPST Services

a. The program's UPs that provide CPST, except counseling, shall have one of the following:

- i. a bachelor's degree in social work, counseling, psychology or a related human services field;
- ii. four years of equivalent education in a human service field; or
- iii. four years of qualifying experience working with clients who have behavioral health disorders.

b. The program's UPs that provide counseling services shall have a master's degree in social work, counseling, psychology or a related human services field.

c. The responsibilities of the UPs, when providing CPST services include:

- i. assisting the client with effectively responding to or avoiding identified precursors or triggers that would risk the client remaining in a natural community location;
- ii. assisting in the development of daily living skills specific to managing a home; and
- iii. assisting the client and family members to identify strategies or treatment options associated with the client's mental illness.

2. Licensed Mental Health Professionals

a. The LMHP shall have experience in CPST services.

b. The LMHP is responsible for providing clinical supervision of the CPST staff.

3. The provider shall ensure that the direct care staff's caseload size:

a. is based on the needs of the clients and their families with emphasis on successful outcomes and individual satisfaction; and

b. meets the needs identified in the individual treatment plan.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2151-2161.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 41:1713 (September 2015).