

Date: August 20, 2001

DSL-BQA-01-035

To: Hospitals HOSP 15
Community Based Residential Facilities CBRF 16
Residential Care Apartment Complexes RCAC 14
Community Substance Abuse Service Providers (see below) CSASP 01

HFS 75.07, Medically Monitored Residential Detoxification Service (formerly 61.56, Detoxification Receiving Center)

HFS 75.09, Residential Intoxication Monitoring Service (formerly HFS 61.58, Social Setting Detoxification Program)

HFS 75.11, Medically Monitored Treatment Service (formerly 61.63, Inpatient Treatment Program)

HFS 75.14, Transitional Residential Treatment Service (formerly HFS 61.66, Extended Care Program-Non Medical or HFS 61.67, Extended Care Program-Medical)

From: Vincent Ritacca
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Bureau of Quality Assurance

Via: Philip McCullough, Director
Bureau of Substance Abuse Services

Susan Schroeder, Director
Bureau of Quality Assurance

Interpretive Memorandum: HFS 75/HFS 83 Administrative Rule Cross-System Implementation

The purpose of the following interpretive memorandum is to clarify and resolve certification issues between program certification requirements of substance abuse services standards in HFS 75 and the licensing requirements of community based residential facilities standards in HFS 83.

Background

Current HFS 75 language requires certain substance abuse services to be offered in either an HFS 124 (hospital) environment or an HFS 83 (CBRF) environment in order to be in compliance with code requirements in HFS 75.07, 75.09, 75.11 and 75.14 levels of care. Patients with substance abuse treatment services needs who receive services in an inpatient or residential level of care where the facility does not meet HFS 124 hospital licensure standards shall have the physical environment, safety and structural protections that assure their health and safety while receiving treatment.

Problem

There are currently a limited number of programs/services that have been providing approved AODA services in environments that do not meet HFS 75 requirements to either be licensed as an HFS 124 hospital or be licensed as a HFS 83 CBRF as required by HFS 75 standards. More specifically, these services do not meet the minimum length of stay requirements in HFS 83.03 (1) (a) 4 and generally exceed the nursing care limits in HFS 83.06 (1) (a) 4.

Discussion

1. Generally, the intent to reside in HFS 75.07, 75.09 and 75.11 services is less than 28 days and nursing care can exceed the limitation of three hours of nursing care per patient per week. Program protocol, therefore, is in conflict with core requirements outlined in HFS 83.
2. Since the program components in HFS 75 are detailed to the intensity of services provided to the patient, there is no need to require these services to meet the program components of subchapters I-IV of HFS 83 in order to be certified in HFS 75.07, 75.09 and 75.11.
3. Services approved under HFS 75.07, 75.09 and 75.11 need to comply with the physical environment, safety and structural requirements of subchapters V, VI, and, if applicable, subchapter VII of HFS 83 to be in compliance with the CBRF components essential to adhere to HFS 75.07 (3), 75.09 (3) and 75.11 (3).
4. Services approved under HFS 75.14 will not likely exceed three hours of nursing care per patient per week. Furthermore, the length of stay will likely exceed 28 days. Therefore, services approved under HFS 75.14 must meet all of the program requirements of HFS 83 as a condition for HFS 75 certification, e.g. resident rights.
5. The Bureau of Substance Abuse Services and the Bureau of Quality Assurance concur that utilization of waiver options is relevant to the aforementioned challenges in the implementation of HFS 75.

Interpretation and Solution

Subchapters V, VI, and VII of HFS 83 contain standards that address the physical environment, safety and structural requirements in HFS 75 substance abuse services provided in a non-hospital facility setting. The services affected in HFS 75 are: HFS 75.07, medically monitored residential detoxification services, HFS 75.09, residential intoxication monitoring services, and HFS 75.11, medically monitored treatment services. Facilities certified under subsections HFS 75.07, HFS 75.09, HFS 75.11 must meet subchapters V, VI, and, if applicable VII, of HFS 83 but could be waived for all other requirements in HFS 83. HFS 75.14, certified services, must meet all of the requirements in HFS 83.

The Bureau of Quality Assurance (BQA) will issue a waiver only for subchapters I-IV and approve certification conditionally in HFS 75.07, 75.09 or 75.11 on a facility-by-facility basis. The facility in which the services are provided must be in compliance with the physical environment, safety and structural standards of HFS 83.

Elements of a waiver request

The following elements must be addressed in each exception requested by certified entities:

1. The code under which an exception is requested.
2. Justification for the request.
3. Expected duration of the request not to extend beyond the program's certification period.

4. If a variance, how the program will meet the regulation under which the exception is requested.
5. General statement concerning the impact of the exception on the delivery of services.

Programmatic Questions or Waiver Requests

For more information on the Waivers and Variances, refer to Memo DSL-BQA-01-015 dated March 22, 2001. It is the responsibility of the service provider to apply for a waiver of HFS 83 subchapters I-IV to initiate that process with a request in writing to:

Mark Hale, Supervisor, Program Certification Unit
Bureau of Quality Assurance
1 West Wilson Street, Room 1051
P.O. Box 2969
Madison, WI 53701-2969

Phone (608) 266-0120
Fax (608) 266-5466

Physical Environment Compliance

This memorandum outlines above the physical environment requirements to meet HFS 75 compliance under HFS 75.07, 75.09 and 75.14. These requirements must be in place by **July 31, 2002** for all service providers to maintain certification.

The service provider shall provide to the department, construction plan documentation of their current physical environment to substantiate compliance. Please contact a Bureau of Quality Assurance representative from the list below to confirm if a plan review is required. A plan review typically would not be required for a service provider constructed within a hospital.

If a plan review is required, please apply to the department through the forms available on our web site at: http://www.dhfs.state.wi.us/rl_dsl/CBRF/CBRForms.htm or use Form DSL-2496.

If you have questions regarding the physical environment process for compliance, please contact the appropriate Regional Field Operations Director listed below:

Kevin Coughlin
Regional Field Operations Director
Northeastern (Green Bay) Regional Office
(920) 448-5249

Joanne Powell
Regional Field Operations Director
Northern (Rhineland) Regional Office
(715) 365-2802

Patricia Benesh
Regional Field Operations Director
Southeastern (Milwaukee) Regional Office
(414) 227-4908

Phyllis Tschumper

Regional Field Operations Director
Southern (Madison) Regional Office
(608) 243-2374

Joe Bronner

Regional Field Operations Director
Western (Eau Claire) Regional Office
(715) 836-4753

Attachments: HFS 83 Subchapters V, VI, and VII
Form DSL-2496