

Profile: 586
Appendix # AF
Division of Mental Health and
Substance Abuse Services

Intravenous Drug Abuse Treatment

It is further understood and agreed by both parties through this attachment to the CY 2016 "State and County Contract Covering Social Services and Community Programs" that:

I. Additional Funds Provided/Period Covered

Funds are provided from the federal Substance Abuse Prevention and Treatment Block Grant (SAPTBG) (100%, CFDA# 93.959). The contract period is January 1, 2016 through December 31, 2016.

II. Purpose and Service Conditions on the Use of the Additional Funds

As identified in: IV Drug Grant RFP #DMHSAS – G202

A. Scope of Services: These additional funds shall be used by the county for the following purposes and under the following service conditions:

These funds shall be used by the county for the operation of the programs specified in the approved grant application entitled: "Intravenous Drug Use Treatment (IVDU)" and in accordance with the purposes and conditions specified therein.

Funds may continue to be used to contract with appropriate programs serving this population to do outreach to IVD Users in conjunction with a Memorandum of Understanding (MOU) and agreed upon by the State.

Programs providing treatment for IVDU under this contract must comply with the following:

- B. Priority of Treatment Service: The IVDU programs funded under this contract must give preference in admission in the following order:
1. To pregnant injecting drug users first;
 2. To other pregnant substance abusers second;
 3. To other injecting drug users third;
 4. To women with dependent children fourth;
 5. To homeless persons with co-occurring disorders fifth;
 6. To all others individuals.

C. Requirements Regarding Capacity of Treatment for Intravenous Drug Abusers to Comply with federal law, 45 CFR §96.126: The county and/or their vendor/sub-contractor(s) must offer priority admission, either through immediate admission, or priority placement on a waiting list, to individuals who present with intravenous drug use. Within 7 days of reaching 90 percent of its treatment capacity, the program must notify the state that 90 percent of the capacity has been reached.

1. Admission: The program must admit each individual who requests and is in need of treatment for intravenous drug use not later than:
 - (a) 14 days after making the request; *or*
 - (b) 120 days, if the program has no capacity to admit the individual on the date of the request. However, within 48 hours after the request, the program must make interim services available until the individual is admitted to the substance abuse treatment program.
2. Interim Services: The county and/or vendor/sub-contractor(s) must provide interim services to individuals experiencing intravenous drug use who are placed on a waiting list. The program must offer interim services that include, at a minimum, the following:
 - (a) Counseling and education about HIV and tuberculosis (TB), about the risks of needle-sharing, the risks of transmission to sexual partners and infants, and about steps that can be taken to ensure that HIV and TB transmission does not occur;
 - (b) Referral for HIV or TB treatment services, if necessary;
 - (c) Counseling on the effects of alcohol and other drug use on the fetus for pregnant women, as well as referral for prenatal care.
3. Wait List: If a program funded under this contract establishes a waiting list, it must include a unique patient identifier for each intravenous drug user seeking treatment, including those patients receiving interim services while awaiting admission. The program must have a mechanism that enables it to:
 - (a) Maintain contact with individuals awaiting admission;
 - (b) Admit or transfer waiting list clients at the earliest possible time to an appropriate treatment program within a reasonable geographic area.
 - (c) Take clients awaiting treatment for intravenous drug use off the waiting only when one of the following conditions exists:
 - (1) Such persons cannot be located for admission into treatment; *or*
 - (2) Such persons refuse treatment.
4. Outreach: The program carries out activities to encourage individuals in need of treatment services for intravenous drug use to undergo such treatment by using scientifically sound outreach models. If no such

models are applicable to the local situation, another approach can be used which can reasonably be expected to be an effective outreach method.

The program ensures that outreach efforts have procedures including the following:

- (a) Selecting, training, and supervising outreach workers;
- (b) Contacting, communicating, and following up with high-risk substance users, their associates, neighborhood residents within the constraints of Federal and State confidentiality requirements 45 CFR Parts 160 & 164 Health Insurance Portability and Accountability Act (HIPAA), 42 CFR Part 2, and Wis. Stats. §51.30;
- (c) Promoting awareness among intravenous drug users about the relationship between IV drug use and communicable diseases such as HIV;
- (d) Recommending steps that can be taken to ensure that HIV transmission does not occur;
- (e) Encouraging entry into treatment.

- D. Treatment Services for Pregnant Women, federal law 45 CFR §96.131: The program must give preference in admission to pregnant women who seek or are referred for and would benefit from SAPTBG-funded treatment services, and in the priority order set forth in Section II.B.

Wisconsin programs receiving SAPTBG funds must publicize to women about the services available and the fact that pregnant women receive such preference. This may be done in the following ways: street outreach programs, ongoing public service announcements (radio/television), regular advertisements in local/regional print media, brochures and posters placed in targeted areas, and frequent notification of availability of such treatment distributed to the network of community-based organizations, health care providers and social service agencies.

The program must refer pregnant women to the state when the program has insufficient capacity to provide services to any such pregnant women who seek the services of the program. The program must make available interim services within 48 hours to pregnant women who cannot be admitted because of lack of capacity.

- E. Requirements Regarding Tuberculosis, federal law 45 CFR §96.127: The program directly, or through arrangements with other public or nonprofit private entities, must routinely make available the following TB services to each individual receiving treatment for substance abuse:
- 1. Counseling the individual with respect to TB;

2. Testing to determine whether the individual has been infected with mycobacterium TB to determine the appropriate form of treatment for the individual;
3. Providing for, or referring the individuals infected by mycobacterium TB to appropriate medical evaluation and treatment.

For clients denied admission to the program on the basis of lack of capacity, the program must refer such clients to other providers of TB services. The program must implement infection control procedures that are consistent with those established by the Department to prevent the transmission of TB and that address the following:

1. Screening patients and identification of those individuals who are at high risk of becoming infected;
2. Meeting all State reporting requirements while adhering to Federal and State confidentiality requirements 45 CFR Parts 160 & 164 Health Insurance Portability and Accountability Act, HIPAA, including 42 CFR Part 2;
3. Case management activities to ensure that individuals receive such services.

The program must report all individuals with active TB as required by State law and in accordance with Federal and State confidentiality requirements 45 CFR Parts 160 & 164 Health Insurance Portability and Accountability Act, HIPAA, including 42 CFR Part 2.

- F. Requirements Regarding HIV – 45 CFR §96.128:** SAPTBG funds may not be used for HIV early intervention programs/services. Any SAPTBG funds used for HIV early intervention programs will be subject to repayment to the Substance Abuse and Mental Health Services Administration, which provides SAPTBG funds to states. All Wisconsin programs and providers receiving SAPTBG funds must ensure adherence to items (1) through (6):
1. Funds may not be used for any, or by any, county and/or vendor/sub-contractor make appropriate pretest counseling for HIV and AIDS available at the sites at which the individuals are undergoing treatment for substance abuse.
 2. Funds may not be used for any, or by any, county and/or vendor/sub-contractor to make available, at the sites at which the individuals are undergoing treatment for substance abuse, appropriate HIV/AIDS testing, including tests to diagnose the extent of the deficiency in the immune system and tests to provide information on appropriate therapeutic measures for preventing and treating the deterioration of the immune system and for preventing and treating conditions arising from the disease.
 3. Funds may not be used for any, or by any, county and/or vendor/sub-contractor to make available appropriate post-test counseling at the sites at which the individuals are undergoing treatment for substance abuse.

4. Funds may not be used for any, or by any, county and/or vendor/sub-contractor to make available, at the sites at which individuals are undergoing treatment for substance abuse, therapeutic measures for preventing and treating the deterioration of the immune system and for preventing and treating conditions arising from the disease.
 5. Funds may not be used for any, or by any, county and/or vendor/sub-contractor that has established linkages with a comprehensive community resource network of related health and social services organizations to ensure a wide-based knowledge of the availability of these services and to facilitate referral.
 6. Funds may not be used for any, or by any, county and/or vendor/sub-contractor to ensure that HIV early intervention services provided with patients' informed consent, and are not required as a condition of receiving substance abuse treatment or any other services.
- G. Additional Requirements, in 45 CFR §96.132: The program must:
1. Make continuing education in treatment services available to employees who provide the services;
 2. Have in effect a system to protect patient records from inappropriate disclosure, and the system;
 3. Be in compliance with all applicable State and Federal laws and regulations 45 CFR Parts 160 & 164 HIPAA, 42 CFR Part 2, and Wis. Stat. §51.30;
 4. Include provisions for employee education on the confidentiality requirements and the fact that disciplinary action may occur upon inappropriate disclosure.
- H. Restrictions on the Expenditure of the Grant Vendor/Sub-Contractor Compliance, in 45 CFR §96.135: The program must follow federal requirements as follows:
1. The program must not expend SAPTBG Grant funds to provide inpatient hospital substance abuse services, except in cases when each of the following conditions are met:
 - (a) The individual cannot be effectively treated in a community-based, non-hospital, residential program;
 - (b) The daily rate of payment provided to the hospital for providing the services does not exceed the comparable daily rate provided by a community-based, non-hospital, residential treatment program;
 - (c) A physician makes a determination that the following conditions have been met:
 - i. The primary diagnosis of the individual is substance abuse and the physician certifies that fact.
 - ii. The individual cannot be safely treated in a community-based, non-hospital, residential treatment program.
 - iii. The service can reasonably be expected to improve the person's condition or level of functioning.

- iv. The hospital-based substance abuse program follows national standards of substance abuse professional practice.
 - (d) The service is provided only to the extent that it is medically necessary (e.g., only for those days that the patient cannot be safely treated in a residential, community-based program).
2. The program does not expend SAPTBG funds to make payments to intended recipients of health services.
3. The program does not expend SAPTBG funds to purchase or improve land; purchase, construct, or permanently improve (other than minor remodeling) any building or other facility; or purchase major medical equipment.
4. To satisfy any requirement for the expenditure of non-Federal funds as a condition for the receipt of Federal funds;
5. The program does not expend SAPTBG funds to provide financial assistance to any entity other than a public or nonprofit private entity.
6. The program does not expend SAPTBG funds to provide individuals with hypodermic needles or syringes.
7. The program does not expend SAPTBG funds to provide treatment services in penal or correctional institutions of the state.

When a sub-contract is issued by the county to purchase services utilizing SAPTBG funds, conditions on prohibited expenditures and the condition of first priority of services to pregnant women must be adhered to and monitored by the county. Counties should develop a policy to ensure that all vendors/sub-contractors comply with all of the requirements.

- I. Federal Funds Payment of Last Resort, 45 CFR §96.137:
Programs must use the SAPTBG funds in this contract as the “payment of last resort” for services, including for pregnant women and women with dependent children, TB services, and, therefore, makes every reasonable effort to do the following:
 1. Collect reimbursement for the costs of providing such services to persons entitled to insurance benefits under the Social Security Act, including programs under title XVIII and title XIX; any State compensation program, any other public assistance program for medical expenses, any grant program, any private health insurance, or any other benefit program;
 2. Secure from patients or clients’ payments for services in accordance with their ability to pay.

III. Fiscal Conditions on the Earnings of the Additional Funds

These additional funds are earned under the following conditions:

- A. In accordance with your application goals and objectives and budget.
- B. The Department shall apply these conditions in determining the close of the contract. The amount of a subsequent audit adjustment on the funds

in this contract shall be based exclusively upon these conditions.

IV. Fiscal and Client Reporting on the Use of the Additional Funds

- A. National Outcome Measurement System (NOMS): The county and/or vendors/sub-contractors receiving SAPTBG funds shall report client data on federally-required NOMS using the Program Participation System (PPS). All agencies receiving SAPTBG funds through this contract are required to have in place the mechanisms to report timely, accurate, and complete NOMS data. If the state should receive a reduction in the SAPTBG allocation due to failure to report NOMS, contract agencies that have not met the NOMS reporting requirements may be subject to a funding reduction and required to refund part of payments already made.
- B. Use of these funds shall be reported to the Department on the F-00642 (Profile #586) and the F-20942 Form according to the schedule outlined in the State/County Contract.
- C. Semi-annual program and progress reports on each program goal and objective including fiscal reports on budget line items shall be submitted to the Bureau of Prevention Treatment and Recovery (BPTR) by July 31 and January 31 of the following year in a format provided by the BPTR (Form #F-20389).
- D. An annual program report must be submitted to the BPTR within 30 days after the calendar year of program operations in a format provided by the BPTR.
- E. Failure to report these funds and the clients served by them as specified above may result in the loss of these funds by the county and their repayment by the county to the Department.

V. Payment Procedures

These funds shall be paid in accordance with the State/County contract.

VI. Availability of Funds

The Department shall pay the county for the services it provides or purchases as set forth in this contract within the limits of funds appropriated.

VII. Additional Requirements

Requirements herein stated and in the base State/County contract apply to any sub-grants or grants. The contracting agency has primary responsibility to take constructive steps to ensure the compliance of its subcontractors. The county must inform the sub-grantees of the federal award information set forth herein.