

Health and Human Services Committee

LB 200

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Division of Public Health

Department of Health and Human Services

Good afternoon, Chairman Howard and members of the Health and Human Services Committee. My name is Darrell Klein (D-A-R-R-E-L-L K-L-E-I-N) and I am a Deputy Director for the Division of Public Health at the Department of Health and Human Services (DHHS). I am here to testify in neutral capacity to LB200.

The Licensure Unit has standard practices and procedures for issuing a new license or renewing a license for a Mental Health Substance Use Treatment Center. The team considers a variety of factors when determining a facility's compliance with the State regulations. Some considerations include, but are not limited to:

- Review of policies, procedures, and standing physician protocols of the facility regarding secured environment and the use of restraint and seclusion.
- Review of staff training specific to the use of restraint and seclusion.
- Review of client records related to the use of restraint and seclusion.
- Observations and interviews related to secured environments and the use of restraint and seclusion.

A facility that employs restraint and/or seclusion can be licensed- if the facility meets the overall standard for licensure.

Another factor at play is accreditation, which impacts other Divisions' ability to fund services. A license allows a facility to operate. For the Divisions of Behavioral Health and Medicaid Long-Term Care, accreditation by an outside entity signals that treatment is being provided. The accrediting bodies for this facility type are the Commission on Accreditation of Rehabilitation Facilities, or CARF, the Joint Commission on Accreditation of Healthcare Organizations, or JCAHO and the Council on Accreditation for Children and Family Services, or COA. A facility can be licensed whether or not it chooses to become accredited.

The Divisions of Behavioral Health and Medicaid and Long-Term Care fund behavioral health treatment services, including substance use disorder treatment, for individuals who are financially and clinically eligible and in need of such treatment. Social detoxification treatment services are included in the Behavioral Health and Medicaid continuum of care. Both Divisions will reimburse for covered services, including social detoxification, regardless of whether the services are delivered voluntary or involuntary. Most importantly, accreditation is needed for the Divisions to fund these services.

Facilities that serve as a drop-off center for persons taken into Civil Protective Custody (CPC) and offer services delivered to individuals under CPC do not meet service definitions of social detoxification or any other Behavioral Health and Medicaid covered service. Thus, these services, which are not accredited, are not eligible for reimbursement, because it is confinement, not treatment.

Finally, on behalf of the Department I would like to offer a technical changes for the committee’s consideration if you all decide to advance this bill out of committee. The terminology used in the Nebraska Revised Statute 53-1,121 and proposed new language references, alcoholism center, is not consistent with statutory changes that went into effect in July of 2018 as part of LB1034. The correct facility type is Mental Health Substance Use Treatment Center. Updating the terminology will keep the language consistent with existing law and leaves no doubt regarding the type of facility the new language in LB200 speaks to.

Thank you for your time this afternoon and I will do my best to answer your questions.