

ROY COOPER • Governor

KODY H. KINSLEY • Secretary

MARK PAYNE • Director, Division of Health Service Regulation

MEMORANDUM

TO: Substance Use Service Providers

FROM: Robin Sulfridge, Chief, Mental Health Licensure and Certification Secon

DATE: July 31, 2024

RE: Request for Temporary Waiver of:

10A NCAC 27G .3101(a), (b), .3102 (b), (c), (d) & (e), .3103 (a) & (b) 10A NCAC 27G .3301 (a), .3302 (a), (b), (c) & (d), .3303 (a), (b)

By letter dated November 1, 2017, the Centers for Medicare and Medicaid Services issued SMD #17-003 detailing strategies to address the opioid epidemic. The announcement reflected an intent, pursuant to a Section 1115(a) demonstration waiver, to improve access to and quality treatment of Medicaid beneficiaries in an effort to combat the ongoing opioid crisis. The initiative offered states the opportunity to demonstrate how to implement best practices for improving opioid use disorder and other substance use disorder treatment in light of the barriers unique to each.

Pursuant to Rule 10A NCAC 27G .0806, a waiver request was made by the Division of Mental Health, Developmental Disabilities and Substance Use Services (DMH), Director on January 10, 2024. The waiver request was for the following services areas: 10A NCAC 27G Section .3100, Non-Hospital Medical Detoxification for Substance Abusers, and 10A NCAC 27G Section .3300, Outpatient Detoxification for Substance Abuse. The request was for waivers of the rules specific to the service areas listed above to permit flexibility to facilitate more successful outcomes for withdrawal management services. The waiver request will be effective October 1, 2024.

The requested waivers are contingent upon the Substance Use Service Providers attestation of compliance with the alternative language provided in its stead. The alternative language is consistent with standards implemented by the American Society of Addictive Medicine as well as the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Furthermore, the alternative language imposes safeguards intended to ensure that the health, safety, and welfare of the consumers served during the duration of these waivers will not be threatened.

Pursuant to North Carolina General Statute § 122C-23(f), the Department of Health and Human Services' Division of Health Service Regulation (DHSR) may, based on a written application and for good cause, waive any of the rules implementing Article 2 of Chapter 122C so long as those rules do not affect the health, safety, or welfare of individuals served by the facility. Upon receipt and approval of a Substance Use Service Providers request for a waiver (using the request form attached to this memorandum), based on the DMH Director's request, DHSR will temporarily waive 10A NCAC 27G .3101(a), (b), .3102 (b), (c), (d) & (e), .3103 (a) & (b) 10A NCAC 27G .3301 (a), .3302 (a), (b), (c), (d), .3303 (a), (b) subject to the Substance Use Service Providers representing and agreeing to the parameters set forth in the attached document(s). DHSR is exercising this authority to waive rules in order to align with the State strategies to address the opioid epidemic and improve access and quality of care.

MENTAL HEALTH LICENSURE & CERTIFICATION SECTION

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION

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Substance Use Service Providers may request a temporary waiver of the following as applicable to their service array for: 10A NCAC 27G .3101(a), (b), .3102 (b), (c), (d) & (e), .3103 (a) & (b) 10A NCAC 27G .3301 (a), .3302 (a), (b), (c), (d), .3303 (a), (b) by completing and signing the appropriate waiver service request(s) and returning them to DHSR's Mental Health Licensure and Certification Section, Pam Pridgen, Administrative Supervisor, via email (pam.pridgen@dhhs.nc.gov).

Attachment

cc: Julie Cronin

Bethany Burgon Emery Milliken Mark Payne

DHSR@Alliancebhc.org QM@partnersbhm.org dhhs@vayahealth.com

networkEngagement@trillium.nc.org