



ADMINISTRATIVE RULES OF MONTANA



37.106.1468 OUTPATIENT SUBSTANCE USE DISORDER FACILITY

- (1) To be licensed to provide SUD services in an outpatient setting, a SUDF must meet the following staffing requirements:
 - (a) clinical director;
 - (b) licensed addiction counselors or mental health professionals in sufficient numbers to provide counseling and therapy services to patients with substance use disorders as described by this chapter and in accordance with the patients' individualized treatment plans; and
 - (c) care managers in sufficient numbers to provide services to patients required by this chapter and in accordance with the patients' individualized treatment plans.
- (2) Skilled treatment services must be provided by an interdisciplinary team of appropriately licensed, certified, and/or trained staff.
- (3) An outpatient substance use disorder facility must provide crisis telephone services and comply with the following requirements:
 - (a) ensure crisis telephone services are available 24 hours a day, seven days a week;
 - (b) answering services or other individuals may be used to transfer calls to individuals trained to respond to crisis calls.
- (4) The facility must have written policies and procedures outlining crisis telephone services that include:
 - (a) training requirements for individuals responding to crisis calls;
 - (b) ensuring a licensed addition counselor or mental health professional provides consultation and backup, as indicated, for unlicensed individuals responding to crisis calls; and
 - (c) utilization of community resources.
- (5) The facility must maintain documentation for each crisis call that includes:
 - (a) the date and time of the call;
 - (b) the staff involved;
 - (c) identifying data, if possible;
 - (d) the nature of the emergency, including a screening of safety and risk, strengths and resources, and medical concerns related to the crisis; and
 - (e) the result of the intervention.

- (6) Coordination of necessary services (medical, laboratory, toxicology, psychiatric, psychological, emergency) or other levels of care and supportive housing services must be available through direct affiliation or referral processes.

Authorizing statute(s): 50-5-103, MCA

Implementing statute(s): 50-5-103, MCA

History: NEW, 2022 MAR p. 1889, Eff. 9/24/22.