

CONCISE EXPLANATORY STATEMENT

RULES AND REGULATIONS FOR BEHAVIORAL HEALTHCARE ORGANIZATIONS

In accordance with the Administrative Procedures Act, R.I. Gen. Laws § 42-35-2.6, following is a concise explanatory statement:

AGENCY: RHODE ISLAND DEPARTMENT OF BEHAVIORAL HEALTHCARE, DEVELOPMENTAL DISABILITIES & HOSPITALS (BHDDH)

DIVISION: N/A

RULE IDENTIFIER: 212RICR101001, ERLID 7819

RULE TITLE: RULES AND REGULATIONS FOR BEHAVIORAL HEALTHCARE ORGANIZATIONS

REASON FOR RULEMAKING: By this rulemaking, BHDDH is adopting prevailing standards for the licensure and operation of facilities and programs providing behavioral health services for adults who are not in the custody of the Department of Children, Youth, and Families (DCYF), and/or substance use disorder services for children and adults.

ANY FINDING REQUIRED BY LAW AS A PREREQUISITE TO THE EFFECTIVENESS OF THE RULE: N/A

TESTIMONY AND COMMENTS: Please see attached testimony and comments.

CHANGE TO TEXT OF THE RULE: Please see attached response to comments.

REGULATORY ANALYSIS: Please see attached cost benefit analysis. Overall, the proposed changes cover three (3) areas.

First, the most significant change to the regulations is that they have been modernized to conform with current practice, industry standards and best practice in the delivery of behavioral healthcare services. Personcentered, communitybased

themes and language were addressed throughout the document. Safety of consumers and staff was also a major focus.

The second significant focus is on clearly defining the types of services associated with the levels of care provided by licensed behavioral health organizations and ensuring alignment with best practice standards established by nationally recognized bodies.

The final significant changes were to remove redundancies and language that is nonregulatory in nature. The teams worked to ensure that rules were only stated once in the document, either in the licensing section of the regulations or in the BHO regulations if the content was specific to behavioral health. Policy statements were removed from the document to be addressed by the appropriate oversight authority. All language in the regulations that exceeds BHDDH's regulatory mandate was removed. The changes are documented and references are made on how those changes are addressed to maintain appropriate safeguards for the population served by these regulations.

BHDDH has determined through its internal work, the stakeholder process, and the benefitcost analysis that the benefits of the proposed BHO regulations justify the costs, and that the proposed rule has greater net benefits than other regulatory alternatives.