A new Part 801 is added to Title 14 of the New York Codes, Rules and Regulations to read as follows:

Part 801

Behavioral Health Organizations

Section 801.1 Statement of Purpose

The purpose of this part is to set forth the responsibilities for providers of Part 816 Medically Managed Detoxification Services and inpatient medically supervised withdrawal services, Part 818 Chemical Dependence Inpatient Rehabilitation Services and Part 822 Chemical Dependence Outpatient and Opioid Treatment Services regarding Behavioral Health Organizations.

Section 801.2 Legal Base

- (a) Section 19.07(c) of the Mental Hygiene Law (MHL) charges the Office of Alcoholism and Substance Abuse Services (OASAS) with the responsibility for seeing that persons who abuse or are dependent on alcohol and/or substances and their families are provided with care and treatment that is effective and of high quality.
- (b) Section 19.07(e) of the MHL authorizes the Commissioner to adopt standards including necessary rules and regulations pertaining to chemical dependence treatment services.
- (c) Section 19.09(b) of the MHL authorizes the Commissioner to adopt regulations necessary and proper to implement any matter under his/her jurisdiction.
- (d) Section 19.16 of the MHL requires the Commissioner to establish and maintain, either directly or through contract, a central registry for purposes of preventing multiple enrollments in methadone programs.
- (e) Section 19.21(b) of the MHL requires the Commissioner to establish and enforce regulations concerning the licensing, certification, and inspection of chemical dependence treatment services.
- (f) Section 19.21(d) of the MHL requires OASAS to establish reasonable performance standards for providers of services certified by OASAS.
- (g) Section 19.40 of the MHL authorizes the Commissioner to issue operating certificates for the provision of chemical dependence treatment services.
- (h) Section 32.01 of the MHL authorizes the Commissioner to adopt any regulation reasonably necessary to implement and effectively exercise the powers and perform the duties conferred by Article 32 of the MHL.
- (i) Section 32.07(a) of the MHL authorizes the Commissioner to adopt regulations to effectuate the provisions and purposes of Article 32 of the MHL.

(j) Section 365-m of the Social Services Law authorizes the Commissioner of OASAS and the Commissioner of the Office of Mental Health, in consultation with the Department of Health, to contract with regional behavioral health organizations to provide administrative and management services for the provision of behavioral health services.

Section 801.3 Behavioral Health Organization

- (a) Behavioral Health Organization or BHO shall mean an entity selected by the Commissioner of the Office of Alcoholism and Substance Abuse Services and the Commissioner of the Office of Mental Health pursuant to Section 365-m of the New York State Social Services Law to provide administrative and management services for the purposes of conducting concurrent review of Behavioral Health admissions to inpatient treatment settings, assisting in the coordination of Behavioral Health Services, and facilitating the integration of such services with physical health care.
- (b) Concurrent Review shall mean the review of the clinical necessity for continued inpatient Behavioral Health Services, resulting in a non-binding recommendation regarding the need for such continued inpatient services.

Section 801.4 Provider Obligations for Part 816 and Part 818 services

Providers of Part 816 Medically Managed Detoxification Services and inpatient Medically Supervised Withdrawal Services and Part 818 Chemical Dependence Inpatient Rehabilitation Services shall cooperate with their designated regional Behavioral Health Organization. At a minimum, such cooperation shall include:

- (a) notifying the appropriate Behavioral Health Organization of an admission for a behavioral health condition for which coverage is provided by Medicaid on a fee-for-service basis to an individual who is not also enrolled in the Medicare program. Such notification shall be provided within 24 hours of such admission or, for an admission occurring on a Friday, Saturday, Sunday or public holiday, by 5:00 p.m. on the next business day following such admission. When Medicaid coverage cannot be determined at the time of admission, notification shall be provided as soon as practicably possible after confirmation of Medicaid eligibility, but in no event more than 24 hours after such confirmation or, for a confirmation made on a Friday, Saturday, Sunday or public holiday, later than 5:00 p.m. on the next business day following such confirmation;
- (b) cooperating with concurrent review activities;
- (c) ensuring that the discharge plan for such an individual includes consideration of physical health needs and services;
- (d) notifying such behavioral health organization no later than 24 hours subsequent to the discharge of such an individual or, for a discharge occurring on a Friday, Saturday, Sunday or public holiday, by 5:00 p.m. on the next business day following such discharge; and
- (e) seeking to obtain, as needed, such individual's consent to receive and provide information in a manner that is consistent with federal and state confidentiality laws.

Section 801.5 Provider Obligations for Part 822 services

Providers of Part 822 Chemical Dependence Outpatient and Opioid Treatment services shall cooperate with designated regional behavioral health organizations and shall be authorized to exchange clinical information concerning clients with such organizations in a manner consistent with federal and state confidentiality laws.