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PROVIDER REQUIREMENTS

A provider must be enrolled in the Medicaid Program and meet the provider qualifications at the time service is rendered to be eligible to receive reimbursement through the Louisiana Medicaid Program.

Providers should refer to Chapter 1 – General Information and Administration of the *Medicaid Services Manual* for additional information on provider enrollment and requirements, including general standards for participation. (See Appendix A for information on accessing Chapter 1.)

Healthy Louisiana managed care organizations (MCOs) are responsible for ensuring providers with whom they contract to provide specialized behavioral health services (SBHS), meet the minimum qualification requirements in accordance with the below provisions, all applicable state and federal laws, rules and regulations, and Centers for Medicare and Medicaid Services’ (CMS) approved waivers and Medicaid State Plan amendments.

Licensure and Specific Provider Requirements

Providers must meet licensure and/or certification requirements, as well as other additional requirements as outlined below:

Therapeutic Group Homes

Agency Qualifications

Facilities that operate as therapeutic group homes (TGH) must:

- Be licensed as a TGH by LDH in accordance with R.S. 36:254 and R.S. 40:2009;
- Provide community-based residential services in a home-like setting of no greater than 10 beds, under the supervision and oversight of a psychiatrist or licensed psychologist;
- Be accredited by CARF, COA, or TJC. Denial, loss of, or any negative change in accreditation status, must be reported to their contracted MCOs in writing immediately upon notification by the accreditation body;
- Ensure that staff be supervised by a LMHP with experience in evidence-based treatments and operating within their scope of practice license;

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- Arrange for criminal background checks and maintain documentation that all persons, prior to employment, pass criminal background checks through the DPS State Police. If the results of any criminal background check reveal that the potential employee (or contractor) was convicted of any offenses against a child/youth or an elderly or disabled person, the provider shall not hire and/or shall terminate the employment (or contract) of such individual. The provider shall not hire an individual with a record as a sex offender nor permit these individuals to work for the provider as a subcontractor. Criminal background checks must be performed as required by R.S. 40:1203 et seq., and in accordance with R.S. 15:587 et seq. Criminal background checks performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Arrange for TB testing and maintain documentation that all persons, prior to employment, are free from TB in a communicable state via skin testing to reduce the risk of such infections in recipients and staff. Results from testing performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Establish and maintain written policies and procedures, inclusive of drug testing staff, to ensure an alcohol and drug-free workplace and a workforce free of substance use;
- Maintain documentation that all direct care staff, who are required to complete first aid, CPR and seizure assessment training, complete the training within 30 days of hire;
- Maintain documentation verifying that staff meet educational and professional requirements, licensure (as applicable), as well as completion of required trainings; and
- Ensure and maintain documentation that all unlicensed persons employed by the agency complete training in a recognized crisis intervention curriculum prior to handling or managing crisis calls, which shall be updated annually.

Staffing Qualifications

Individuals who provide TGH services must meet the following requirements:

- Staff may include paraprofessional and bachelor's level staff, who provide integration with community resources, skill building and peer support services, as well as master's level staff who provide individual, group and family

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interventions with degrees in social work, counseling, psychology or a related human services field.

- Direct care staff must be at least 18 years old, and have a high school diploma or equivalent. All unlicensed staff must have oversight by a psychiatrist, psychologist or LMHP;
 - Direct care staff providing services must also be at least three years older than all clients under the age of 18;
 - Have a minimum of two years of experience working with children, be equivalently qualified by education in the human services field, or have a combination of work experience and education with one year of education substituting for one year of experience;
 - Shall not have a finding on the Louisiana State Nurse Aide Registry and the Louisiana Direct Service Worker Registry against him/her;
- Staff must pass a criminal background check through the DPS State Police prior to employment;
- Staff must pass a TB test prior to employment;
- Staff must pass drug screening tests as required by the agency's policies and procedures;
- Staff must complete first aid, CPR and seizure assessment training. (**NOTE:** Psychiatrists, APRNs/CNSs/PAs, RNs and LPNs are exempt from this training.);

Approved Curriculum and Equivalency Standards

All therapeutic group home staff must complete all required trainings appropriate to the program model approved by OBH.

Psychiatric Residential Treatment Facilities (PRTFs)

Agency Qualifications

Agencies that operate as psychiatric residential treatment facilities (PRTFs) must:

- Be licensed by the Louisiana Department of Health (LDH) in accordance with R.S. 40:2009;

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- Be accredited by an LDH approved accrediting body: the CARF, COA or TJC. Denial, loss of, or any negative change in accreditation status, must be reported to their contracted MCOs in writing immediately upon notification by the accreditation body;
- Submit a program description to the State inclusive of the specific research based models to be utilized for both treatment planning and service delivery. PRTFs must have OBH approval of the PRTF program description and research model(s) prior to enrolling with Medicaid or executing a provider ad hoc agreement or contract with a Medicaid managed care entity(ies);
- Have OBH approval of the auditing body(ies) providing evidence-based practice (EBP) and/or American Society of Addiction Medicine (ASAM) fidelity monitoring. PRTFs shall submit fidelity monitoring documentation annually demonstrating compliance with at least two EBPs and/or ASAM criteria;
- Arrange for criminal background checks and maintain documentation for any applicant for employment, contractor, volunteer and other person who will provide services to the residents prior to that person working at the facility. If the results of any criminal background check reveal that the potential employee, volunteer or contractor was convicted of any offenses against a child/youth or an elderly or disabled person, the provider shall not hire and/or shall terminate the employment (or contract) of such individual. The provider shall not hire an individual with a record as a sex offender nor permit these individuals to work for the provider as a subcontractor. Criminal background checks must be performed as required by R.S. 40:1203 et seq., and in accordance with R.S. 15:587 et seq. Criminal background checks performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- The PRTF is also restricted from knowingly employing and/or contracting with a person who has a finding placed on the Louisiana State Nurse Aide Registry or the Louisiana Direct Service Worker Registry.
- Arrange for TB testing and maintain documentation that all persons, prior to employment, are free from TB in a communicable state via skin testing to reduce the risk of such infections in recipients and staff. Results from testing performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Establish and maintain written policies and procedures, inclusive of drug testing staff, to ensure an alcohol and drug-free workplace and a workforce free of substance use;

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- Maintain documentation that all direct care staff, who are required to complete first aid, cardiopulmonary resuscitation (CPR) and seizure assessment training, complete the training within 90 days of hire; and
- Maintain documentation verifying that staff meet educational and professional requirements, licensure (where applicable), as well as completion of required trainings.

PRTFs must comply with federal emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid programs. Regulations include safeguarding human resources, maintaining business continuity and protecting physical resources. Refer to Appendix A for the link to access CMS emergency preparedness regulation guidance and resources). Regulations must be implemented by November 15, 2017.

Staffing Qualifications

PRTF staff must:

- Pass a criminal background check through DPS State Police prior to employment;
- Pass a TB test prior to employment;
- Pass drug screening tests as required by the agency's policies and procedures;
- Complete first aid, CPR and seizure assessment training. (**NOTE:** Psychiatrists, APRNs/ CNSs/ PAs, RNs and LPNs are exempt from this training.); and
- Complete all required training appropriate to the program model approved by OBH.

All experience requirements for staff are related to paid experience. Volunteer work, college work-study or internship related to completion of a degree cannot be counted as work experience. If experience is in a part-time position, the staff person must be able to verify the amount of time worked each week. Experience obtained while working in a position for which the individual is not qualified may not be counted as experience.

Per federal regulations at 42 CFR 441.156 and state regulations at LAC 48: I.9067, the team must, at a minimum, include the following individuals:

- A board-eligible or board-certified psychiatrist;

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- A clinical psychologist and a physician licensed to practice medicine or osteopathy; and
- A Physician licensed to practice medicine or osteopathy, with specialized training and experience in the diagnosis and treatment of mental diseases, and a licensed clinical or medical psychologist.

The team must also include one of the following:

- A licensed clinical social worker (LCSW);
- An RN with specialized training or one year's experience in treating individuals with mental illness;
- An occupational therapist who is licensed, if required by the State, and who has specialized training or one year of experience in treating mentally ill individuals; and
- A licensed clinical or medical psychologist.

PRTF - ASAM Level 3.7, Medically Monitored Residential (Adolescents) and ASAM Level 3.7-WM, -Medically Monitored Residential Withdrawal Management (Adolescents)**Facility Qualifications**

ASAM Level 3.7 and 3.7-WM facilities for adolescents must:

- Be licensed as a PRTF by LDH per LAC 48:I.Chapter 90;
- Be physician-directed and meet the requirements of 42 CFR 441.151, including requirements referenced therein to 42 CFR 483 Subpart G;
- Be accredited by an LDH approved national accrediting body: CARF, COA, or TJC. Denial, loss of, or any negative change in accreditation status, must be reported to their contracted MCOs in writing immediately upon notification by the accreditation body;
- Arrange for criminal background checks and maintain documentation that all persons, prior to employment, pass criminal background checks through DPS

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State Police. If the results of any criminal background check reveal that the potential employee (or contractor) was convicted of any offenses against a child/youth or an elderly or disabled person, the provider shall not hire and/or shall terminate the employment (or contract) of such individual. The provider shall not hire an individual with a record as a sex offender nor permit these individuals to work for the provider as a subcontractor. Criminal background checks must be performed as required by R.S. 40:1203 et seq., and in accordance with R.S. 15:587 et seq. Criminal background checks performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;

- Arrange for TB testing and maintain documentation that all persons, prior to employment, are free from TB in a communicable state via skin testing to reduce the risk of such infections in recipients and staff. Results from testing performed over 30 days prior to the date of employment will not be accepted as meeting this requirement.
- Establish and maintain written policies and procedures, inclusive of drug testing staff, to ensure an alcohol and drug-free workplace and a workforce free of substance use;
- Maintain documentation that all direct care staff, who are required to complete first aid, CPR and seizure assessment training, complete the training within 90 days of hire; and
- Maintain documentation verifying that staff meet educational and professional requirements, as well as completion of required trainings.

As required by CMS Emergency Preparedness Final Rule effective November 16, 2016, PRTFs must comply with emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid programs. Regulations include safeguarding human resources, maintaining business continuity and protecting physical resources. Facilities should incorporate the four core elements of emergency preparedness into their plans and comply with all components of the Rule. Regulations must be implemented by November 15, 2017.

Staffing Qualifications

Staff that provide ASAM Level 3.7 and 3.7-WM services for adolescents must:

- Pass a criminal background check through DPS State Police prior to employment;
- Pass a TB test prior to employment;

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- Pass drug screening tests as required by the agency's policies and procedures;
- Complete first aid, CPR and seizure assessment training. (**NOTE:** Psychiatrists, APRNs/CNSs/PAs, RNs and LPNs are exempt from this training.); and
- Complete all required training appropriate to the program model approved by OBH;

All experience requirements for staff are related to paid experience. Volunteer work, college work/study or internship related to completion of a degree cannot be counted as work experience. If experience is in a part-time position, the staff person must be able to verify the amount of time worked each week. Experience obtained while working in a position for which the individual is not qualified may not be counted as experience.

ASAM Level 3.7, 3.7-WM facilities for adolescents must have qualified professional medical, nursing and other support staff necessary to provide services appropriate to the bio-psychosocial needs of individuals being admitted to the program. The staff must include the following individuals:

- A medical director (MD) on site as needed for management of psychiatric/medical needs with 24-hour on-call availability;
- A licensed psychologist (as needed);
- A Nursing staff;
- One full-time equivalent (FTE) supervisor (APRN/nurse practitioner (NP)/RN) with 24-hour on-call availability;
- There shall be at least one registered or licensed practical nurse on duty on site at all times.
-
- A licensed or certified clinician or counselor with direct supervision by an LMHP, or unlicensed professional (UP) under supervision of a QPS– one clinician per eight clients;
- A Direct care aide – Two FTE PA's on all shifts. The ratio cannot exceed 1:8. (**Exception:** Ratio must be 1:3 on therapy outings);
- Clerical support staff – two FTE per day shift;

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- An activity/occupational therapist – one FTE;
- A care coordinator – one FTE per day shift, and/or duties may be assumed by clinical staff;
- An outreach worker/peer mentor (recommended);
- Physicians, who are available 24 hours a day by telephone. (A PA may perform duties within the scope of his/her practice as designated by physician); An APRN may perform duties within the scope of his/her practice.
- Licensed, certified or registered clinicians who provide a planned regimen of 24-hour, professionally directed evaluation, care and treatment services for individuals and their families;
- An interdisciplinary team of appropriately trained clinicians, such as physicians, nurses, counselors, social workers and psychologists is available to assess and treat the individual and to obtain and interpret information regarding the patient’s needs. The number and disciplines of team members are appropriate to the range and severity of the individual’s problems;
- An LMHP is available on site 40 hours per week; and
- A qualified professional supervisor available for clinical oversight and by telephone for consultation.

Addiction Services

Agency Qualifications

Agencies that provide addiction services must:

- Be licensed per R.S. 40:2151 et seq. as a BHS provider. (**NOTE:** A facility license is not required for individual or group practice of licensed counselors/therapists providing services under the auspices of their individual license(s).);
- Provide services under the supervision of a LMHP or physician who is acting within the scope of his/her professional license and applicable state law;

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- Arrange for criminal background checks and maintain documentation that all persons, prior to employment, pass criminal background checks through the DPS State Police. If the results of any criminal background check reveal that the potential employee (or contractor) was convicted of any offenses against a child/youth or an elderly or disabled person, the provider shall not hire and/or shall terminate the employment (or contract) of such individual. The provider shall not hire an individual with a record as a sex offender nor permit these individuals to work for the provider as a subcontractor. Criminal background checks must be performed as required by R.S. 40:1203 et seq., and in accordance with R.S. 15:587 et seq. Criminal background checks performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- The provider is prohibited from knowingly employing or contracting with, or retaining the employment of or contract with, a member of the direct care staff who has had a finding placed on the Louisiana state nurse aide registry or the Louisiana direct service worker registry.
- Prior to hiring the unlicensed direct care staff member, and once employed, at least every six months thereafter or more often, the provider shall review the Louisiana state nurse aide registry and the Louisiana direct service worker registry to ensure that each unlicensed direct care staff member does not have a negative finding on either registry.
- Arrange for TB testing and maintain documentation that all persons, prior to employment, are free from TB in a communicable state via skin testing to reduce the risk of such infections in recipients and staff. Results from testing performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Establish and maintain written policies and procedures, inclusive of drug testing staff, to ensure an alcohol and drug-free workplace and a workforce free of substance use;
- Maintain documentation that all direct care staff, who are required to complete first aid, CPR and seizure assessment training, complete the training within 90 days of hire;
- Maintain documentation verifying that staff meet educational and professional requirements, licensure (where applicable), as well as completion of required trainings; and

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- Ensure and maintain documentation that all unlicensed persons employed by the organization complete training in a recognized crisis intervention curriculum prior to handling or managing crisis calls, which shall be updated annually.

Staffing Qualifications

Staff that provide addiction services may be licensed and unlicensed professionals and must meet the following qualifications:

- Must be at least 18 years of age, with a high school diploma or equivalent according to their areas of competence as determined by degree, required levels of experience as defined by State law and regulations and departmentally approved guidelines and certifications. Staff can include credentialed peer support specialists as defined by LDH who meet all other qualifications;
- Staff providing services must be at least three years older than any client served under the age of 18;
- Licensed individual practitioners, with no documentation of having provided addiction services prior to December 1, 2015, are required to demonstrate competency via the Alcohol and Drug Counselor (ADC) exam, the Advanced Alcohol and Drug Counselor (AADC) exam, or the Examination for Master Addictions Counselor (EMAC). Any licensed individual practitioner, who has documentation of providing addiction services prior to December 1, 2015, and within their scope of practice is exempt from (ADC, AADC, EMAC) testing requirements. Organizational agencies are required to obtain verification of competency (passing of accepted examinations) or exemption (prior work history/resume, employer letter). Licensed providers practicing independently must submit verification of competency or an exemption request (based on verified required work history) to the managed care entity(ies) with whom they credential and contract;

Unlicensed professionals of addiction services must be registered with the Addictive Disorders Regulatory Authority (ADRA) and demonstrate competency as defined by LDH, state law at RS 37:3386 et seq., and Department regulations. An unlicensed addiction provider must meet at least one of the following qualifications:

- Be a registered addiction counselor;
- Be a certified addiction counselor;

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- Be a counselor in training (CIT) that is registered with ADRA and is currently participating in a supervisory relationship with an ADRA registered certified clinical supervisor; or
- Be a master's level behavioral health professional that has not obtained full licensure privileges and is participating in ongoing professional supervision. When working in addiction treatment settings, the master's prepared UP shall be supervised by an LMHP, who meets the requirements of this Section;

State regulations require supervision of unlicensed professionals by a qualified Professional Supervisor (QPS). A QPS includes the following professionals, who are currently registered with their respective Louisiana board:

- Licensed psychologist;
- Licensed clinical social worker (LCSW);
- Licensed professional counselor (LPC);
- Licensed addiction counselor;
- Licensed physician; or
- Advanced practice registered nurse.

The following professionals may obtain QPS credentials: A master's prepared individual who is registered with the appropriate State Board and under the supervision of a licensed psychologist, LPC, or LCSW. The QPS may provide clinical/administrative oversight and supervision of staff.

The provider is prohibited from knowingly employing or contracting with, or retaining the employment of or contract with, a member of the direct care staff who has an alcohol or drug offense, unless the employee or contractor has completed his/her court-ordered sentence, including community service, probation and/or parole and been sober per personal attestation for at least the last two years.

ASAM Level 1 in an Outpatient Setting**Agency Qualifications**

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In addition to the qualifications noted for addiction service providers, the following qualifications are required for ASAM Level 1:

- Must be licensed per R.S. 40:2151 et seq. as a BHS provider;
- Must provide services under the supervision of a LMHP or physician who is acting within the scope of his/her professional license and applicable state law;
- Arrange for criminal background checks and maintain documentation that all persons, prior to employment, pass criminal background checks through DPS, State Police. If the results of any criminal background check reveal that the potential employee (or contractor) was convicted of any offenses against a child/youth or an elderly or disabled person, the provider shall not hire and/or shall terminate the employment (or contract) of such individual. The provider shall not hire an individual with a record as a sex offender nor permit these individuals to work for the provider as a subcontractor. Criminal background checks must be performed as required by R.S. 40:1203 et seq., and in accordance with R.S. 15:587 et seq. Criminal background checks performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Arrange for TB testing and maintain documentation that all persons, prior to employment, are free from TB in a communicable state via skin testing to reduce the risk of such infections in recipients and staff. Results from testing performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Maintain documentation that all direct care staff, who are required to complete first aid, CPR and seizure assessment training, complete the training within 90 days of hire;
- Maintain documentation verifying that staff meet educational and professional requirements, licensure (where applicable), as well as completion of required trainings; and
- Ensure and maintain documentation that all unlicensed persons employed by the organization complete training in a recognized crisis intervention curriculum prior to handling or managing crisis calls, which shall be updated annually.

Refer to the *Service Definitions Manual* and BHS licensing rule for additional staff composition, caseload and group requirements.

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Staffing Qualifications

Staff that provide ASAM level 1 treatment must:

- Pass criminal background check through DPS, State Police prior to employment;
- Pass a motor vehicle screen (if duties may involve driving or transporting recipients);
- Pass a TB test prior to employment;
- Pass drug screening tests as required by agency’s policies and procedures; and
- Complete first aid, CPR and seizure assessment training. (Note: psychiatrists, APRNs/CNSs/PAs, RNs and LPNs are exempt from this training.).

Non-licensed direct care staff are required to complete a basic clinical competency training program approved by OBH prior to providing the service.

ASAM Level 2.1 Intensive Outpatient Program (IOP) and Level 2-WM Ambulatory Withdrawal Management

Refer to Addiction Services and ASAM Level 1 above for agency qualifications.

Staffing Qualifications

ASAM Level 2.1 Intensive Outpatient Program (IOP) and ASAM Level 2-WM Ambulatory Withdrawal Management (WM) staff must be licensed in accordance with R.S. 40:2151 et seq. as a BHS provider.

Refer to the *Service Definitions Manual* and BHS licensing rule for additional staffing pattern, composition, caseload, and group requirements.

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ASAM Level 3.1 - Clinically Managed Low Intensity Residential

ASAM Level 3.2 – WM Clinically Managed Residential Social Withdrawal Management

ASAM Level 3.3 - Clinically Managed Medium Intensity Residential

ASAM Level 3.5 - Clinically Managed High Intensity Residential

ASAM Level 3.7 - Medically Monitored Intensive Residential

ASAM Level 3.7 - WM Medically Monitored Intensive Residential Withdrawal Management

Refer to Addiction Services and ASAM Level 1 above for agency qualifications.

Staffing Qualifications

Staff that provide the above services must:

- Be licensed in accordance with R.S. 40:2151 et seq. as a BHS provider; and
- Be accredited by an LDH approved national accrediting body: CARF, COA, OR TJC. Denial, loss of, or any negative change in accreditation status must be reported to their contracted MCOs in writing immediately upon notification by the accreditation body.

See *Service Definitions Manual* and *BHS licensing rule* for additional staffing pattern, composition, caseload and group requirements.

ASAM Level 4, 4-WM Medically Managed Inpatient Addiction Disorder Treatment in an Inpatient Setting

Freestanding psychiatric hospitals and distinct part psychiatric units that provide ASAM Level 4, 4-WM medically managed inpatient addiction disorder treatment must be licensed as a hospital per R.S. 40:2100 et seq.

Hospitals must comply with federal emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid programs. Regulations include safeguarding human resources, maintaining business continuity and protecting physical resources. Facilities should incorporate the four core elements of emergency preparedness into their plans and comply with all components of the Rule (see Appendix A). Regulations must be implemented by November 15, 2017.