



PROVIDER ALERT

Clarification of COMAR OTP Regulation Concerning Counselor to Patient Ratio, Clinical Necessity and Insurance Requirements

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This is a further clarification of the previous Alcohol and Drug Abuse Administration memorandum from October 11, 2011. Retroactive to July 1, 2011, the patient to alcohol and drug counselor ratio may still not exceed 50:1; however, patients who have had over 2 years' time in treatment **AND** receive 14 to 31 days of take-homes shall not be included in the program's total patient count when determining the 50:1 ratio. The terms of the patient's insurance plan and/or medical necessity may require clinical visits more frequent than monthly, despite the patient's time in treatment, but the patient will still not be counted in the 50:1 ratio.

Code of Maryland Regulation: 10.47.02.11.C (1):

The patient to alcohol and drug counselor ratio may not exceed 50 patients to one full-time counselor.

Explanation for ruling:

It is in the patient's best interest to be granted take-homes, based upon the amount of time in treatment, fulfillment of the 8 point criteria found in 42 CFR Part 8, and the clinical principle of reinforcement of responsible, healthy behavior. Excluding those qualified patients from determining the actual ratio will allow programs to admit additional new patients to the program and to a counselor's roster, allowing the program to focus clinical services on those with highest need, reward patients for their



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adherence to treatment and provide a potential reduction in the financial and hiring pressures on the program. This ruling can enable an increase in the accessibility of medication assisted treatment for patients in the community.

Medicaid and private insurance requirements may require more frequent visits despite the patient's qualifying for an approximate monthly amount of take-homes. Note, however, that more frequent visits must be based upon documented clinical and medical necessity requirements and not upon the fiscal policies or needs of the opioid maintenance treatment program. For example, a patient in treatment for over 2 years could earn up to 28 to 31 take homes but still be required by insurance requirements or clinical necessity to have clinical contact more frequently than once a month. These patients are not included in the 50:1 patient to counselor ratio.