

Alcohol and Drug Abuse Treatment Intermediate Care Facilities Fact Sheet CON Modernization Task Force 2018

“Alcohol and drug abuse treatment intermediate care facilities (ICFs)” is a term that is no longer in common usage. “Intermediate care facilities” are a regulated category of health care facility in the CON statute. Historically, with respect to addictions treatment, this term has been used to describe substance abuse detoxification and treatment programs operating at the American Society of Addictions Medicine (ASAM) Level 3.7. This level of care is medically-monitored intensive inpatient detoxification and/or treatment services that involve 24-hour nursing care with a physician’s availability for significant problems. The Maryland Department of Health uses the ASAM level of care classification system in its licensing and certification program for addictions treatment service providers.

Supply

- There are 18 Level 3.7 programs in Maryland with approximately 770 beds and three additional programs have been authorized but are not yet operational. Less than four percent of the substance abuse programs identified by the Behavioral Health Administration in its *Maryland Certified Treatment Directory* provide this level of treatment.
- Across the full continuum of substance abuse treatment facilities and programs in Maryland, the CON program only regulates this specific category of treatment facility and these facilities comprise a very small segment of the treatment universe.

Use

- Sources for consistent and accurate reporting of utilization data for these facilities do not exist.

Scope of CON Regulation

- CON approval is required to establish, relocate, or change the bed capacity of an alcohol and drug abuse treatment ICF.
- CON approval is required for a capital expenditure by or on behalf of an alcohol and drug abuse treatment ICF that exceeds the statutory capital expenditure threshold (currently \$6 million).
- The State Health Plan regulations for this category of health care facility recognizes two types of facility based on the source of payment. Track 1 facilities primarily serve patients whose treatment is paid for from private payers. The SHP has a quantitative limit on the number of Track 1 beds that can be approved in a region. Track 2 facilities primarily serve patients whose treatment is paid for from public payment programs. The SHP has no quantitative limit on the number of Track 2 beds that can be established.