



Roderick L. Bremby, Commissioner

Effective Date: January 1, 2017
Contact: William Halsey @ 860-424-5077

TO: Licensed Alcohol and Drug Counselors, Physicians, Clinics, Hospitals, & FQHCs

RE: Scope of Practice for Licensed Alcohol and Drug Counselors – Updated Policy Transmittal

Provider Bulletin 2016-86 (also known as Policy Transmittal 2016-33), which was posted on December 20, 2016, is hereby rescinded.

Effective October 1, 2016, section 20-74s(a)(4) of the 2016 supplement to the Connecticut General Statutes, which is the state law that defines the scope of practice of Licensed Alcohol and Drug Counselors (LADC), was amended by section 6 of Public Act 16-43. This Policy Transmittal **does not** make any changes to the scope of practice, nor does it change any DSS requirements. This Policy Transmittal only seeks to ensure that providers are aware of the recent amendments to this scope of practice under state law.

Pursuant to section 20-74s(a)(4) of the 2016 supplement to the Connecticut General Statutes, as amended by section 6 of Public Act 16-43 (the amendment is effective October 1, 2016), an LADC's scope of practice is defined by state law as follows:

“Practice of alcohol and drug counseling’ means the professional application of methods that assist an individual or group to develop an understanding of alcohol and drug dependency problems, define goals, and plan action reflecting the individual’s or group’s interest, abilities and needs as affected by alcohol and drug dependency problems [Note: *The following text was added to the statute by Public Act 16-43, § 6, effective October 1, 2016*] and, may include, as appropriate, (A)

conducting a substance use disorder screening or psychosocial history evaluation of an individual to document the individual’s use of drugs prescribed for pain, other prescribed drugs, illegal drugs and alcohol to determine the individual’s risk for substance abuse, (B) developing a preliminary diagnosis for the individual based on such screening or evaluation, (C) determining the individual’s risk for abuse of drugs prescribed for pain, other prescribed drugs, illegal drugs and alcohol, (D) developing a treatment plan and referral options for the individual to ensure the individual’s recovery support needs are met, and (E) developing and submitting an opioid use consultation report to an individual’s primary care provider to be reviewed by the primary care provider and included in the individual’s medical record.”

Conn. Gen. Stat. § 20-74s(a)(4), as amended by Public Act 16-43, § 6.

It is not within the scope of practice for an LADC to provide services outside their scope of practice as defined by state statute (quoted above). As required by existing statute and regulations, DSS can only pay licensed practitioners (including LADCs) for services that are provided within their scope of practice as defined by state law. See 42 U.S.C. § 1396d(a)(6); 42 C.F.R. § 440.60(a); and Conn. Agencies Regs. §§ 17b-262-526(5), 17b-262-913, and 17b-262-916.

For further information, see Connecticut General Statutes Chapter 376b, Alcohol and Drug Counselors (including section 20-74s of

the Connecticut General Statutes) and section 6 of Public Act 16-43.

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Distribution: This policy transmittal is being distributed by Hewlett Packard Enterprise to providers enrolled in the Connecticut Medical Assistance Program.

Responsible Unit: DSS, Division of Health Services, Integrated Care Section, Maureen Reault, (860) 424-5843

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