



**Assembly Bill (AB) 3162 and Senate Bill (SB) 992**  
*Frequently Asked Questions*  
*February 2019*

The following answers to frequently asked questions intend to provide applicants and licensed or certified drug abuse recovery or treatment facilities with additional guidance and clarification regarding AB 3162 and SB 992. This document will be updated as necessary.

For additional information visit:

- Licensing and Certification Webpage on the DHCS website at:  
[https://www.dhcs.ca.gov/provgovpart/Pages/Residential\\_and\\_Outpatient.aspx](https://www.dhcs.ca.gov/provgovpart/Pages/Residential_and_Outpatient.aspx)
- Chapter 775, Assembly Bill 3162:  
[https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill\\_id=201720180AB3162](https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201720180AB3162)
- Chapter 784, Senate Bill 992:  
[http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill\\_id=201720180SB992](http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201720180SB992)
- Contact us at: (916) 322-2911 or Toll Free Number: (877) 685-8333

**1. When did AB 3162 and SB 992 become effective?**

AB 3162 and SB 992 went into effect on January 1, 2019.

**2. Which sections of the Health and Safety Code (HSC) have been amended?**

AB 3162 repealed and added new HSC Sections 11834.09 and 11834.10 and amended 11834.31 and 11834.34. SB 992 amended HSC Sections 11834.02, 11834.26 and 11834.36, and added Chapter 7.4 (commencing with Section 11833.05) to Part 2 of Division 10.5 of the HSC.

**3. What is the requirement for licensure of an alcoholism or drug abuse recovery or treatment facility?**

Except for facilities operated by a state agency, any facility that provides residential nonmedical substance use disorder services to adults is required to obtain a current, valid license from DHCS. The required licensure information and documentation can be accessed at the following link:

<https://www.dhcs.ca.gov/provgovpart/Pages/Licensing-and-Certification-Facility-Licensing.aspx>

**4. What is the amended definition of an alcoholism or drug abuse recovery or treatment facility?**

As defined in HSC Section 11834.02(a), an alcoholism or drug abuse recovery or treatment facility means any premises, place, or building that provides residential nonmedical services to adults who are recovering from problems related to alcohol, drug, or alcohol and drug misuse or abuse, and who need alcohol, drug, or alcohol and drug recovery treatment or detoxification services.

**5. What are licensable services?**

Licensable services are defined as follows:

- **Detoxification Services:** Any service designed to support and assist an individual in the alcohol and/or drug withdrawal process and to explore plans for continued service.
- **Recovery Services:** Any assistance provided to a resident to maintain abstinence from the use of alcohol or drugs, maintain sobriety, or maintain any goal achieved during treatment for a substance use disorder. Recovery services include the following: assessment, case management, counseling services, educational sessions, medication monitoring, and/or development of a recovery plan.
- **Treatment Services:** Any assistance provided to a resident to obtain abstinence from the use of alcohol or drugs, obtain sobriety, or obtain any goal associated with recovery from a substance use disorder. Treatment services include the following: assessment, case management, counseling services, educational sessions, medication monitoring, and/or development of a treatment plan.

**6. What is a recovery residence?**

As defined in HSC Section 11833.05(c), recovery residence means a residential dwelling that provides primary housing for individuals who seek a cooperative living arrangement that supports personal recovery from a substance use disorder and that does not require licensure or does not provide licensable services. A recovery residence may include, but is not limited to:

- Sober living homes;
- Sober living environments; or
- Unlicensed alcohol and drug free residences.

**7. How has the definition of alcoholism or drug abuse recovery or treatment facility changed?**

The definition of alcoholism or drug abuse recovery or treatment facility in HSC was amended to remove the “24-hour” qualifier.

**8. What information is required to be disclosed to DHCS with the passage of SB 992?**

Applicants, licensed residential treatment facilities, and certified outpatient alcohol and/or other drug programs (AOD programs) are required to disclose any ownership or control of, or financial interest in, a recovery residence as defined in HSC Section 11833.05(c). In addition, licensed residential treatment facilities and certified AOD programs must disclose any contractual relationship with an entity that provides professional services, addiction treatment, or recovery services to clients of programs licensed or certified by DHCS.

**9. What are examples of contracted entities that provide professional, addiction, or recovery services to clients of programs licensed or certified by DHCS?**

Examples of contracted entities include but are not limited to: drug-testing lab, hospital, AOD program, clinic, counseling center, transportation provider, licensed residential treatment facilities, federally qualified health center.

**10. When should the licensed residential treatment facility or certified AOD program submit the disclosure information to DHCS?**

Disclosure information must be submitted at the time of:

- Application for initial licensure or certification;
- Application for extension of licensure or certification, or whenever
- Acquiring or starting a relationship described in HSC Section 11833.05, subsections (a)(1) or (2).

**11. Who is required to submit disclosure information?**

- Applicants
- Licensed residential treatment facilities, and
- Certified AOD programs.

**12. How should the disclosure information be submitted?**

The disclosure information can be submitted on the Disclosure Statement Form (DHCS 5140, Rev 1/19), and must be signed by the individual legally responsible for representing the program. The Disclosure Statement Form (DHCS 5140, 1/19) can be accessed at the following:

<https://www.dhcs.ca.gov/provgovpart/Pages/Licensing-and-Certification-Applications-Forms-and-Fees.aspx>

**13. What is the consequence of failing to submit the required disclosure information?**

DHCS may suspend or revoke the license or certification of a licensed residential treatment facility or an AOD program for failure to disclose the required information.

**14. If a residential treatment facility license is revoked, when can the licensee reapply for an initial license?**

A licensee may not reapply for an initial license for five years following revocation of a residential treatment facility license.

**15. When will DHCS begin issuing provisional licenses to residential treatment facilities?**

Applicants approved for an initial residential treatment facility license on or after January 1, 2019, will receive a two-year license that is provisional for one year. Prior to the expiration date noted on the provisional license, a residential treatment facility deemed to be in compliance with applicable regulations and statutes, including civil penalty fees, shall continue to operate beyond the provisional date on the license and until the licensure expiration date.

**16. What is a provisional residential treatment facility license?**

A license issued to operate a residential treatment facility that is valid for a period of two years and provisional for the first year. DHCS may revoke a provisional residential treatment facility license if the licensee fails to operate in compliance with Chapter 7.5 of Part 2, Division 10.5 of the HSC or any regulations adopted pursuant to that chapter.

**17. Who can receive services at a licensed residential treatment facility?**

Only residents of the licensed residential treatment facility shall receive services at the location specified on the DHCS license.

**18. Can a licensed residential treatment facility transport residents to a different location not identified on the DHCS license for licensable services?**

No. All licensable services must be provided by a licensed residential treatment facility exclusively within the facility or within any facility identified on a single license by street address. A licensee shall not move, or otherwise transport its residents to an off-site location to receive any licensable service. However, a licensee may transport residents to an off-site location for activities or ancillary services such as yoga, meditation, or equine therapy.

**19. Can a provider request to house residents in one building and provide alcoholism or drug abuse recovery or treatment services in another building?**

Yes. In accordance with California Code of Regulations Title 9 Section 10508, a licensed residential treatment facility may house residents in one building and provide services in another building as long as all of the buildings are integral components of the same facility, under the control and management of the same licensee, and licensed as a single facility.

**20. Can a licensed residential facility add an additional address?**

Yes. A licensed residential facility can add an address to its license to become an integral facility. However, the secondary location can only provide alcoholism or drug abuse recovery or treatment services to residents of that licensed residential facility.

**21. Can the same address be added to multiple residential treatment facility licenses?**

No.

**22. What is a relapse plan?**

A relapse plan is a written plan that addresses:

- Resident relapse including when a resident is on the licensed premises after consuming alcohol or using illicit drugs;
- How the treatment stay and treatment plan of the resident will be adjusted to address the relapse episode;
- How the resident will be treated and supervised while under the influence of alcohol or illicit drugs; and
- Resident discharge and continuing care plan, including when a residential facility determines that a resident requires services beyond the scope of their license.

**23. When should the relapse plan be submitted to DHCS?**

- Initial applicants for residential treatment facility licensure must submit a relapse plan with the Initial Treatment Provider Application (DHCS 6002).
- Applicants that submitted an application for licensure prior to January 1, 2019, but have not been approved for licensure will be required to submit a relapse plan prior to licensure.
- Existing licensees must submit a relapse plan to their assigned DHCS analyst no later than April 1, 2019.

**24. Does DHCS review the relapse plans submitted by the applicant and licensee?**

Yes. DHCS will review the submitted relapse plan to determine compliance with the statutory requirements. DHCS will notify the licensee within 30 working days whether the relapse plan is complete or incomplete.

**25. Are licensed residential treatment facilities required to keep a copy of the relapse plan?**

Yes. A copy of the relapse plan must be kept onsite, or at a central administrative location, provided that the plan is readily available to staff and DHCS upon request.

**26. What is Medication Assisted Treatment (MAT)?**

MAT is the use of any medication approved by the United States Food and Drug Administration (FDA) for the treatment of substance use disorders prescribed to assist an individual in detoxification services, treatment services, or recovery services.

**27. Can a licensed residential treatment facility deny admission to an individual solely based on the individual having a valid prescription for MAT medication?**

No. A licensee shall not deny admission or discharge any individual based solely on the individual having a valid prescription, or in need of medication approved by the FDA for the purpose of MAT for a substance use disorder.

**28. What are some examples of MAT medications?**

MAT medications include but may not be limited to: Acamprosate, Buprenorphine products, Disulfiram, Methadone and Naltrexone.

**29. Can MAT medications be stored within licensed residential treatment facilities?**

Yes. MAT medications with a valid prescription from a licensed health care professional, are permitted within the settings of licensed residential treatment facilities and must be stored, administered and documented in accordance with all applicable laws and regulations including Drug Enforcement Administration requirements (if applicable).

**30. How do I provide access to MAT without becoming approved for IMS?**

Residential treatment facilities do not need to be IMS-approved in order to allow clients access for MAT. However, licensed residential treatment facilities shall provide policies and procedures that address coordination of client care to receive MAT or client referral to MAT services.

**31. How much is the civil penalty for a licensed residential treatment facility deemed to be in violation of statute or regulation?**

- Class C Deficiency – DHCS shall assess a civil penalty of \$250 per day for each deficiency.
- Class B Deficiency – DHCS shall assess a civil penalty of \$375 per day for each deficiency.
- Class A Deficiency – DHCS shall assess a civil penalty of \$500 per day for each deficiency.
- Maximum Daily – The maximum daily civil penalty for all deficiencies shall not exceed \$1000.
- Repeat Deficiency (1<sup>st</sup> time) – A licensee that is cited for repeating the same violation within 24 months of the first violation is subject to an immediate civil penalty of \$500 and \$750 for each day the violation continues until the deficiency is corrected.
- Repeat Deficiency (2<sup>nd</sup> time) – A licensee that has been assessed a civil penalty for a repeat violation, that repeats the same violation within 24 months may be subject to an immediate civil penalty of \$500 and \$1,000 for each day the violation continues until the deficiency is corrected.

**32. What happens if a licensed residential treatment facility is cited for repeating the same violation?**

A licensee cited for repeating the same violation within 24 months of the first violation is subject to an immediate civil penalty of \$500 and \$750 for each day the violation continues. If the licensee repeats the second violation within 24 months, the licensee is subject to an immediate civil penalty of \$500 and \$1,000 for each day the violation continues until the deficiency is corrected.

**33. What is the consequence of providing detoxification, recovery or treatment services without a valid residential treatment facility license?**

A person or entity cited for operating a facility that provides detoxification, recovery or treatment services without a valid license will be assessed a \$2000 per day civil penalty; and be prohibited from applying for initial licensure for a period of five years.

**34. Can DHCS suspend or revoke multiple licenses held by the same person or entity?**

Yes. In the event that DHCS takes administrative action to suspend or revoke a residential treatment facility license, DHCS may also suspend or revoke any other residential treatment facility license(s) held by the same person or entity.

**35. How long is the suspension or revocation period?**

The period of suspension or revocation is five years from the date of the final suspension or revocation decision and order.

**36. Can DHCS terminate review of an application submitted by a person or entity that previously had a license suspended or revoked?**

Yes. DHCS may terminate review of an application for licensure from any person or entity that previously had a residential treatment facility license suspended or revoked.