



Injecting Drug Users 90% Capacity Treatment Report

This report must be submitted electronically to: walters@region10pihp.org. Reports are due 1/15/17, 4/15/17, 7/15/17 and 10/15/17.

Fiscal Year:	2017			
Prepaid Inpatient Health Plan Name:				
Contact Person:				
Contact Person's Email Address:				
Report Quarter:				
IDU Providers Reached 90% Capacity During the Quarter:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Column A	Column B	Column C	Column D	Column E
Names of Providers Serving Injecting Drug Users at or Above 90% Capacity During the Quarter	Start Date of Being at 90% Capacity	End Date of Being at 90% Capacity	License Number	Inventory of Behavioral Health Services Number (I-BHS #)



Injecting Drug Users 90% Capacity Provider Treatment Report Instructions

The purpose of this report is for federal block grant reporting on programs providing treatment for Injecting Drug Users (IDUs). This report monitors compliance with Sections 1923(a)(1) of Public Law 102-321, as amended:

1923(a)(1) Notification Regarding 90 Percent Capacity. In the case of programs of treatment for intravenous drug abuse, the state will require that any such program receiving amounts from the grant, upon reaching 90 percent of its capacity to admit individuals to the program, provide to the state a notification of such fact.

For purposes of reporting on this requirement, “90% Capacity” is defined as having 90% of their total beds or allowed number of clients, as established by licensing, full. Example: Program A is licensed to treat 50 clients, when they have 45 clients in their program, they must contact the agency (or agencies if a provider for more than one) and indicate that they are at 90% capacity. When their total number of clients decreases to 44, they must then contact the appropriate agency(ies) and indicate they are no longer at 90% capacity.

It is feasible that a program may reach 90% capacity several times within a short period of time (with admissions and discharges the program could go back and forth between 44 and 45 clients for several days in a row). In these types of situations, it would be allowable for the agency to establish an agreed upon number with the program where they would report no longer being at 90%. Example: After program A reaches 90% capacity at 45 clients, they would report no longer being at 90% capacity when their treatment numbers reach 42 instead of 44.

Please note: To fully meet the block grant reporting requirements, when a program reports reaching 90% capacity to the agency, the agency must then report that information to the PIHP Access Center by the end of the next business day. Notifications will be compared to the quarterly reports that are submitted to the PIHP to ensure compliance and accurate reporting.



Per the SUD Treatment contract: *The PROVIDER agrees to call the PIHP Access Center when it has reached clinical capacity to accept new referrals. PROVIDER will contact Access when it can begin to accept new referrals.*

Complete Injecting Drug Users 90% Capacity Treatment Report as follows:

Fiscal Year – Enter the fiscal year covering the report period.

Agency Name – Enter the name of the reporting agency.

Contact Person – Enter the name of person completing the report.

Contact Person’s Email Address – Enter the email address of the person completing the report.

Report Quarter – From the dropdown menu, select the quarter that the report covers.

IDU providers reached 90% capacity during the quarter - Check the appropriate box (yes or no). If ‘yes’ is checked, complete the remainder of the report.

Column A: Names of Providers Serving Injecting Drug Users at or Above 90% Capacity During the Quarter - List IDU subcontractor(s) who reached 90% capacity to admit individuals to the program during the quarter. Enter the legal name of the provider as it appears on the provider’s license.

Column B: Start Date of Being at 90% Capacity – Indicate the date that the program reported being at 90% capacity for admissions.

Column C: End Date of Being at 90% Capacity – Indicate the date that the program reported no longer being at 90% capacity for admissions.

Column D: License Number - Enter the Michigan Substance Abuse License Number for the program.

Column E: Inventory of Substance Abuse Treatment Services Number (I-SATS #) - Enter the program’s ISATS number.