#### **Credentials**

The Director's Verification of Staff Credentials form is utilized to provide summary information that indicates the applicant meets the requirements of MCCMH-SUD's Staff Credentialing Requirements. The Agency is required to obtain direct source verification for all credentialing verification and make documentation available to MCCMH-SUD as requested.

The Director's Verification Form is a tool used by MCCMH-SUD for consideration of adding the staff person to MCCMH-SUD's panel for funding reimbursement as the documentation submitted is an indication that the applicant's licensure and credentials are in good standing and the individual is working within their scope of practice, as applicable.

The Director's Verification of Staff Credentials Form must be forwarded and authorized by MCCMH-SUD prior to the provision of direct service, unless other provisions are approved by MCCMH-SUD.

#### **Staff Credentials Forms**

- 1. Staff name: Enter the full legal name of the employee
- 2. Title/Position: Enter title or position the staff will be holding
- 3. Agency Name: Enter the name of the agency where the individual works
- 4. Site: If the program has multiple locations enter the commonly referred to location, i.e., Warren, St. Clair Shores, etc.
- 5. Requested Effective Date: Enter the date that the person will begin delivery of services utilizing MCCMH-SUD funds.
- 6. Select the type of credentialing being requested for the staff person. Definitions are listed below on pages 2-3.
- 7. Indicate whether or not FOCUS access is also being requested, (a FOCUS Access Request Form is required to accompany the form).
- 8. Indicate whether or not ASAM Continuum access is being requested. If so, please attach a training certificate indicating that staff completed ASAM Continuum training.
- 9. Indicate whether or not GAIN access is being requested. If so, attach the training certificate indicating that the staff completed GAIN training.
- 10. Have the employee/staff member sign and date this form.
- 11. Have the Program Director (or designee) print their name, sign and date this form.

Submit the completed form and <u>all attachments</u> to MCCMH-SUD (<u>mcosa@mccmh.net</u>), allowing enough time for it to be received, checked for completeness and approved before the employee begins delivery of MCCMH-SUD funded services.

#### Staff Qualifications for Providing Substance Use Disorder Services

### 1. <u>Treatment Staff</u>

Individuals providing treatment services to MCCMH-SUD funded clients must qualify as a Substance Use Disorder Treatment Specialist (SATS) or a Substance Use Disorder Treatment Practitioner (SATP), along with licensure requirements where indicated below, based on the job function they are providing. Clinical supervisors are also required to meet specific qualifications. The qualifications for the SATS, SATP, and Clinical Supervisor are as follows:

**Substance Use Disorder Treatment Specialist (SATS)**: An individual who has "active" status (no open formal complaints or disciplinary actions) licensure in one of the following areas, and is working within their licensure-specified scope of practice:

Physician (MD/DO)

Physician Assistant (PA)

Nurse Practitioner (NP)

Registered Nurse (RN)

Licensed Practical Nurse (LPN)

Licensed Psychologist (LP)

Limited Licensed Psychologist (LLP)

Temporary Limited Licensed Psychologist (TLLP)

Licensed Professional Counselor (LPC)

Limited Licensed Professional Counselor (LLPC)

Licensed Masters Social Worker (LMSW)

Limited Licensed Masters Social Worker (LLMSW)

<u>AND</u>, who has a registered development plan with MCBAP and is timely in its implementation, or has one of the following Michigan specific or International Certification & Reciprocity Consortium (IC&RC) credentials:

Certified Advanced Alcohol and Drug Counselor (CAADC)

Certified Co-Occurring Disorders Professional (CCDP)

Certified Co-Occurring Disorders Professional – Diplomat (CCDP-D)

Certified Clinical Supervisor (CCS)

Certified Criminal Justice Professional – IC&RC (CCJP-R)

State approved alternative credential (ASAM, CHES, APA Specialty in Addition, UMICAD)

**Substance Use Disorder Treatment Practitioner (SATP):** An individual who has a registered Development Plan, is timely in its implementation and working under the supervision of a SATS or has a MCBAP Counselor certification but does not have state licensure.

**Clinical Supervisor:** An individual that directly supervises clinical staff and has one of the following credentials:

Michigan Certified Clinical Supervisor (CCS-M)
Certified Clinical Supervisor (CCS) credential,
Registered clinical supervisor development plan with MCBAP and is timely in its implementation.

### 2. <u>Prevention Staff</u>

Individuals providing prevention services to Macomb County residents under MCCMH-SUD contract must qualify as a Substance Use Prevention Specialist, a Substance Use Consultant or be providing one specific service under a certified supervisor with approval from MCCMH-SUD.

**Substance Use Prevention Specialist/Consultant:** An individual who has a registered development plan with MCBAP and is timely in its implementation, or has one of the following Michigan specific or International Certification & Reciprocity Consortium (IC&RC) credentials

Certified Prevention Specialist (CPS) Certified Prevention Consultant (CPC) MCBAP Development Plan

**Substance Use Disorder Prevention Specialty Focused Staff**: An individual who is providing one specific service under a certified supervisor. This individual does not need to be licensed or have a MCBAP credential or development plan.

### 3. <u>Peer Recovery Coach (Outpatient Only)</u>

Individuals providing peer recovery coaching to Macomb County residents under MCCMH-SUD contract must qualify and must be appropriately trained and certified through MDHHS (CPRC).

SUD Health Home Peer Recovery Coaches must be appropriately trained and certified through at least one of the following: MDHHS (CPRC), MCBAP (CPRM), or CCAR.

#### 4. <u>Medical Staff</u>

Individuals providing medical related services but not counseling service, need to

provide verification of licensure in good standing.

Physician (MD/DO)
Psychiatrist
Physician Assistant
Nurse Practitioner
Registered Nurse
Licensed Practical Nurse
EMT

### 5. **SUDHH Only**

An individual working at either an Office Based Substance Use Treatment (OBSUT) program or an Opioid Treatment Program (OTP).

Community Health Worker

Behavioral Health Specialist (Licensed or limited licensed bachelor's or master's Level Social Worker, Licensed Marriage & Family Therapist, Licensed Professional Counselor, Licensed Psychologist)