health planning organizations, local
governmental entities and public and
private-sector service providers that
may be impacted by the waiver re-
quest;
(ix) Evidence that a State is com-
mited to using the proposed new or re-
habilitated substance abuse facility for
the purposes stated in the request for
at least 20 years for new construction
and at least 10 years for rehabilitated
facilities;
(x) An assurance that, if the facility
ceases to be used for such services, or if
the facility is sold or transferred for a
purpose inconsistent with the State’s
waiver request, monies will be returned
to the Federal Government in an
amount proportionate to the Federal
assistance provided, as it relates to the
value of the facility at the time serv-
ces cease or the facility sold or trans-
ferred;
(xi) A description of the methods
used to minimize the costs of the con-
struction or rehabilitation, including
documentation of the costs of the resi-
dential facilities in the local area or
other appropriate equivalent sites in
the State;
(xii) An assurance that the State
shall comply with the matching re-
quirements of paragraph (d)(3) of this
section; and
(xiii) Any other information the Sec-
retary may determine to be appro-
priate.

§ 96.136 Independent peer review.

(a) The State shall for the fiscal year
for which the grant is provided, provide
for independent peer review to assess
the quality, appropriateness, and effi-
cacy of treatment services provided in
the State to individuals under the pro-
gram involved, and ensure that at least
5 percent of the entities providing serv-
ices in the State under such program
are reviewed. The programs reviewed
shall be representative of the total pop-
ulation of such entities.
(b) The purpose of independent peer
review is to review the quality and ap-
propriateness of treatment services.
The review will focus on treatment
programs and the substance abuse serv-
vice system rather than on the indi-
vidual practitioners. The intent of the
independent peer review process is to
continuously improve the treatment
services to alcohol and drug abusers
within the State system. “Quality,”
for purposes of this section, is the pro-
vision of treatment services which,
within the constraints of technology,
resources, and patient/client cir-
cumstances, will meet accepted stand-
ardary practices which will improve
patient/client health and safety status
in the context of recovery. “Appropri-
ateness,” for purposes of this sec-
tion, means the provision of treatment
services consistent with the individ-
ual’s identified clinical needs and level
of functioning.
(c) The independent peer reviewers
shall be individuals with expertise in
the field of alcohol and drug abuse
treatment. Because treatment services
may be provided by multiple dis-
ciplines, States will make every effort
to ensure that individual peer review-
ers are representative of the various
disciplines utilized by the program
under review. Individual peer reviewers
must also be knowledgeable about the
modality being reviewed and its under-
lying theoretical approach to addic-
tions treatment, and must be sensitive
to the cultural and environmental
issues that may influence the quality
of the services provided.
(d) As part of the independent peer
review, the reviewers shall review a
representative sample of patient/client
records to determine quality and ap-
propriateness of treatment services,
while adhering to all Federal and State
confidentiality requirements, including
42 CFR part 2. The reviewers shall ex-
amine the following:
(1) Admission criteria/intake process;
(2) Assessments;
(3) Treatment planning, including ap-
propriate referral, e.g., prenatal care
and tuberculosis and HIV services;
(4) Documentation of implementa-
tion of treatment services;
(5) Discharge and continuing care
planning; and
(6) Indications of treatment out-
comes.
(e) The State shall ensure that the
independent peer review will not in-
volve practitioners/providers reviewing
their own programs, or programs in
which they have administrative over-
sight, and that there be a separation of
peer review personnel from funding decisionmakers. In addition, the State shall ensure that independent peer review is not conducted as part of the licensing/certification process.

(f) The States shall develop procedures for the implementation of this section and such procedures shall be developed in consultation with the State Medical Director for Substance Abuse Services.

§ 96.137 Payment schedule.

(a) The Block Grant money that may be spent for §§ 96.124(c) and (e), 96.127 and 96.128 is governed by this section which ensures that the grant will be the “payment of last resort.” The entities that receive funding under the Block Grant and provides services required by the above-referenced sections shall make every reasonable effort, including the establishment of systems for eligibility determination, billing, and collection, to:

(1) Collect reimbursement for the costs of providing such services to persons who are entitled to insurance benefits under the Social Security Act, including programs under title XVIII and title XIX, any State compensation program, any other public assistance program for medical expenses, any grant program, any private health insurance, or any other benefit program; and

(2) Secure from patients or clients payments for services in accordance with their ability to pay.

APPENDIX A TO PART 96—UNIFORM DEFINITIONS OF SERVICES

1. Adoption Services
2. Case Management Services
3. Congregate Meals
4. Counseling Services
5. Day Care Services—Adults
6. Day Care Services—Children
7. Education and Training Services
8. Employment Services
9. Family Planning Services
10. Foster Care Services for Adults
11. Foster Care Services for Children
12. Health Related and Home Health Services
13. Home Based Services
14. Home Delivered Meals
15. Housing Services
16. Independent and Transitional Living Services
17. Information and Referral Services
18. Legal Services
19. Pregnancy and Parenting Services for Young Parents
20. Prevention and Intervention Services
21. Protective Services for Adults
22. Protective Services for Children
23. Recreational Services
24. Residential Treatment Services
25. Special Services for Persons with Developmental or Physical Disabilities, or Persons with Visual or Auditory Impairments
26. Special Services for Youth Involved in or At Risk of Involvement in Criminal Activity
27. Substance Abuse Services
28. Transportation Services
29. Other Services

UNIFORM DEFINITIONS OF SERVICES

1. Adoption Services
Adoption services are those services or activities provided to assist in bringing about the adoption of a child. Component services and activities may include, but are not limited to, counseling the biological parent(s), recruitment of adoptive homes, and pre- and post-placement training and/or counseling.

2. Case Management Services
Case management services are services or activities for the arrangement, coordination, and monitoring of services to meet the needs of individuals and families. Component services and activities may include individual service plan development; counseling; monitoring, developing, securing, and coordinating services; monitoring and evaluating client progress; and ensuring that clients’ rights are protected.

3. Congregate Meals
Congregate meals are those services or activities designed to prepare and serve one or more meals a day to individuals in central dining areas in order to prevent institutionalization, malnutrition, and feelings of isolation. Component services or activities may include the cost of personnel, equipment, and food; assessment of nutritional and dietary needs; nutritional education and counseling; socialization; and other services such as transportation and information and referral.

4. Counseling Services
Counseling services are those services or activities that apply therapeutic processes to personal, family, situational, or occupational problems in order to bring about a positive resolution of the problem or improved individual or family functioning or circumstances. Problem areas may include family and marital relationships, parent-child problems, or drug abuse.