

Administrative Rules for Alcohol & Drug Counselors

Part 1: Definitions and Clarification of Terms

1-1 "AAP" means Apprentice Addiction Professional certified under Part 4 of these rules.

1-2 "Accredited" means, of a college, university, or degree, that a course of study was certified as meeting standards of integrity and rigor set out by an accrediting organization approved by the United States Department of Education, or in the case of foreign institution, was verified to the Director's satisfaction as substantially equivalent to a course of study so certified.

1-3 "ADAP" means the Vermont Department of Health's Division of Alcohol and Drug Abuse Programs.

1-4 "ADAP Certified Provider" or "ADAP Preferred Provider" means any site that holds a valid certificate of operation from ADAP, including an "approved provider" under CVR 13-140-063.

1-5 "ADC" means an alcohol and drug counselor certified under Part 5 of these rules.

1-6 "Alcohol and drug abuse counselor" means a person who engages in the practice of alcohol and drug abuse counseling for compensation. 26 V.S.A. § 3321(1). These rules use the synonymous term "alcohol and drug counselor."

1-7 "Board," where used in the Laws of Professional Regulation, 3 V.S.A. § 121 *et seq.*, includes the Director.

1-8 "Client" means a person who receives the professional services of a person regulated under these rules.

1-9 "Designated agency" means a designated community mental health or developmental disability agency described in 18 V.S.A. § 8907(a).

1-10 "Direct clinical counseling services" means one-on-one substance use counseling, substance use group counseling, or substance use family counseling with the involvement of the primary substance user. The term is distinguished from "indirect services," which include creating case notes, staff meetings, supervision, workshops and conferences, general consultation, teaching, case management activities, and alcohol and drug counselor-related work other than direct client contact. Administrative activities that do not serve any particular client or case belong to neither category and are not eligible for credit toward licensure under these rules.

1-11 "Director" means the Director of Professional Regulation.

1-12 "IC&RC" means International Certification and Reciprocity Consortium.

1-13 "LADC" means a licensed alcohol and drug counselor licensed under Part 6 of these rules.

1-14 "License" or "licensure" refers to any credential issued by the Office under these rules, including a certification, except where context clearly indicates reference to a foreign or other professional license.

1-15 "Licensee" means a person holding a license or certification, or an applicant for the same.

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1-16 "Office" means the Office of Professional Regulation

1-17 "Office website" means www.sec.state.vt.us/professional-regulation.

1-18 "Practice of alcohol and drug abuse counseling" means the application of methods, including psychotherapy, that assist an individual or group to develop an understanding of alcohol and drug abuse dependency problems and to define goals and plan actions reflecting the individual's or group's interests, abilities, and needs as affected by alcohol and drug abuse dependency problems and co-morbid conditions. 26 V.S.A. § 3231(5). These rules use the synonymous term **"alcohol and drug counseling."**

1-19 "Site" means a location where alcohol and drug treatment is provided to clients.

1-20 "Supervision" means the oversight of a person for the purposes of teaching, training, or clinical review by a licensed alcohol and drug counselor or a qualified supervisor as determined by the provisions of these rules. See 26 V.S.A. 3231(6).

Part 2: Administration

2-1 Applicable Law. The practice of alcohol and drug counseling is defined and regulated pursuant to 26 V.S.A. § 3131 *et seq.* Exemptions to licensure requirements are found at 26 V.S.A. § 3233. Copies of these and other statutes are available online at www.legislature.vermont.gov/statutes/. The Office administers licensure in conformity with these and other Vermont laws, to include the Administrative Procedure Act, 3 V.S.A. § 800 *et seq.*; the Public Records Act, 1 V.S.A. § 315 *et seq.*; and the Laws of Professional Regulation, 3 V.S.A. § 121 *et seq.*

2-2 Resources for Applicants and Licensees. The Office maintains a website at www.sec.state.vt.us/professional-regulation with information and links relevant to all licensed professionals. Information specific to alcohol and drug counseling licensure is available from www.sec.state.vt.us/professional-regulation/list-of-professions/alcohol-drug-abuse-counselors.

2-3 U.S. Armed Forces. The Director may accept toward the requirements of these rules relevant military education, training, or service completed by a member of the U.S. Armed Forces and may expedite licensure of a person who left licensed employment in another state secondary to a spouse's military transfer to Vermont. 3 V.S.A. § 123(g).

2-4 Duplicate Registration Unnecessary. An unlicensed person engaged in supervised practice toward licensure, except an AAP or ADC working at an ADAP Certified Provider, must be registered on the roster of nonlicensed and noncertified psychotherapists. In addition to the standards of these rules, such a person is answerable to the standards and jurisdiction applicable to rostered psychotherapists. See 26 V.S.A. § 3236(b). Duplicate applications and fees are not required. Each person issued an AAP or ADC certification under these rules is deemed to be registered on the roster.

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Part 3: Procedures

3-1 Applications. Applications for licensure are available from the Office website.

(a) Incomplete applications will not be processed. Applications are complete only when all required questions have been answered fully, all attestations made, all required documentation and materials provided, and all fees paid.

(b) When the Director intends to deny an application, notice stating the reasons for the action shall be given to the applicant by certified mail, whereupon the applicant shall have 30 days to petition for a hearing before an administrative law officer.

(c) The Office may refuse to accept any application found to be redundant with a denied or in-process application.

(d) The Office may deem expired an application upon which reasonable progress toward completion has not been demonstrated for more than one year.

3-2 Complaints. Complaints against licensees, applicants for licensure, or persons practicing without a license may be submitted online, on a standard form available from the Office website. Complaint procedures are explained in detail at www.sec.state.vt.us/professional-regulation/file-a-complaint.

3-3 Contested Cases. Procedures in contested cases relating to licensure or discipline are governed by the Office of Professional Regulation Administrative Rules of Practice, CVR 04-030-005, as those rules may from time to time be modified.

3-4 Declaratory Rulings. Petitions for declaratory rulings as to the applicability of any statutory provision or of any rule or order of the Office may be made pursuant to 3 V.S.A. § 808.

3-5 Conflict of Standards. Where a standard of unprofessional conduct set forth in statute conflicts with a standard set forth in rule, the standard that is most protective of the public shall govern. *See* 3 V.S.A. § 129a(e).

3-6 Determination of Equivalency. Where the Director is permitted by law or rule to accept certain training or experience on the basis of equivalence to a fixed standard, it is the burden of the applicant or licensee to establish equivalence to the Director's satisfaction, by producing credible, clear, and convincing evidence of the same. The Director has no obligation to research the bona fides of any institution, program, course, degree, certification, practicum, fellowship, or examination and may resolve all inferences in favor of withholding a credential, approval, or recognition.

3-7 Waiver or Variance. The Director will not grant routine waivers or variances from any provisions of these rules without amending the rules. *See* 3 V.S.A. § 845. Where, in extraordinary circumstances, application of a rule would result in manifest unfairness, an absurd result, unjustifiable inefficiency, or an outcome otherwise inimical to the public health, safety, and welfare, the Director may, upon written request of an interested party, so find, grant a waiver with or without particular conditions and limitations, and record the action and justification in a written memorandum. This rule shall not be construed as creating any hearing right or cause of action.

3-8 Contacting the Office or Board. See the Office website for contact details. Send mail to: Office of Professional Regulation, ATTN: Alcohol and Drug Counseling, 89 Main Street, 3rd Floor, Montpelier, VT 05620-3402.

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Part 4: Apprentice Addiction Professional (AAP) Certification

4-1 Purpose and Scope of Certification. AAP certification denotes verified completion of entry-level training qualifying an apprentice professional to serve as a supervised apprentice at an ADAP Certified Provider only. The certification does not entitle the bearer to act as a provider in any other setting. Should ADAP terminate recognition of the AAP certification, the Director may terminate the related certificate.

4-2 Eligibility. To be eligible for AAP certification, a person shall:

- (a) be 18 years of age or older;
- (b) be graduated from or matriculated in a course of study leading to at least an associate's degree from an accredited college or university;
- (c) within the five years preceding application, have completed, through documented workshops, seminars, or college or university courses, at least 40 hours of substance use disorder education acceptable to the Director as sufficiently related to addiction counseling, which must include:
 - (i) screening, assessment, and engagement;
 - (ii) treatment planning, collaboration, and referral;
 - (iii) addiction counseling; and
 - (iv) at least six hours of professional ethics theory, including HIPAA and 42 CFR Part 2 respecting confidentiality of substance use disorder patient records;
- (d) be employed or approved for hire as an AAP at an ADAP Certified Provider; and
- (e) pass the AAP examination specified by the Director.

4-3 Oversight. An AAP certificant is answerable to the duties and standards set out elsewhere in these rules, including the requirement to provide mandatory client disclosures. AAP certificants shall comply with all ADAP rules, regulations, and policies respecting supervision and permissible scope of practice.

Part 5: Alcohol and Drug Counselor (ADC) Certification

5-1 Purpose and Scope of Certification. ADC certification denotes verified preparation of a person with baccalaureate education, substance-use disorder-specific training, and minimum work experience, to provide alcohol and drug counseling at an ADAP Certified Provider only. 26 V.S.A. § 3233(4). The certification does not entitle the bearer to provide alcohol and drug counseling in any other setting.

5-2 Eligibility. To be eligible for ADC certification, a person shall:

- (a) be 18 years of age or older;
- (b) possess at least a baccalaureate degree from an accredited college or university;
- (c) have completed 270 hours of substance use disorder education as set out further in this Part;
- (d) have completed 4,000 hours of supervised work experience as set out further in this Part; and
- (f) pass the IC&RC Alcohol and Drug Counselor (ADC) Examination or another examination of greater or substantially equivalent relevance and rigor acceptable to the Director.

5-3 Substance Use Disorder Education

(a) Two-hundred-seventy hours of substance use disorder training must be verifiable and clearly and credibly documented with certificates or official, sealed transcripts. The Director may reject education insufficiently related to evidence-based addiction counseling practice. Components may be derived from relevant baccalaureate or graduate coursework.

(b) Required topics and minimum training durations are:

(1) Substance use disorder counseling/treatment. Studies provide an understanding of counseling and treatment approaches for individuals, groups, and families; 36 hours;

(2) Co-morbid medical disorders. Studies provide an understanding of medical disorders commonly associated with substance use disorders (e.g., HIV/AIDS, hepatitis C) and their integrated treatment; 6 hours;

(3) Medication assisted treatment (MAT) and Psychopharmaceuticals. Studies provide an understanding of medications used along with counseling and behavioral therapies to treat substance use disorders; 6 hours; and

(4) Professional and ethical responsibilities. Studies provide an understanding of the professional and ethical responsibilities of substance use disorder counselors, including the NAADAC (National Association for Alcoholism and Drug Abuse Counselors) Code of Ethics, HIPAA, and Substance Abuse Confidentiality Regulations (42 CFR Part 2); 6 hours;

(c) The remaining 216 hours may be derived from training addressing:

(1) Human development. Studies provide an understanding of the nature and needs of individuals throughout the life span;

(2) Multi-cultural/diversity. Studies provide an understanding of issues and trends in a multi-cultural and diverse society as they relate to substance use disorder counseling;

(3) Engagement strategies/motivational interviewing. Studies provide an understanding of how to build relationship and task alliance;

(4) Substance use screening. Studies provide an understanding of screening, and the need for further clinical assessment;

(5) DSM. Studies provide an understanding of substance use and related disorders, according to the current Diagnostic and Statistical Manual of Mental Disorders;

(6) American Society of Addiction Medicine (ASAM) criteria. Studies provide an understanding of ASAM's patient placement criteria;

(7) Case management and service coordination. Studies provide an understanding of administrative, clinical, and evaluative activities that bring the client, treatment services, community agencies, and other resources together to implement the treatment plan;

(8) Neurobiology of addiction and substance use dependence. Studies provide an understanding of the neuro-circuitry and molecular biology of addiction. 6 hours;

(9) Clinical assessment and treatment planning. Studies provide an understanding of comprehensive diagnostic examinations, treatment recommendations, and treatment planning with the client;

(10) Relapse prevention. Studies provide an understanding of relapse prevention, identification of high risk situations, and coping skills;

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(11) Co-occurring disorders. Studies provide an understanding of co-occurring disorders and treatment; or

(12) Trauma. Studies provide an understanding of trauma signs, symptoms, impact and interventions.

(d) For purposes of computing time from undergraduate or graduate courses, each college or university credit hour shall be assigned 15 hours.

(e) Courses completed more than ten years prior to application may be rejected at the Director's discretion if there is reason to believe they no longer assure familiarity with current addiction science and standards of practice.

5-4 Supervised Work Experience

(a) Supervisor Qualifications. Supervised work experience shall be earned under a supervisor acceptable to the Director, who must be:

(1) an LADC of at least one year full-time professional experience working as such, and who is licensed and in good standing in the state of practice; or

(2) an independent clinical social worker, psychologist, marriage and family therapist, or clinical mental health counselor, licensed and in good standing in Vermont or a foreign jurisdiction acceptable to the Director, who has completed addiction-counseling training consistent with the requirements of § 5-3 and has accrued at least one year of full-time addiction counseling experience or its part-time equivalent; or

(3) an allopathic or osteopathic physician certified in addiction medicine by the American Society of Addiction Medicine, the American Osteopathic Association, the American Board of Psychology and Neurology, or an equivalent certifying body approved by the Director.

(b) Nature of Work. Supervised work experience means work as a counselor providing clinical counseling services to clients. Direct clinical counseling services, as opposed to indirect services, must compose at least half of any supervised work experience recognized under this Part. Not fewer than half of the required hours must be earned within five years of satisfying other license requirements. Hours accrued in violation of the laws or rules of this or another jurisdiction will not be recognized. Supervised work experience must include:

(1) screening, assessment and engagement;

(2) treatment planning, collaboration and referral;

(3) counseling; and

(4) professional and ethical responsibilities.

(c) Supervision: Manner and Frequency. A clinical supervisor must be familiar with the nature of the applicant's clinical activities, monitor the quality of the counseling, and contribute to the enhancement of self-knowledge and substance use disorder counseling skills. Supervision shall be conducted in person, face to face, in a formal setting such as an office, clinic, or institution, and may occur by videoconference. One hour of face-to-face supervision must be documented for each 40 hours of supervised practice, such that 50 aggregate hours of supervision occur within each 2,000 total hours. Group supervision of up to six unlicensed individuals is permitted, but at least half of all supervision hours must be individual in nature. The Director may require an enhanced ratio of one-on-one

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supervision where a supervision schedule is irregular, inconsistent, or infrequent. No more than forty hours of supervision may be earned in any one week.

(d) Documentation. Clinical supervision must be documented by the supervisor using forms supplied by the Office, to be filed at the inception and conclusion of the supervisee's work experience, upon a change in supervisors, or at such other intervals as the Director may require. Reports must document at least 10 hours of supervision in each of the four categories set out in subsection (b), above, and must be sufficiently detailed to illustrate compliance with all applicable provisions of these rules. Incomplete reports will not be processed. Reports demonstrating a failure of supervisory integrity or inadequate skill mastery may be disallowed or assigned partial credit.

5-5 Oversight. An ADC certificant is answerable to the duties and standards set out elsewhere in these rules, including the requirement to provide mandatory client disclosures. ADC certificants shall comply with all ADAP rules, regulations, and policies respecting supervision and permissible scope of practice.

Part 6: Alcohol and Drug Counselor (LADC) Licensure

6-1 Purpose and Scope of Licensure. LADC licensure entitles the bearer to provide alcohol and drug counseling to clients.

6-2 Eligibility. To be eligible for LADC licensure, a person shall:

- (a) possess a qualifying degree, which shall:
 - (i) be a master's degree or doctorate in a human-services field from an accredited college or university, including a degree in counseling, social work, psychology, or an allied mental health field, or a master's degree or higher in a health care profession regulated under this Titles 26 or 33 of the Vermont Statutes Annotated;
 - (ii) have required the attainment of at least 600 hours of supervised internship; and
 - (iii) have required the accrual of at least 60 graduate credit hours; provided, however, that qualifying degrees based upon at least 48 but fewer than 60 graduate credit hours may be recognized if supplemented with coursework prescribed by the Director;
- (b) hold an IC&RC certification from a US or Canadian jurisdiction; hold an ADC certification under these rules; or meet all eligibility requirements for the ADC certification except the supervised-clinical-practice requirement at § 5-2(d);
- (c) have completed 2,000 hours of post-degree supervised clinical practice under the standards set out for such practice in Part 5, which practice must occur after graduation and may not include graduate practica or internships; and
- (d) pass the IC&RC Advanced Alcohol and Drug Counselor (AADC) Examination or another examination of greater or substantially equivalent relevance and rigor acceptable to the Director.

6-3 Endorsement and Cross-licensure from Other Jurisdictions and Fields. The following accelerated paths to licensure are available to applicants with existing credentials from which training, education, and experience may be inferred; provided, however, that this rule shall not be construed as requiring the Director to contravene 26 V.S.A. § 3236:

(a) Equivalent Foreign License. An LADC licensed and in good standing in a jurisdiction with requirements substantially equivalent to those of this state may apply on that basis.

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(b) Acceptably Similar Foreign License. An LADC licensed and in good standing in a jurisdiction with requirements acceptably similar but not substantially equivalent to those of this state may, upon satisfactory proof of five years' full-time addiction-counseling practice in the foreign jurisdiction, be deemed to have satisfied § 6-2(c).

(c) Other Professional Counseling Credential. An independent clinical social worker, psychologist, marriage and family therapist, or clinical mental health counselor, licensed and in good standing in Vermont or a foreign jurisdiction acceptable to the Director, who meets the criteria of § 5-4(a)(2) (requiring the substance use disorder education described at § 5-3 and qualifying clinical experience), may be licensed as an LADC upon taking and passing the IC&RC Advanced Alcohol and Drug Counselor (AADC) Examination.

Part 7: License Renewal; Continuing Education

7-1 Biennial Licensing Period. Licenses are valid for fixed, two-year periods. Expiration dates are printed on licenses. A license becomes inactive if not renewed by midnight on the date of expiry. Practice under an inactive license is prohibited. An initial license issued fewer than 90 days prior to the beginning of the fixed biennial period shall be valid through the end of full biennial licensing period following initial licensure. A lookup tool on the Office website may be considered a primary source verification as to license status and expiration.

7-2 License Renewal. License renewal applications are available from the Office website. The Office transmits email reminders to licensees at the end of each biennial licensing period; however, non-receipt of such reminders shall not excuse a licensee from the obligation to maintain continuous licensure or the consequences of failing to do so. Practicing while a license is lapsed is a violation of 3 V.S.A. § 127.

7-3 Late Renewal Penalties. Late renewal applications are subject to reinstatement fees, pursuant to 3 V.S.A. § 127(d). Late reinstatement fees are waivable at the discretion of the Director where a licensee has fully and completely removed himself or herself from practice for a period and has ceased holding himself or herself out as licensed. Licensees planning extended absence from practice are advised to document their intentions in advance to ensure waiver eligibility.

7-4 Extended License Lapse; Supplemental Training. The Director may prescribe an appropriate period of supplemental training or supervision where an applicant for renewal of an inactive license has not actively practiced for a substantial period within the three preceding years. The presumptive supplemental training is completion of the continuing education that would have been completed if the license had been maintained, and for licensees out of practice more than five years, 1,000 hours of supervised practice.

7-5 Continuing Education. As a condition of license renewal, applicants must document satisfactory completion of not fewer than 40 contact hours of continuing education within the first full biennial licensing period following initial licensure and each subsequent biennial period. Six of the 40 required hours must be dedicated to professional and ethical responsibilities, including the NAADAC Code of Ethics, HIPAA, and 42 CFR Part 2. Twelve of the 40 required hours must address substance use disorder as the primary or co-occurring disorder.

(a) One contact hour is defined as 60 minutes of participatory, interactive learning, documented with a certificate or other proof of attendance, in a continuing-education

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program approved by the Director. Eligible activities must address substance use disorder as the primary or co-occurring disorder.

(b) The Director may refuse recognition to continuing education activities that are not reasonably related to addiction counseling, are not presented by a credible and competent person or organization, are not reasonably calculated to enhance professional competence, are cumulative, or are insufficiently documented.

(c) Designated-agency in-service trainings certified by the relevant agency director may be accepted for as many as 30 of the 40 required hours; provided, however, that designated-agency training will be recognized under this Part only if open to participation by qualified practitioners employed outside the training agency.

(d) Addiction Technology Transfer Center Network (ATTC) and National Association for Alcoholism and Drug Abuse Counselors (NAADAC) programs are presumptively approved for continuing education credit. A rolling compendium of other approved continuing-education sources is available from the Office website.

(e) The Office may conduct a retrospective compliance audit of any licensee. All licensees shall retain continuing education documentation for two licensing cycles following the renewal to which the relevant education is applied.

(f) An applicant for license renewal who has been unable to comply with continuing education requirements may apply to the Director for a corrective action plan, to be completed within 90 days, and at the Director's sole discretion may be issued a temporary renewal license pending completion of the same, pursuant to 3 V.S.A. §§ 129(k)&(l).

(g) Persons on active duty in the U.S. Armed Forces may apply to the Director for waiver or modification of continuing education requirements, pursuant to 3 V.S.A. § 129(a)(12), as may be appropriate to the particular circumstance and consistent with reasonable assurance of continuing professional competence.

Part 8: Duties and Standards

8-1 Duty to Update and Self-Report. Applicants and licensees owe a duty of candor to the Office and shall disclose circumstances that may call for further investigation to protect the public. That a matter is reportable does not imply that the matter necessarily is a basis for discipline. A licensee, including an applicant for licensure, shall report to the Office, in writing, within 72 hours:

(a) any material inaccuracy or change in circumstance relative to any application question, where the changed circumstance arises between submission of a license application and issuance of the license sought;

(b) any arrest, charge, or conviction for a criminal act;

(c) any legal claim, settlement, or judgment arising from alleged professional negligence, misconduct, or malpractice;

(d) any adverse action against a foreign professional license, where the adverse action relates to an allegation of misconduct, substandard practice, or unethical conduct; and

(e) for persons earning supervised practice hours, a change in supervision or designated supervisor.

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8-2 Mandated Reporters. Any hospital, clinic, community mental health center, or other health care institution in which a licensee performs professional services shall report disciplinary action against a licensee, as further specified by 3 V.S.A. § 128. Designated agencies and ADAP Certified Providers are mandated reporters.

8-3 Professional Standards. An administrative law officer may consider designated-agency codes of conduct and the National Association of Alcoholism and Drug Abuse Counselors Code of Ethics persuasive evidence of “the essential standards of acceptable and prevailing practice” for purposes of 26 V.S.A. § 129a(b). All licensees should be familiar with these materials, where applicable, and the bases for discipline identified in Part 7.

8-4 Mandatory Disclosure to Clients

(a) At the inception of any clinical engagement, and in no event later than the third consultation, a person practicing under these rules, or an employing designated agency on such person’s behalf, shall disclose to each client, in a typed, easily legible format, in plain language, the following information:

- (1) The person’s professional qualifications and experience, including all relevant graduate programs attended and all graduate degrees and certificates earned, the full legal name of the granting institution; and a brief description of any special qualifications and areas of practice;
- (2) A copy of the statutory definitions of unprofessional conduct found at 3 V.S.A. § 129a and 26 V.S.A. § 3239; and
- (3) Information on the process for filing a complaint with, or making an inquiry to, the Director.

(b) A sample disclosure illustrating compliance with this rule is available from the Office website.

(c) One disclosure shall be given to the client; a dated copy signed by the client shall be retained by the practitioner and produced at the Office’s request. Where a client cannot understand or sign the disclosure, his or her legal guardian or responsible kin shall be offered the disclosure. Where a client refuses to or cannot sign, a practitioner shall document that fact in place of the signature, obtaining the counter-signature of a colleague where possible.

Part 9: Discipline

9-1 Unprofessional Conduct. Unprofessional conduct includes those acts set out at 3 V.S.A. § 129a (applicable to all professional licensees) and 26 V.S.A. § 3239 (applicable to addiction professionals licensed or certified under these rules). Violation of these rules is cognizable as unprofessional conduct pursuant to 3 V.S.A. § 129a(a)(3).

9-2 Remedies. Upon a finding by an administrative law officer that a licensee, applicant, or person who later becomes an applicant has committed unprofessional conduct, within or without this State, or has had a license application denied or a license revoked, suspended, limited, conditioned, or otherwise disciplined by a licensing agency in another jurisdiction for conduct which would constitute unprofessional conduct in this State, or has surrendered a license while under investigation for unprofessional conduct, the Director may warn, reprimand, suspend, revoke, limit, condition, deny, or prevent the renewal of a license. *See* 3 V.S.A. § 129(a). A license may be summarily suspended pending further proceedings, consistent with 3 V.S.A. § 814(c), upon a finding that public health, safety, or welfare imperatively requires emergency action.