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Proposed Regulation
Agency Background Document

Agency name	Department of Behavioral Health and Developmental Services
Virginia Administrative Code (VAC) Chapter citation(s)	12VAC35-272
VAC Chapter title(s)	Regulations for Residential and Inpatient Services
Action title	Part 2 of 7:Regulatory Restructuring; Residential
Date this document prepared	November 5, 2025

This information is required for executive branch review and the Virginia Registrar of Regulations, pursuant to the Virginia Administrative Process Act (APA), Executive Order 19 (2022) (EO 19), any instructions or procedures issued by the Office of Regulatory Management (ORM) or the Department of Planning and Budget (DPB) pursuant to EO 19, the Regulations for Filing and Publishing Agency Regulations (1 VAC 7-10), and the *Form and Style Requirements for the Virginia Register of Regulations and Virginia Administrative Code*.

Brief Summary

Provide a brief summary (preferably no more than 2 or 3 paragraphs) of this regulatory change (i.e., new regulation, amendments to an existing regulation, or repeal of an existing regulation). Alert the reader to all substantive matters. If applicable, generally describe the existing regulation.

In 2017, the Department of Behavioral Health and Developmental Services (DBDHS) conducted a periodic review of the Licensing Regulations. During that review, the Office of Regulatory Affairs (ORA) conducted extensive research on how other states structure their Licensing Regulations. The department also considered comments from internal subject matter experts, providers, and sister agencies when recommending the new licensing structure.

As a result of that review, DBHDS determined the regulations should be amended and broken into service-specific chapters. Therefore, DBHDS will repeal the existing Children's Residential and Licensing Regulations, replacing them with one overarching General Chapter applicable to all providers and five (5) service-specific chapters: Residential, Center-Based, NonCenter-Based, Case Management, and Crisis.

This methodology allows more detailed service-specific regulations where appropriate and offers more clarity for providers regarding exactly which provisions of the licensing regulations apply to their services.

This action will enact the Residential service-specific chapter.

Acronyms and Definitions

Define all acronyms used in this form, and any technical terms that are not also defined in the "Definitions" section of the regulation.

Board – State Board for Behavioral Health and Developmental Services

Children's Residential Regulations – Regulations for Children's Residential Facilities (12VAC35-46)

DBHDS -- Department of Behavioral Health and Developmental Services

Licensing Regulations – Rules and Regulations for Licensing Providers by the Department of Behavioral Health and Developmental Services (12VAC35-105)

ORA – DBHDS Office of Regulatory Affairs

Mandate and Impetus

Identify the mandate for this regulatory change and any other impetus that specifically prompted its initiation (e.g., new or modified mandate, petition for rulemaking, periodic review, or board decision). For purposes of executive branch review, "mandate" has the same meaning as defined in the ORM procedures, "a directive from the General Assembly, the federal government, or a court that requires that a regulation be promulgated, amended, or repealed in whole or part."

Section 2.2-4007.1 of the Virginia Administrative Process Act requires all regulations to be reviewed every four years to determine whether they should be continued without change or be amended or repealed. In 2017, DBHDS conducted a Periodic Review of the Licensing Regulations and recommended that the regulations should be amended.

Legal Basis

Identify (1) the promulgating agency, and (2) the state and/or federal legal authority for the regulatory change, including the most relevant citations to the Code of Virginia and Acts of Assembly chapter number(s), if applicable. Your citation must include a specific provision, if any, authorizing the promulgating agency to regulate this specific subject or program, as well as a reference to the agency's overall regulatory authority.

Sections 37.2-203 and 37.2-304 of the Code of Virginia authorize the Board to adopt regulations that may be necessary to carry out the provisions of Title 37.2 and other laws of the Commonwealth administered by the Commissioner and DBHDS.

At its meeting on Wednesday December 10, 2025, the Board voted to authorize staff to initiate this regulatory action.

Purpose

Explain the need for the regulatory change, including a description of: (1) the rationale or justification, (2) the specific reasons the regulatory change is essential to protect the health, safety or welfare of citizens, and (3) the goals of the regulatory change and the problems it is intended to solve.

Licensing regulations are integral to protect the health, safety, and welfare of individuals served by behavioral health, substance use, and developmental disability providers within the Commonwealth of Virginia. The existing Children's Residential and Licensing Regulations often result in confusion because the regulations are necessarily lengthy and as currently structured, contain the requirements for all types of providers in a single chapter. This structure makes the regulations difficult to navigate and often leaves providers unsure or frustrated regarding which provisions of the regulations apply to them.

The purpose of this action is to solve those problems by creating the service-specific Residential and Inpatient chapter for the regulations as a part of the restructuring. The restructuring shall make the regulations more accessible and understandable while allowing space to provide more detail in service-specific chapters for specific provider types.

Substance

Briefly identify and explain the new substantive provisions, the substantive changes to existing sections, or both. A more detailed discussion is provided in the "Detail of Changes" section below.

The regulatory restructuring will repeal the existing Children's Residential and Licensing Regulations, replacing them with one overarching General Chapter applicable to all providers and five (5) service specific chapters: Residential, Center-Based, NonCenter-Based, Case Management, and Crisis. All provisions of the existing Children's Residential and Licensing Regulations would be reenacted within the new "umbrella" General Chapter and five service-specific chapters, with corrections, streamlining, and strengthening of regulations where appropriate.

This restructuring methodology allows more detailed service-specific regulations where appropriate and more clarity for providers regarding exactly which provisions of the department's regulations apply to their services.

This action retains provisions from the existing licensing regulations and limits changes to technical corrections, streamlining, and strengthening of regulations where appropriate.

Issues

Identify the issues associated with the regulatory change, including: 1) the primary advantages and disadvantages to the public, such as individual private citizens or businesses, of implementing the new or amended provisions; 2) the primary advantages and disadvantages to the agency or the Commonwealth; and 3) other pertinent matters of interest to the regulated community, government officials, and the public. If there are no disadvantages to the public or the Commonwealth, include a specific statement to that effect.

The primary advantage of this action is that it reorganizes and thus clarifies the regulatory requirements, improving ease of use and understanding by licensed providers, individuals receiving services, and other stakeholders. As the action does not remove protections for individuals, there are no known disadvantages.

The primary advantages to DBHDS and the Commonwealth are that the regulatory language is reorganized in a method that is easier for providers to use and therefore will promote increased compliance. There is no disadvantage to the agency or the Commonwealth.

There are no other pertinent matters of interest.

Requirements More Restrictive than Federal

Identify and describe any requirement of the regulatory change which is more restrictive than applicable federal requirements. Include a specific citation for each applicable federal requirement, and a rationale for the need for the more restrictive requirements. If there are no applicable federal requirements, or no requirements that exceed applicable federal requirements, include a specific statement to that effect.

There are no regulatory changes more restrictive than applicable federal requirements.

Agencies, Localities, and Other Entities Particularly Affected

Consistent with § 2.2-4007.04 of the Code of Virginia, identify any other state agencies, localities, or other entities particularly affected by the regulatory change. Other entities could include local partners such as tribal governments, school boards, community services boards, and similar regional organizations. "Particularly affected" are those that are likely to bear any identified disproportionate material impact which would not be experienced by other agencies, localities, or entities. "Locality" can refer to either local governments or the locations in the Commonwealth where the activities relevant to the regulation or regulatory change are most likely to occur. If no agency, locality, or entity is particularly affected, include a specific statement to that effect.

Other State Agencies Particularly Affected

- No other state agencies are particularly affected.

Localities Particularly Affected

- No localities are particularly affected

Other Entities Particularly Affected

- CSBs involved in providing services to individuals are particularly affected as they are also licensed providers; Individuals needing or receiving services from licensed providers, as well as employees, contractors, volunteers, and interns are particularly affected by this regulatory action.

Economic Impact

Consistent with § 2.2-4007.04 of the Code of Virginia, identify all specific economic impacts (costs and/or benefits) anticipated to result from the regulatory change. When describing a particular economic impact, specify which new requirement or change in requirement creates the anticipated economic impact. Keep in mind that this is the proposed change versus the status quo.

Impact on State Agencies

For your agency: projected costs, savings, fees, or revenues resulting from the regulatory change, including: a) fund source / fund detail; b) delineation of one-time versus on-going expenditures; and c) whether any costs or revenue loss can be absorbed within existing resources.	The Department anticipates a number of cost savings associated with the regulatory action. These savings are enumerated within the ORM Economic Review Form. There are no projected costs on DBHDS from this regulatory action other than to require modifications in its web-based reporting application to update regulatory section information. Those costs can be absorbed.
For other state agencies: projected costs, savings, fees, or revenues resulting from the regulatory change, including a delineation of one-time versus on-going expenditures.	There is no fiscal impact on other state agencies from this regulatory action.
For all agencies: Benefits the regulatory change is designed to produce.	DBHDS will have increased clarity in the use of the regulations.

Impact on Localities

If this analysis has been reported on the ORM Economic Impact form, indicate the tables (1a or 2) on which it was reported. Information provided on that form need not be repeated here.

Projected costs, savings, fees, or revenues resulting from the regulatory change.	There is no fiscal impact on localities from this regulatory action.
Benefits the regulatory change is designed to produce.	Increased clarity in the use of the regulations.

Impact on Other Entities

If this analysis has been reported on the ORM Economic Impact form, indicate the tables (1a, 3, or 4) on which it was reported. Information provided on that form need not be repeated here.

Description of the individuals, businesses, or other entities likely to be affected by the regulatory change. If no other entities will be affected, include a specific statement to that effect.	Licensed providers shall be affected by the regulatory change. Please see the ORM Economic Impact Form. (Tables 1a and 4)
Agency's best estimate of the number of such entities that will be affected. Include an estimate of the number of small businesses affected. Small business means a business entity, including its affiliates, that: a) is independently owned and operated, and; b) employs fewer than 500 full-time employees or has gross annual sales of less than $6 million.	An unknown number of small businesses that are licensed providers may be affected by this regulatory change. Please see the ORM Economic Impact Form. (Table 4)
All projected costs for affected individuals, businesses, or other entities resulting from the regulatory change. Be specific and include all costs including, but not limited to: a) projected reporting, recordkeeping, and other administrative costs required for compliance by small businesses; b) specify any costs related to the development of real estate for commercial or residential purposes that are a consequence of the regulatory change; c) fees; d) purchases of equipment or services; and	See the ORM Economic Impact Form. (Table 1a)

e) time required to comply with the requirements.	
Benefits the regulatory change is designed to produce.	Increased clarity in the use of the regulations.

Alternatives to Regulation

Describe any viable alternatives to the regulatory change that were considered, and the rationale used by the agency to select the least burdensome or intrusive alternative that meets the essential purpose of the regulatory change. Also, include discussion of less intrusive or less costly alternatives for small businesses, as defined in § 2.2-4007.1 of the Code of Virginia, of achieving the purpose of the regulatory change.

There are no viable alternatives to the regulatory action, which decreases the regulatory and compliance burden on providers by improving clarity.

Regulatory Flexibility Analysis

Consistent with § 2.2-4007.1 B of the Code of Virginia, describe the agency's analysis of alternative regulatory methods, consistent with health, safety, environmental, and economic welfare, that will accomplish the objectives of applicable law while minimizing the adverse impact on small business. Alternative regulatory methods include, at a minimum: 1) establishing less stringent compliance or reporting requirements; 2) establishing less stringent schedules or deadlines for compliance or reporting requirements; 3) consolidation or simplification of compliance or reporting requirements; 4) establishing performance standards for small businesses to replace design or operational standards required in the proposed regulation; and 5) the exemption of small businesses from all or any part of the requirements contained in the regulatory change.

The ORM Economic Impact Form reports on costs and benefits under an alternative approach.

Periodic Review and Small Business Impact Review Report of Findings

If you are using this form to report the result of a periodic review/small business impact review that is being conducted as part of this regulatory action, and was announced during the NOIRA stage, indicate whether the regulatory change meets the criteria set out in EO 19 and the ORM procedures, e.g., is necessary for the protection of public health, safety, and welfare; minimizes the economic impact on small businesses consistent with the stated objectives of applicable law; and is clearly written and easily understandable. In addition, as required by § 2.2-4007.1 E and F of the Code of Virginia, discuss the agency's consideration of: (1) the continued need for the regulation; (2) the nature of complaints or comments received concerning the regulation; (3) the complexity of the regulation; (4) the extent to the which the regulation overlaps, duplicates, or conflicts with federal or state law or regulation; and (5) the length of time since the regulation has been evaluated or the degree to which technology, economic conditions, or other factors have changed in the area affected by the regulation. Also, discuss why the agency's decision, consistent with applicable law, will minimize the economic impact of regulations on small businesses.

Not applicable. This regulatory action is related to a periodic review from 2017, one was not announced during the NOIRA stage.

Public Comment

Summarize all comments received during the public comment period following the publication of the previous stage, and provide the agency's response. Include all comments submitted: including those received on Town Hall, in a public hearing, or submitted directly to the agency. If no comment was received, enter a specific statement to that effect.

Commenter	Comment	Agency response
Jessica Bryant, CIBH	**CIBH Comment on Regulation Overhaul** In response to the Notice of Intended Regulatory Action (NOIRA) for the *Rules and Regulations for Licensing Providers by the Department of Behavioral Health and Developmental Services, 12 VAC 35- 105-10, et seq,* please reconsider the proposed action of separating regulations into a general chapter and service specific chapters. With pending regulation and service changes related to the Behavioral Health Redesign, the proposed action would not be in alignment with the ending of certain services and establishing of other services in the Redesign model. We should be moving forward with one process that can both overhaul regulations while speaking to the services of Behavioral Health Redesign.	The Behavioral Health Redesign effort is not at odds with this regulatory action to restructure the licensing chapters. The regulatory actions for Behavioral Health Redesign have not been completed, and regulatory actions are not permitted to incorporate changes that are outside of their scope. Therefore, the DBHDS regulatory actions to incorporate Behavioral Health Redesign must move forward as separate actions. Once the Behavioral Health Redesign regulatory actions are finalized, all new services as a part of that effort will be incorporated into the new restructured licensing chapters.
Jonina (Nina) Moskowitz, Psy.D., LCP	SOAR365 agrees with DBHDS's plan to shift to a General Provisions Chapter and a series of service-type specific chapters. 2025's regulatory reduction successfully removed requirements identified as going beyond the scope of the Office of Licensing; this approach should be continued. In addition, changes should avoid creating administrative burdens that detract from service provision or the ability to hire staff.	Thank you for your support. The regulatory provisions which were reduced in 2025 were not eliminated because they were outside of the scope of the authority of the Office of Licensing. Reductions were made at the direction of the Office of the Governor through Executive Directive 1, those provisions eliminated were within the authority of the Department however were removed to reduce burden and streamline regulations. All regulatory reductions completed because of Executive Directive 1 have been incorporated into the Overhaul drafts.

	Clarification is needed related to Respite services not provided in an individual's home. The definition of Residential Services does not include respite services; prior drafts of both the Center-based and Residential Services chapters include Respite. There should be no distinction between the requirements for adults and for minors receiving this service. While they should be served separately, the intention and delivery of the service are the same – to provide relief for a care giver while providing for the needs of the individuals. Placing respite services for youth under the requirements of Children's Residential Services would result in establishing a series of irrelevant, prohibitive requirements (e.g., involvement of the Interstate Compact administrator, placement agreements, educational planning, mental health services, PT/OT/Speech & Language therapy, many aspects of case management services, allowance, dental treatment information, etc.)	Respite services provided in an individuals home shall be located within the NonCenter Based chapter. Those respite services provided within a respite center will be located and governed by the Center-Based chapter. Those respite services provided within a group home or a residential service setting shall be located and governed by the Residential chapter. The Department has considered the commenter's notes regarding placing respite services for youth under the requirements of the Children's Residential Services and in the current draft has made edits, so respite is not required to comply with irrelevant provisions.
	Licensing regulations should not specify that services are only available to "unpaid" caregivers as reimbursement is beyond the scope of the Office of Licensing.	The Department is unsure of what the commenter is referring to. The current draft of the Licensing regulations state that ""Respite care" means providing for a short-term, time-limited period of care of an individual for the purpose of providing relief to the individual's family, guardian, or regular caregiver." The definition, service description etc. does not refer to "unpaid" caregivers.
	Introducing secondary screenings for individuals who have been on waitlists makes sense. However, the extent of the documentation for a secondary screening should be taken into consideration in a manner that reflects the varying services and situations. For example, being on a waitlist for two weeks is not equivalent for a person seeking group home services as for someone seeking medically managed intensive inpatient services.	The latest draft of the Residential chapter does not have a secondary screening. Rather, the draft requires that providers review all elements of the screening at the time of initial assessment and update as necessary. Therefore, individuals who have not been on a waitlist for a long period of time may not require updates to screening information.

	Prior drafts set an expectation for providers to test employees' knowledge and/or competence on ISPs of the persons they service. Documentation of this was expected to be retained within the personnel file. DBHDS's response to prior public comment included the idea of a verbal quiz and minimized the concerns inherent in this expectation, including: • Documentation of knowledge of people's ISPs in personnel files requires the inclusion of confidential information about participants in a personnel file. This is entirely inappropriate. • The time it would take to complete this activity will inherently decrease the amount of time employees have to actually provide services. • Some service providers hold independent licenses. One aspect of holding such a license is the expectation that a person will know and understand the ISPs of persons served. It is burdens such as this that contribute to people such as physicians, nurses, and licensed providers of mental health services to avoid work in Licensed services. Is it appropriate to quiz a licensed psychiatrist on plans? Is it good use of their time to do this for caseloads of 100 -200 people? • One "easy solution" for providers would be to avoid changing people's plans, despite other regulatory	The current draft retains the requirement that employees or contractors who are responsible for implementing the ISP demonstrate a working knowledge of the objectives and strategies contained within the current ISP. However, the requirement of the provider testing this knowledge has been removed from the latest draft. The Department believes this edit will address the commenters concerns.

	requirements and the best interests of individuals. • Another "easy solution" to ensure staff members know the content of plans is to limit the content of plans and to repeat this across individuals receiving the service as much as possible. This cookie cutter approach would be another indicator that the intention of this has backfired. • This time-consuming, labor-intensive concept will ultimately *detract* from providers' ability to ensure quality and quantity of services. Providers are facing staffing crises in hiring direct support professionals, support coordinators, behavioral health case managers, licensed clinicians, nurses, and psychiatrists. Requirements such as this further undermine the service delivery system.	
	In light of the nature and intent of Respite service, is there a need for a quarterly progress review? Often, people only make use of the service for a few days in a quarter. If there is a true need for this review, align with DMAS and require a quarterly progress review only if the individual made use of the service during the quarter.	The Department will take the commenters concerns into consideration.
	Maintain awareness that individuals served may be slow to make progress. While quarterly conversations at the provider level may make sense, convening a team each quarter where a person has not made progress on one or more objectives has the potential to become burdensome and demoralizing for individuals. A more person-centered approach would	The requirement to convening a team to meet to review goals and objectives only exists for those goals and objectives that were not accomplished by the identified target date. Therefore, this requirement would not apply each quarter. Further this is an existing regulatory requirement.

	be to ask the person if they would like a meeting of all treatment team members to discuss how to proceed.	
	Requiring consistent format for progress notes across all locations of a service, for each discipline involved is understandable. Requiring consistent format across all services and hence all disciplines does not reflect the varying expectations for members of a team. For example, in some services, a specified plan for objectives to address in the next encounter (e.g., outpatient therapy), whereas this may not be a match for other services (e.g., a residential program's shift notes).	The Department has edited the requirement regarding consistency of progress notes to address the commenter's concerns. The latest draft requires consistency of progress notes across a service that than across all services.
	Ensure regulations do not set expectations that employees will provide interventions outside of their scope. For example, in many services, it is not appropriate for the provider to communicate the results of medical examinations to providers – that is the responsibility of the treating physician.	It seems the commenter is referring to section 12VAC35-272-120 "Health care policy". This provision requires that the provider have a health care policy which describes how and to what extent <u>"The provider will communicate the results of physical examinations, medical assessment, and diagnostic test, treatments, or examinations conducted by the provider to the individual and the individual's authorized representative, as appropriate."</u> Therefore the draft does not require the provider to communicate any medical examination results but rather create and implement a policy which describes to what extent the provider will communicate medical examination results.
	While community participation is important, Residential Respite services should be exempt from requiring this. The service is intended to provide relief to caregivers, not to build additional skills.	The Department shall take the commenters concerns into consideration.

Public Participation

Indicate how the public should contact the agency to submit comments on this regulation, and whether a public hearing will be held, by completing the text below.

The Department of Behavioral Health and Developmental Services is providing an opportunity for comments on this regulatory proposal, including but not limited to (i) the costs and benefits of the regulatory proposal, (ii) any alternative approaches, and (iii) the potential impacts of the regulation.

Anyone wishing to submit written comments for the public comment file may do so through the Public Comment Forums feature of the Virginia Regulatory Town Hall web site at: https://townhall.virginia.gov. Comments may also be submitted by mail, email or fax to Susan Puglisi, 1220 Bank Street, Richmond Virginia, 23219, and susan.puglisi@dbhds.virginia.gov. In order to be considered, comments must be received by 11:59 pm on the last day of the public comment period.

A public hearing will not be held following the publication of the proposed stage of this regulatory action.

Detail of Changes

List all regulatory changes and the consequences of the changes. Explain the new requirements and what they mean rather than merely quoting the text of the regulation. For example, describe the intent of the language and the expected impact. Describe the difference between existing requirement(s) and/or agency practice(s) and what is being proposed in this regulatory change. Use all tables that apply, but delete inapplicable tables.

Table 2: Promulgating New VAC Chapter(s) without Repeal and Replace

New chapter-section number	New requirements to be added to VAC	Other regulations and laws that apply	Change, intent, rationale, and likely impact of new requirements
12VAC35-272-10. Definitions.	Definitions required to implement the new Residential and Inpatient service specific chapter.		Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-30. License required.	Residential and Inpatient licenses required by the Department of Behavioral Health and Developmental Services to provide services within the Commonwealth of Virginia.		Listing of license types necessary to provide residential and inpatient services within the Commonwealth of Virginia. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where

			appropriate for specific provider types.
12VAC35-272-30. Service descriptions.	Listing of service descriptions of residential and inpatient services within the Commonwealth of Virginia.		Listing of service descriptions of residential and inpatient services within the Commonwealth of Virginia. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-40. Screening.	Listing of screening requirements for residential and inpatient services. Screenings will determine if an individual may be appropriate for the provider's service and assessment or referral to other services.		Listing of screening requirements for residential and inpatient services. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-50. Assessment	Listing of assessments for residential and inpatient services. Assessments determine whether the individual qualifies for admission and to initiate an ISP.		Listing of assessment requirements for residential and inpatient services. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-60. Individualized services plan (ISP); service planning	The timeline requirements for ISPs as well as requirements to ensure that individuals are provided informed choice.		Listing of service planning requirements for residential and inpatient services. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-70. ISP minimum requirements.	The minimum requirements for residential and inpatient ISPs. This section		Listing of minimum requirements for residential and inpatient ISPs.

	includes the requirements for both initial and comprehensive ISPs.		Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-80. Reassessments and quarterly ISP reviews.	Reassessment requirements as well as quarterly ISP requirements which documents the individual's progress, the section includes the required elements of the quarterly ISP review.		Listing of reassessment and quarterly ISP requirements. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-90. Progress notes.	Lists the minimum requirements of residential and inpatient service progress notes.		Lists the minimum requirements of residential and inpatient service progress notes. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-100. Discharge planning.	Provides additional requirements for residential and inpatient services regarding discharge planning.		Provides additional requirements for residential and inpatient services regarding discharge planning. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-110. Emergency preparedness and response plan.	Lays out the required elements of the provider's written emergency preparedness and response plan, evacuation plan, written communication plan, continuity of operations plan, emergency food supplies and annual		Lays out the required elements of the provider's written emergency preparedness and response plan, evacuation plan, written communication plan, continuity of operations plan, emergency food supply and annual emergency

	emergency preparedness and response training.		preparedness and response training. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-120. Health care policy.	Lays out the minimum requirements of residential and inpatient provider's health care policies.		Lays out the minimum requirements of residential and inaptient provider's health care policies. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-130. Crisis or emergency interventions; required elements.	Requires that the provider have a policy regarding prompt intervention in the event of a crisis. Includes the minimum requirements of those policies and procedures.		Requires that the provider have a policy regarding prompt intervention in the event of a crisis. Includes the minimum requirements of those policies and procedures. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-140. Staffing	Provides the minimum staffing requirements for all residential and inpatient services.		Provides the minimum staffing requirements for all residential and inpatient services. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-150. Provider staffing plan.	Lays out the additional requirements of the		Lays out the additional requirements of the inpatient

	inpatient and residential provider's staffing plan.		and residential provider's staffing plan. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-160. Nutrition	Minimum requirements for providers regarding food services.		Minimum requirements for regarding for providers regarding food services. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-170. Food service inspections.	Requires that inpatient and residential service providers request inspection and obtain approval by state and local health authorities.		Requires that inpatient and residential service providers request inspection and obtain approval by state and local health authorities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-180. Community participation and relationships.	Requires providers to give individuals served opportunities to participate in community activities.		Requires providers to give individuals served opportunities to participate in community activities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC035-272-190. Medication errors and drug reactions.	Lists the requirements the provider must follow in the event of a medication error or adverse drug reaction.		Lists the requirements the provider must follow in the event of a medication error or adverse drug reaction.

			Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-200. Reserved			
12VAC35-272-210. Physical examination	Lays out the requirements of physical examinations of individuals within an inpatient and residential setting.		Lays out the requirements of physical examinations of individuals within an inpatient and residential setting. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-220. Seclusion, restraint, and time out.	Lays out the requirements regarding seclusion, restraint and time out in an inpatient and residential setting.		Lays out the requirements regarding seclusion, restraint and time out in an inpatient and residential setting. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-230. Requirements for a seclusion room.	Provides minimum requirements for seclusion rooms within an inpatient and residential setting.		Provides minimum requirements for seclusion rooms within an inpatient and residential setting. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-240. Medication-assisted treatment.	Makes clear that medication assisted treatment providers must also comply with the MAT regulations located within		Makes clear that medication assisted treatment providers must also comply with the MAT regulations located within the Center Based Chapter.

	the Center Based Chapter.		Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-250. Security of residential hazards.	Lays out minimum standards regarding the security of residential hazards included those related to medication assisted treatment.		Lays out minimum standards regarding the security of residential hazards included those related to medication assisted treatment. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-260. Beds	Provides minimum requirements regarding beds and the care of beds.		Provides minimum requirements regarding beds and the care beds. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-270. Bedrooms	Provides the minimum requirements regarding bedrooms, including square footage requirements.		Provides the minimum requirements regarding bedrooms, including square footage requirements. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-280. Laundry areas.	Lays out the minimum standards regarding the laundry area for providers who do laundry on the premises.		Lays out the minimum standards regarding the laundry area for providers who do laundry on the premises. Intent and likely impact: Clearer regulations which

			are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-290. Computers and Internet access.	Requires that all provides give individuals access to appropriate technology at the individual's request.		Requires that all provides give individuals access to appropriate technology at the individual's request. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-300. Physical environment.	Physical environment requirements for inpatient and residential services.		Physical environment requirements for inpatient and residential services. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-310. Building inspection and classification.	Provides that all inpatient and residential service locations shall be inspected and approved by the appropriate building regulatory entity.		Provides that all inpatient and residential service locations shall be inspected and approved by the appropriate building regulatory entity. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-320. Fire inspections.	Requires that inpatient and residential providers are maintained in accordance with the Statewide Fire Code.	13VAC5-52.	Requires that inpatient and residential providers are maintained in accordance with the Statewide Fire Code. Intent and likely impact: Clearer regulations which are more accessible and understandable while

			allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-330. Building and grounds.	Additional physical environment requirements for inpatient and residential services specific to the building and grounds.		Additional physical environment requirements for inpatient and residential services specific to the building and grounds. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-340. Building and modifications.	Requirements related to building modifications.		Requirements related to building modifications. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-350. Reserved			
12VAC35-272-360. Sewer and water inspections.	Requirements related to water and sewage systems for inpatient and residential services, including water testing.		Requirements related to water and sewage systems for inpatient and residential services, including water testing. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-370. Interstate compact on the placement of children.	Requires the documentation required by the Virginia Interstate Compact on the Placement of Children at the Department of Social Services.		Requires the documentation required by the Virginia Interstate Compact on the Placement of Children at the Department of Social Services. Intent and likely impact: Clearer regulations which are more accessible and understandable while

			allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-380. Admission procedures.	Lists the minimum requirements regarding admission procedures for children's residential providers.		Lists the minimum requirements regarding admission procedures for children's residential providers. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-390. Types of admission	Lists the types of admissions that children's residential providers may accept and lists the requirements for providers accepting emergency or self-admissions.		Lists the types of admissions that children's residential providers may accept and lists the requirements for providers accepting emergency or self-admissions. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-400. Application for admission.	Lays out the requirements regarding the application for admission for children's residential providers.		Lays out the requirements regarding the application for admission for children's residential providers. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-410. Written placement agreement.	Lays out the requirements for written placement agreements within children's residential providers.		Lays out the requirements for written placement agreements within children's residential providers. Intent and likely impact: Clearer regulations which are more accessible and understandable while

			allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-420. Transfer between residential facilities located in Virginia and operated by the same provider.	Provides the requirements when a provider transfers an individual between two residential facilities located in Virginia if the provider operates both facilities.		Provides the requirements when a provider transfers an individual between two residential facilities located in Virginia if the provider operates both facilities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-430. Facilities that serve individuals over 17 years of age.	Clarifies that individuals over 17 years of age must be treated as children unless otherwise approved by the department.		Clarifies that individuals over 17 years of age must be treated as children unless otherwise approved by the department. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-440. Additional requirements for facilities that serve individuals with brain injury.	Additional requirements for providers that serve individuals with brain injuries.		Additional requirements for providers that serve individuals with brain injuries. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-450. Reserved.			
12VAC35-272-460. Reserved.			
12VAC35-272-470. Reserved.			
12VAC35-272-480. Service requirements.	Lays out the requirements for the policies and procedures regarding a		Lays out the requirements for the policies and procedures regarding a

	structured program of care for individuals served within children's residential facilities.		structured program of care for individuals served within children's residential facilities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-490. Structured program of care.	Lays out the minimum requirements regarding the structured program of care within children's residential facilities.		Lays out the minimum requirements regarding the structured program of care within children's residential facilities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-500. Reserved			
12VAC35-272-510. Physical or mental health of personnel.	Provides the requirements and protections to be taken when there are indications that a staff member's physical, mental or emotional health may jeopardize the care of staff or individual's served.		Provides the requirements and protections to be taken when there are indications that a staff member's physical, mental or emotional health may jeopardize the care of staff or individual's served. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-520. Suspected child abuse or neglect.	Provides additional requirements regarding suspected child abuse or neglect for providers of children's residential services.		Provides additional requirements regarding suspected child abuse or neglect for providers of children's residential services. Intent and likely impact: Clearer regulations which are more accessible and

			understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-530. Staff quarters.	Minimum requirements regarding staff quarters for providers of children's residential services.		Minimum requirements regarding staff quarters for providers of children's residential services. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-540. Searches.	Provides minimum requirements regarding searches and pat downs.		Provides minimum requirements regarding searches and pat downs. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-550. Behavioral support.	Requires that providers of children's residential services development and implement behavioral support plans, this section provides the timeline and required elements of the behavioral support plan.		Requires that providers of children's residential services development and implement behavioral support plans, this section provides the timeline and required elements of the behavioral support plan. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-560. Time out.	Provides the minimum requirements regarding the policies and procedures governing time out within children's residential facilities.		Provides the minimum requirements regarding the policies and procedures governing time out within children's residential facilities. Intent and likely impact: Clearer regulations which

			are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-570. Case management services.	Provides the minimum requirements for case management services within children's residential facilities.		Provides the minimum requirements for case management services within children's residential facilities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-580. Education	Provides the minimum requirements regarding education within children's residential facilities.		Provides the minimum requirements regarding education within children's residential facilities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-590. Recreation.	Provides the minimum requirements regarding recreation within children's residential facilities.		Provides the minimum requirements regarding recreation within children's residential facilities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-600. Clothing.	Minimum requirements regarding clothing within children's residential facilities.		Minimum requirements regarding clothing within children's residential facilities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide

			more detail where appropriate for specific provider types.
12VAC35-272-610. Allowances and spending money.	Minimum requirements regarding allowances and spending money within children's residential facilities.		Minimum requirements regarding allowances and spending money within children's residential facilities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-620. Work and employment.	Minimum requirements regarding chores, work and other employment within children's residential facilities.		Minimum requirements regarding chores, work and other employment within children's residential facilities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-630. Reserved.			
12VAC35-272-640. Prohibited acts.	Lists those acts which are prohibited within children's residential facilities.		Lists those acts which are prohibited within children's residential facilities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-650. Discharge.	Additional requirements regarding discharge for children's residential facilities.		Additional requirements regarding discharge for children's residential facilities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where

			appropriate for specific provider types.
12VAC35-272-660. Placement of individuals outside the facility.	Prohibits placing individuals outside the facility prior to the facility obtaining a license from the Department of Social Services as a child-placing agency.		Prohibits placing individuals outside the facility prior to the facility obtaining a license from the Department of Social Services as a child-placing agency. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-670. Additional physical environment requirements.	Additional physical environment requirements for children's residential facilities.		Additional physical environment requirements for children's residential facilities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-680. Clinical and security coordination.	Requires correctional facilities that provide services to have methods of coordination between the facility's clinical and security employees.		Requires correctional facilities that provide services to have methods of coordination between the facility's clinical and security employees. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-690. Other requirements for correctional facilities.	Additional requirements for correctional facilities.		Additional requirements for correctional facilities. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.

12VAC35-272-700. Sponsored residential home information.	Requires providers of sponsored residential home services to maintain certain information.		Requires providers of sponsored residential home services to maintain certain information. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-710. Sponsored residential home agreements.	Requires the sponsored residential home provider maintain written agreements with residential home sponsors and lays out the requirements of those agreements.		Requires the sponsored residential home provider maintain written agreements with residential home sponsors and lays out the requirements of those agreements. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-720. Sponsor qualification and approval process.	Providers of sponsored residential homes must follow these requirements when assessing the qualifications and approving sponsors.		Providers of sponsored residential homes must follow these requirements when assessing the qualifications and approving sponsors. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-730. Supervision	Additional supervision requirements for sponsored residential homes.		Additional supervision requirements for sponsored residential homes. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.

12VAC35-272-740. Sponsored residential home service records.	Additional record requirements for sponsored residential home providers.		Additional record requirements for sponsored residential home providers. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-750. Sponsored residential home staff.	Requires that sponsored residential home providers must certify and document compliance of sponsors with staff requirements within the residential and general chapter.		Requires that sponsored residential home providers must certify and document compliance of sponsors with staff requirements within the residential and general chapter. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-760. Sponsored residential home service policies.	Additional policy and procedure requirements for providers of sponsored residential homes.		Additional policy and procedure requirements for providers of sponsored residential homes. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-770. Maximum number of beds or occupants in sponsored residential homes.	Limits the number of individuals served in a sponsored residential home to 2 and the maximum number of occupants in a sponsored residential home to 7.		Limits the number of individuals served in a sponsored residential home to 2 and the maximum number of occupants in a sponsored residential home to 7. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where

			appropriate for specific provider types.
12VAC35-272-780. Sponsored residential home services for children.	Additional requirement for sponsored residential homes serving children.		Additional requirement for sponsored residential homes serving children. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-790. Medically managed intensive inpatient program criteria.	Provides clear program requirements within medically managed intensive inpatient programs which are programs provided within an acute care inpatient setting such as an acute care hospital.		Provides clear program requirements within medically managed intensive inpatient programs which are programs provided within an acute care inpatient setting such as an acute care hospital. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-800. Medically managed intensive inpatient admission criteria.	Provides clear admission requirements within medically managed intensive inpatient programs.		Provides clear admission requirements within medically managed intensive inpatient programs. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-810. Medically managed intensive inpatient discharge criteria.	Provides clear discharge requirements within medically managed intensive inpatient programs.		Provides clear discharge requirements within medically managed intensive inpatient programs. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where

			appropriate for specific provider types.
12VAC35-272-820. Medically managed intensive inpatient co-occurring enhanced programs.	Provides additional licensing requirements for medically managed intensive inpatient programs which treat individuals with co-occurring disorders.		Provides additional licensing requirements for medically managed intensive inpatient programs which treat individuals with co-occurring disorders. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-830. Medically monitored intensive inpatient services program criteria.	Provides clear program requirements within medically monitored intensive inpatient treatment programs, which provide 24 hour care in a facility under the supervision of medical personnel providing directed evaluation, observation, and medical monitoring.		Provides clear program requirements within medically monitored intensive inpatient treatment programs, which provide 24 hour care in a facility under the supervision of medical personnel providing directed evaluation, observation, and medical monitoring. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-840. Medically monitored intensive inpatient admission criteria.	Provides clear admission requirements within medically monitored intensive inpatient programs.		Provides clear admission requirements within medically monitored intensive inpatient programs. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-850. Medically monitored intensive inpatient discharge criteria.	Provides clear discharge requirements within medically monitored intensive inpatient programs.		Provides clear discharge requirements within medically monitored intensive inpatient programs. Intent and likely impact: Clearer regulations which

			are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-860. Medically monitored intensive inpatient co-occurring enhanced programs.	Provides additional licensing requirements for medically monitored intensive inpatient programs which treat individuals with co-occurring disorders.		Provides additional licensing requirements for medically monitored intensive inpatient programs which treat individuals with co-occurring disorders. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-870. Clinically managed high-intensity residential services program criteria.	Provides clear program requirements within clinically managed high intensity residential care programs, which provide 24 hour supportive treatment. The individuals served by clinically managed high intensity residential care are individuals who are not sufficiently stable to benefit from outpatient treatment regardless of intensity of service.		Provides clear program requirements within clinically managed high intensity residential care programs, which provide 24 hour supportive treatment. The individuals served by clinically managed high intensity residential care are individuals who are not sufficiently stable to benefit from outpatient treatment regardless of intensity of service. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-880. Clinically managed high-intensity residential services admission criteria.	Provides clear admission requirements within clinically managed high-intensity residential service programs.		Provides clear admission requirements within clinically managed high-intensity residential service programs. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where

			appropriate for specific provider types.
12VAC35-272-890. Clinically managed high-intensity residential services discharge criteria.	Provides clear discharge requirements within clinically managed high-intensity residential service programs.		Provides clear discharge requirements within clinically managed high-intensity residential service programs. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-900. Clinically managed high-intensity residential services co-occurring enhanced programs.	Provides additional licensing requirements for clinically managed high-intensity residential service programs which treat individuals with co-occurring disorders.		Provides additional licensing requirements for clinically managed high-intensity residential service programs which treat individuals with co-occurring disorders. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-910. Clinically managed population-specific high-intensity residential services program criteria.	Provides clear program requirements within high intensity residential services programs, which provide a structured recovery environment in combination with high intensity clinical services provided in a manner to meet the functional limitations of the individuals served.		Provides clear program requirements within high intensity residential services programs, which provide a structured recovery environment in combination with high intensity clinical services provided in a manner to meet the functional limitations of the individuals served. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-920. Clinically managed population-specific high-intensity	Provides clear admission requirements within high intensity residential services programs.		Provides clear admission requirements within high intensity residential services programs.

residential services admission criteria			Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-930. Clinically managed population-specific high intensity residential services discharge criteria	Provides clear discharge requirements within high intensity residential services programs.		Provides clear discharge requirements within high intensity residential services programs. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-940. Clinically managed population-specific high-intensity residential services co-occurring enhanced programs.	Provides additional licensing requirements for high intensity residential services programs which treat individuals with co-occurring disorders.		Provides additional licensing requirements for high intensity residential services programs which treat individuals with co-occurring disorders. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-950. Clinically managed low-intensity residential services program criteria.	Provides clear program requirements within clinically managed low-intensity residential service programs, which provide ongoing therapeutic environment for individuals requiring some structured support.		Provides clear program requirements within clinically managed low-intensity residential service programs, which provide ongoing therapeutic environment for individuals requiring some structured support. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-960. Clinically managed low-	Provides clear admission requirements within clinically managed low-		Provides clear admission requirements within clinically

intensity residential services admission criteria.	intensity residential service programs.		managed low-intensity residential service programs. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-970. Clinically managed low-intensity residential services discharge criteria.	Provides clear discharge requirements within clinically managed low-intensity residential service programs.		Provides clear discharge requirements within clinically managed low-intensity residential service programs. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.
12VAC35-272-980. Clinically managed low-intensity residential co-occurring enhanced programs.	Provides additional licensing requirements for clinically managed low-intensity residential service programs which treat individuals with co-occurring disorders.		Provides additional licensing requirements for clinically managed low-intensity residential service programs which treat individuals with co-occurring disorders. Intent and likely impact: Clearer regulations which are more accessible and understandable while allowing space to provide more detail where appropriate for specific provider types.