

NCC AP Update: Continued Development

By Jerry Jenkins, MEd, MAC, NCC AP Immediate Past Chair

Much has been happening with the National Certification Commission for Addiction Professionals (NCC AP)! NCC AP has progressed with modernizing the scopes of practice and the materials associated with credentials, on boarding new commissioners, and preparing for a leadership change – all while monitoring national trends and collaborating nationally and internationally.

The national standards set by NCC AP reflect a consensus of the current scope of practice for each credential the NCC AP offers. I consider developing these scopes of practice the toughest, most detailed, and most important challenge for NCC AP. Scopes of practice are not static for the respective credentials. They define the core competencies a professional should be knowledgeable in and able to do. Each individual holding the respective credential is responsible for determining his or her competencies and capabilities within these scopes of practice based on training and experience.

Job Task Analysis

As detailed in previous articles, a job task analysis (JTA) was completed in 2018 for the NCAC I, NCAC II, and Master Addiction Counselor (MAC) credentials. The JTA demonstrated shifts in priorities of tasks and inclusion of new technologies, including an increased emphasis in assessment skills, assessment instruments and the areas to be assessed. Conversely, psychopharmacology shrank compared to previous JTAs.

The most recent JTA revealed the following core areas to be priorities: (1) screening and orientation to the treatment process; (2) assessment; (3) ongoing treatment planning and implementation; (4) addiction counseling practices and skills; and (5) professional practices.

These core areas further included 177 skills/knowledge areas currently considered critical for credentialed professionals. They also reflect the tenets of TAP 21, *Addiction Counseling Competencies: The Knowledge, Skills, and Attitudes of Professional Practice* published by SAMHSA and last updated in 2017 (Center for Substance Abuse Treatment, 2006).

Qualified Addiction Professional & 1115 Substance Use Disorder Waiver

Recently, I was introduced to the term Qualified Addiction Professional (QAP). The Centers for Medicare and Medicaid Services (CMS) included the term in the scope of practice literature related to the 1115 Substance Use Disorder Waiver recently approved for the Alaska waiver. It states, “Individuals presenting for any Medicaid-funded service in any setting (i.e., primary care, behavioral health care) will receive an AUDIT and a DAST. If the number of “yes” answers indicate the need for further assessment based on quantified scoring criteria, the screener will refer the Medicaid recipient to a behavioral health provider for an integrated, comprehensive clinical assessment conducted by a qualified addiction professional” (State of Alaska Department of Health and Human Services, 2018).

Who is a QAP? Alaska, for example, has defined “substance use disorder counselor” as a qualified addiction professional, and holding an NCC AP credential meets the specified criteria (State of Alaska Department of

Health and Human Services, 2019). As a result, persons can apply for the corresponding national credential once they meet the national criteria for training and experience for the level at which they tested.

The 1115 waiver process for SUD services requires the use of standards set forth by the American Society of Addiction Medicine (ASAM). In April 2017, the Medicaid Innovation Accelerator Program published “Overview of Substance Use Disorder (SUD) Care Clinical Guidelines: A Resource for States Developing SUD Delivery System Reforms.” This document established the tenets of the ASAM’s “Treatment Criteria for Addiction Substance-Related, and Co-Occurring Conditions” as the industry standard for states to use in the 1115 SUD demonstration waiver process (IAP: Medicaid Innovation Accelerator Program, 2017).

New Commissioners

Let me conclude by introducing our new Commissioners, Dr. Nancy Piotrowski, Dr. Gary Ferguson, and Michael Kemp, and NCC AP’s new Chair, Kansas Cafferty. Please visit www.naadac.org/about-the-ncc-ap to learn more about our Commissioners.

It has been a true honor to serve as the NCCAP chair for the past three years. I now hand the reins to my distinguished colleague, Kansas Cafferty. I am confident that Kansas will do a wonderful job as Commissioner.

We continue to recruit with an eye on diversity of credentials as well as experience and geography. Please visit the NCC AP website if you are interested in being considered. (www.naadac.org/about-the-ncc-ap)

Thank you for your professionalism and what you do to help people, families and communities recover from substance use disorders whether practicing in the US or somewhere else in the world.

REFERENCES

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Jerry A. Jenkins, MEd, LADAC, MAC, is the Immediate Past Chair of the National Certification Commission for Addiction Professionals (NCC AP). He has over 35 years of experience in treating substance use disorders and mental illness and has been a member of NAADAC since the late 1980s. He has worked in and managed community based, outpatient, halfway and residential treatment services. He is an advocate for recovery as the expectation for behavioral health care with an emphasis on being trauma informed and substance use disorder treatment counselors having credentials to demonstrate having specialized training, experience and skills.