

R 201254Z JUN 13
FM COMDT COGARD WASHINGTON DC//CG-112//
TO AIG 4905
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UNCLAS //N06010//

SUBJ: UPDATE TO CREDENTIALING AND PRIVILEGING OF FAMILY ADVOCACY
SPECIALISTS A. COMDT COGARD WASHINGTON DC 271545Z AUG 12/ALCOAST 389/12
B. Coast Guard Medical Manual, COMDTINST M6000.1 (series) C. Management
of Family Advocacy and Special Needs Cases, COMDTINST
1754.12 (series)

D. Coast Guard Family Advocacy Program, COMDTINST 1750.7 (series) 1. Per
REF (A) established policy for the credentialing and privileging of a
qualified Family Advocacy Specialist (FAS) located at the Health, Safety,
and Work-Life (HSWL) Regional Practice (RP) and established the
requirement that all future hires into FAS positions meet the requirements
for credentialing and privileging.

2. Privileged FASs will now come under the same privileging review
processes as described in REF (B) for other providers privileged by
Commandant (CG-112). Initial provisional privileging of qualified FASs
will be for one year. While provisionally privileged, all assessments
completed will be reviewed by the Family Advocacy Program Manager (FAPM).

3. REF (A) defined FASs being privileged as Mental Healthcare Providers.
To avoid confusion with other providers, that title is changed to Mental
Health Counselor. All requirements for privileging contained in REF A
remain the same.

4. FASs may receive requests to provide clinical services in situations
that do not involve either a Family Advocacy Program (FAP) incident, or a
concern that a FAP incident may occur, as the presenting issue. Since
this can lead to the FAS being inundated with local requests for non-FAP
related clinical services, these requests shall be referred to the
appropriate resource (e.g., CG SUPRT, Coast Guard Clinic, TRICARE network
provider, etc.) for further assessment and care instead. A privileged FAS
is not authorized to provide general behavioral health services to non-FAP
clients. All cases accepted for services must initially involve a FAP
case/action.

5. If, in the course of providing clinical services to a FAP client, it
is determined the client meets diagnostic criteria for a Diagnostic and
Statistical Manual of Mental Disorders diagnosis (e.g., personality
disorder, adjustment disorder, mood disorder, etc.), the FAS is authorized
to provide behavioral health therapeutic procedures to address the issue
in the context of providing services as part of a Family Advocacy
Treatment Plan. If the client is an active duty member, the FAS must
refer to the primary care manager of the member to ensure all medical
needs are appropriately addressed.

6. FAP records must continue to be maintained per REF (C) to ensure that
case notes and clinical information is protected, secured and maintained
separately from the medical record of the client.

7. FASs privileged as Mental Health Counselors must meet the following
additional requirements:

a. Must obtain a National Provider Identifier (NPI) Type 1, which is
assigned at no fee as described in REF B.

- b. Must be certified in Basic Cardiac Life Support (BLS) - this training can be arranged through the HSWL RP.
- 8. REFS (B) and (D) are being revised to reflect changes contained in this message.
- 9. POCs:
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- 10. CAPT Deborah R. Noyes, Chief, Office of Health Services, sends.
- 11. Internet release authorized.

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