



Recertification Application

AUDIT PROCESS

**RECERTIFICATION APPLICATION FOR ALL CERTIFIED PROFESSIONALS WHOSE
CREDENTIAL(S) EXPIRE AFTER JANUARY 1, 2020.**

298 S. Progress Avenue, Harrisburg, PA 17109
Phone: 401-349-3822 | Fax: 717-540-4458
www.ricertboard.org | info@ricertboard.org

RECERTIFICATION DIRECTIONS – READ DIRECTIONS CAREFULLY

Prior to submitting your recertification application to RICB, please review the following list to be sure you have included all the necessary documentation.

Recertification application can be submitted no sooner than three (3) months prior to the credential's expiration date.

- Completed application page. (Page 8)
- Completed education and training page. (Page 9) **Do not send copies of your certificates.**
- Recertification fee and any other applicable fees. (Page 10)

If there are any problems with the application, you will be notified by email. Keep a photocopy of the entire application for your records.

To check the status of your recertification application, you can use the Credential Search on the homepage of our website: www.ricertboard.org. Simply enter your last name and click “Apply”.

TO SUBMIT YOUR APPLICATION, CHOOSE ONE OF THE FOLLOWING:

Mail:

RICB
298 S. Progress Avenue
Harrisburg, PA 17109

Email:

info@ricertboard.org

NOTE: Only PDFs are acceptable. RICB does not accept photos of applications.

Fax:

717-540-4458

Please allow 5-10 business days for review and processing of your recertification application.

To confirm receipt of your application, or check on the status, you must email info@ricertboard.org.

RECERTIFICATION INFORMATION FOR ALL CREDENTIALS

1. Recertification record keeping is the responsibility of the certified professional. All recertification documents and application forms should be submitted together. Keep copies of everything submitted.
2. Education for recertification must be acquired no earlier than two years prior to the applicant's current expiration date.
3. Recertification is considered late if you are mailing it and it is postmarked after your expiration date. Recertification is considered late if you are submitting it electronically and it is after your expiration date. If recertification is not completed prior to the expiration date, it is considered lapsed.
4. Education not properly verified is not accepted. Proper verification (i.e. certificate, letter of attendance, transcript) must include date of training, number of hours attended, title of training, sponsoring organization, and your name.
5. Education is defined as formal, structured instruction in the form of workshops, seminars, in-services, and college/university credit courses and distance learning/online courses.

AUDITING

Documentation of continuing education is only required for to be submitted if a certified professional is randomly selected for review, or audit of their education hours. Audits occur twice per year (every March and September). Those selected for audit must submit documentation of the appropriate number of hours of education/training that they completed in the prior two-year period. Since the audit process is random, individuals may be selected for audit multiple times. Non-compliance with the required education/training for recertification is viewed as a breach of professional ethics.

DO NOT SEND IN COPIES OF YOUR CERTIFICATES OF COMPLETION FOR TRAININGS WITH YOUR RECERTIFICATION APPLICATION. THESE WILL NOT BE REVIEWED AT THE TIME OF YOUR RECERTIFICATION AND WILL BE DISCARDED.

LAPSED CREDENTIAL

A credential is valid for a two-year period. If your credential lapses, you have 12 months from your expiration date to recertify. After 12 months, you must reapply for your credential(s) and complete all the requirements for initial certification. ***To renew a lapsed credential:*** complete the recertification application with the appropriate requirements and fee(s), plus the lapsed fee of \$100.

FOR PROFESSIONALS HOLDING MULTIPLE RICB CERTIFICATIONS

If you have more than one credential, you pay the fee for your original credential plus \$50 each for all other credentials you are recertifying. If your additional credentials do not have the same expiration date as your primary credential, you will submit a second recertification application at the time they expire with the \$50 per credential recertification fee.

NAME CHANGES

If, at any time, a professional needs to change their name, documentation must be mailed, emailed or faxed to RICB. Acceptable documentation includes copies of marriage license, divorce decrees, etc. Names on certificates cannot be changed until documentation is provided. Professionals can submit the request for a name change at any time.

INACTIVE & EMERITUS STATUS

RICB has established an Inactive Status to allow certified professionals, who are experiencing extenuating circumstances, a means to put their certification on hold and avoid paying lapsed fees, retesting (if applicable) and the reapplication process. Inactive status is for certified professionals who expect to be inactive for a minimum of six months. ***Insufficient hours of continuing education will not be accepted as rationale for requesting Inactive Status.***

RICB has established an Emeritus Status for certified professionals who are retired from the work force but wish to maintain a connection to RICB.

Approval of each status is at the discretion of RICB. Applicants will be notified by RICB of the approval or denial via email approximately 7-10 business days after the request is received. For more information on Inactive and Emeritus Status, visit www.ricertboard.org and click on Recertification. More information is on the left side of the page.

INDEPENDENT STUDY & COMMUNITY INVOLVEMENT

A certified professional will be granted up to 10 hours towards recertification for Independent Study. Documentation of completion is required. A certified professional will be granted up to 10 hours towards recertification for Professional Community Involvement. Documentation of attendance is required.

EDUCATION INFORMATION

1. You can use the same education for multiple credentials under the following conditions: they are in the correct two-year time frame (example if your credential was issued on 1/1/2017 and expires on 1/1/2019, you can use education after 1/1/2017) and it is relevant to the education requirements listed for each credential.
2. College/University course: three college credits are equivalent to 45 hours. Additional hours need to be documented if the credit hours do not meet all of the education requirements for recertification.
3. Trainings, workshops, seminars, and conferences offered by professional associations, treatment providers, governmental agencies, etc.
4. RICB does not accept general staff meetings, supervision, staff rounds, or case management as education.
5. Distance learning/online courses/webinars are acceptable if they include a post-test. There is no limit to the number of distance learning/online courses that can be used.
6. Acceptable documentation of education must include the professional's name, title, date, number of hours and the organization.

EDUCATION PROVIDED BY THE CERTIFIED PROFESSIONAL

A certified professional who provides education to other professionals may receive credit toward their own recertification.

1. The presenter will receive the same number of hours as the participant; and the presentation can be used for credit once in each recertification period, provided the training has received RICB Education Approval. Training provided by a certified professional must also be documented by sponsoring organization in the same manner as participant documentation (i.e. certificate, letter of participation).
2. Published work written by the certified professional and published by a professional publishing house may meet up to 10 hours of education. A copy of the published work must be submitted along with an education approval application.

INTERNATIONAL CERTIFICATES

RICB will add a seal to your certificate indicating the International status of your certification. Original International Certificates are available for a fee directly from IC&RC at www.internationalcredentialing.org. The International Certificate provides recognition of your status as an internationally certified addiction professional. International Certificates are available to professionals who hold the following certifications: CADC, CAADC, CCS, CPS, ACPS, CPSS, CCJP, CCDP, CCDPD and CPRS.

RELEASE

I hereby request that the Rhode Island Certification Board grant the credential to me based on the following assurances and documentation:

I subscribe to and commit myself to professional conduct in keeping with the RICB Code of Ethical Conduct;

I hereby certify that the information given herein is true and complete to the best of my knowledge and belief. I also authorize any necessary investigation and the release of information relative to my certification. Falsification of any records or documents in my application will nullify this application and will result in denial or revocation of certification;

I consent to the release of information contained in my application and any other pertinent data submitted to or collected by RICB to officers, members, and staff of the aforementioned Board;

I consent to authorize RICB to gather information from third parties regarding continuing education and employment and understand that such communication shall be treated as confidential;

Allegations of ethical misconduct reported to RICB before, during, or after application for certification is made will be investigated by RICB and could result in the nullification of the application or denial or revocation of certification.

RECERTIFICATION INFORMATION: COUNSELOR & CLINICAL SUPERVISOR

For other credentials refer to the next page.

LICENSING

In order to renew your license, your CADC, CAADC and/or CCS must remain active and in good standing. Licenses are renewed in October of even years. License renewal is done through the Rhode Island Department of Health, Chemical Dependency Licensing Board. RICB does random checks throughout the year to verify those who are licensed have also renewed their certification(s). If a professional is found to be out of compliance, their name will be submitted to the Licensing Board.

EDUCATION INFORMATION

1. Three (3) hours in professional ethics and responsibilities as part of the total education hours. Acceptable trainings that would meet this requirement include but are not limited to: ethics related to human services, HIPAA, confidentiality, boundaries, mental health law and mandated child abuse reporting.
2. RICB accepts education received outside of Rhode Island under the following conditions:
 - a. Appropriate documentation (certificate, letter of attendance, transcript) is provided.
 - b. If an out-of-state education was approved by an IC&RC member board of that state, no further RICB approval is necessary. Proof of the IC&RC member board approval must be submitted. If these conditions were not met, the certified professional must seek RICB education approval.

REQUIREMENTS AND FEES

COUNSELOR & CLINICAL SUPERVISOR		
Name	Fee	Education Requirement
CADC (formerly ACDP)	\$150	40 hours including 30 hours that are substance use specific and 3 hours in ethics
CAADC (formerly ACDP II)	\$150	40 hours including 30 hours that are substance use specific and 3 hours in ethics
CCS (formerly CDCS)	\$150	6 hours specific to clinical supervision

RECERTIFICATION INFORMATION: ALL OTHER CREDENTIALS

EDUCATION INFORMATION

1. Three (3) hours in professional ethics and responsibilities as part of the total education hours. EXCEPT for the CPRS which requires six (6) hours in ethics. Acceptable trainings that would meet this requirement include but are not limited to: ethics related to human services, HIPAA, confidentiality, boundaries, mental health law and mandated child abuse reporting.
2. RICB accepts education received outside of Rhode Island under the following conditions:
 - a. Appropriate documentation (certificate, letter of attendance, transcript) is provided.
 - b. If an out-of-state education was approved by an IC&RC member board of that state, no further RICB approval is necessary. Proof of the IC&RC member board approval must be submitted. If these conditions were not met, the certified professional must seek RICB education approval.

REQUIREMENTS AND FEES

STUDENT ASSISTANCE, CRIMINAL JUSTICE & CO-OCCURRING		
Name	Fee	Education Requirement
SAC	\$150	40 hours including 30 hours substance abuse specific and 3 hours in ethics
CCJP	\$150	40 hours including 15 hours specific to substance use, 15 hours specific to criminal justice and 3 hours in ethics
CCDP & CCDPD	\$150	40 hours including 20 hours specific to co-occurring disorders and 3 hours in ethics

PREVENTION		
Name	Fee	Education Requirement
CPS	\$150	40 hours including 30 hours specific to prevention and 3 hours in ethics
ACPS	\$150	40 hours including 30 hours specific to prevention and 3 hours in ethics
CPSS	\$150	40 hours including 30 hours specific to prevention and 3 hours in ethics

PEER RECOVERY & COMMUNITY HEALTH		
Name	Fee	Education Requirement
CPRS	\$75	20 hours relevant to peer recovery including 6 hours in ethics
CCHW	\$75	20 hours relevant to community health including 3 hours in ethics

ENDORSEMENTS		
Name	Fee	Education Requirement
Certificate of Competency in Problem Gambling	\$50	6 hours specific to gambling. Must be recertified at the same time as your qualifying credential.
HIV Specialty Endorsement	\$50	6 hours relevant to HIV. Must be recertified at the same time as your qualifying credential.
Specialty in Cardiovascular Health & Diabetes	\$50	6 hours relevant to Cardiovascular Health & Diabetes. Must be recertified at the same time as your CCHW.

RECERTIFICATION APPLICATION: FOR ALL CREDENTIALS

Form can be completed and saved. You may then print the appropriate pages to submit to RICB.

TYPE OR PRINT LEGIBLY

RICB CERTIFICATION(S) I AM RECERTIFYING (CHECK ALL THAT APPLY):

Counselor & Clinical Supervisor: CADC CAADC CCS

Student Assistance, Criminal Justice & Co-Occurring: SAC CCJP CCDP CCDPD

Peer Recovery & Community Health: CPRS CCHW

Prevention: CPS ACPS CPSS

Endorsements: HIV Specialty Gambling Endorsement Specialty in Cardiovascular Health & Diabetes

Date: _____ DOB: _____ Male Female Self-identify _____

Name: _____ SSN: (last four) _____

Print your name as it should appear on your certificate. Credentials and degrees will not be printed.

Home Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Email: _____

EMPLOYMENT INFORMATION *Note: you do not need to be employed to recertify.*

Position/Title: _____ Employer: _____

Employer City: _____ Zip: _____

Work Phone: _____ Ext: _____

1. Have you ever received any disciplinary action from another certification or licensing authority since your last recertification? Yes No *If yes, provide full details on a separate sheet.*
2. Have you read and understood the RICB Code of Ethical Conduct? Yes No
The Code of Ethical Conduct is located at www.ricertboard.org, and click on Ethics.
3. Have you read and understood the Release? Yes No *Located on page 5 of this application.*
4. Have you read and understood the Auditing process (page 3)? Yes No

Military Experience: Not Applicable Active Veteran

Ethnicity: American Indian or Alaska Native Asian Black or African American Caucasian
 Hispanic Latino Native Hawaiian or Other Pacific Islander Not specified: _____

What are your employment plans for the next two years? Increase Hours Decrease Hours
 No Change Seek Advancement Retire Move to a different career Unknown

EDUCATION & TRAINING

Candidates for recertification must list below all trainings attended in the two-year recertification period. Recertification applications will not be approved without completion of the list. Photocopy this page if more room is needed. If the organization or state agency from whom you received your trainings provide transcripts that lists your name, dates of trainings, titles and number of hours, you may submit that documentation in lieu of this form.

Title: _____ Hours: _____

Provider: _____ Date: _____

Title: _____ Hours: _____

Provider: _____ Date: _____

Title: _____ Hours: _____

Provider: _____ Date: _____

Title: _____ Hours: _____

Provider: _____ Date: _____

Title: _____ Hours: _____

Provider: _____ Date: _____

Title: _____ Hours: _____

Provider: _____ Date: _____

Title: _____ Hours: _____

Provider: _____ Date: _____

Title: _____ Hours: _____

Provider: _____ Date: _____

Title: _____ Hours: _____

Provider: _____ Date: _____

Title: _____ Hours: _____

Provider: _____ Date: _____

TOTAL NUMBER OF HOURS: _____

I have attended all trainings listed above and will provide documentation of attendance if audited.

Applicant Signature

RECERTIFICATION PAYMENT INFORMATION

Payment in full must be made before recertification of a credential will be approved.

To determine your fee when you have multiple credentials: look at your RICB certificates and find your issue date. The credential you earned first, is your primary credential. Find the fee for that credential below. You will pay that fee, plus \$50 for each subsequent credential you hold.

FEE CHECKLIST

Has your certification(s) lapsed? Yes No

If yes, fill in an additional \$100 lapsed fee in the space provided below.

Recertification of primary credential: \$ _____
(See Credentials table to the right for fee.)

Recertification of additional credential: \$ _____
(\$50/additional credential if applicable.)

Lapsed \$100 fee: \$ _____
(If you checked yes to the above question, fill in the fee here.)

TOTAL: \$ _____

CREDENTIALS	
CADC	\$150
CAADC	\$150
CCS	\$150
SAC	\$150
CCJP	\$150
CCDP & CCDPD	\$150
CPS	\$150
ACPS	\$150
CPSS	\$150
CPRS	\$75
CCHW	\$75
Certificate of Competency in Problem Gambling	\$50
HIV Specialty Endorsement	\$50
Specialty in Cardiovascular Health & Diabetes	\$50

Payment (check one): Check Money Order VISA MasterCard Discover American Express
Checks & Money Orders made payable to RICB

Number: _____ - _____ - _____ - _____

Sec. Code: _____ Exp. Date: _____ Name on Card: _____

Billing address: _____
(If different than Home Address)

Email address for receipt *(if paying by credit card only):* _____

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