

October 2018 Collaborative Rule Making Meeting

Introductions and Basic Overview

- ❖ Process
- ❖ Function of Regional Staff
- ❖ Overview of Last Meeting
- ❖ Intervention Service Definitions (16.03.09)
- ❖ Not in Chronological Order
- ❖ "Department Approved"

Ground Rules

- ▶ Avoid repeat questions
- ▶ Everyone has a right to be heard
- ▶ Strive for solution focused comments
- ▶ Be specific
- ▶ Be respectful
- ▶ Not every comment will be responded to today but they will be responded to and posted to web

16.03.09.570.

CHILDREN'S HABILITATION INTERVENTION SERVICES.

- ▶ 570. Children's habilitation intervention services are medically necessary, evidence-based or evidence-informed therapeutic techniques based on applied behavioral analysis principles used to result in positive outcomes. These intervention services are delivered directly to Medicaid eligible participants with identified developmental limitations that impact the participant's functional skills and behaviors across an array of developmental domains.

16.03.09.572.

CHILDREN'S HABILITATION INTERVENTION SERVICES: ELIGIBILITY REQUIREMENTS.

- ▶ 01. Medicaid Eligibility. Individuals must be eligible for Medicaid and the service for which the habilitation intervention provider is seeking reimbursement;
- ▶ 02. Age of Participants. Participants eligible to receive children's habilitation intervention services must be birth to twenty-one (21) years of age (through the month of their birthday).
- ▶ 03. Eligibility Determination.

16.03.09.572.03. Eligibility Determination.

- ▶ 03. Individuals eligible to receive habilitation intervention services must have identified functional and/or behavioral needs that require intervention services. These needs are determined through a Department-approved screening tool that is conducted by the family's chosen-habilitation intervention provider and is administered in accordance with the protocol of the tool. If the individual has a current screening tool that has already been completed within the last 364 days by the Department or its designee, an additional screening is not required. The following criteria applies;
 - ▶ a. A need is determined by the screening tool if a deficit is identified in three (3) or more of the following areas: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, or economic self-sufficiency;
 - ▶ b. A deficit is defined as two (2) or more standard deviations below the mean for all categories with the exception of maladaptive behavior. For maladaptive behavior, a deficit is defined as two (2) or more standard deviations above the mean.

Department Approved Screening Tool For Children's Habilitation Intervention Services

SCREENING TOOL

- Vineland-3



Submit Comments Now

Evidence Based & Evidence Informed Draft Definitions

- ▶ Evidence Based: Defined as interventions that have been scientifically researched and reviewed in peer reviewed journals, replicated successfully by multiple independent investigators, have been shown to produce measurable and substantiated beneficial outcomes, and are delivered with fidelity by credentialed individuals trained in the evidence based model.
- ▶ Evidence Informed: Uses elements or components of evidence based techniques does not adhere to a single defined evidence based model.

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16.03.09.573.04.

CHILDREN'S HABILITATION INTERVENTION SERVICES: COVERAGE AND LIMITATIONS.

► 04.Services.

All habilitation intervention services recommended on an individual's clinical assessment and treatment plan must be prior authorized by the Department or its contractor. The following habilitation intervention services are available for eligible individuals and are reimbursable services when provided in accordance with these rules:

16.03.09.573.04.a. Habilitative Skill.

- ▶ a. Habilitative Skill. This direct intervention service includes techniques used to develop, improve and maintain, to the maximum extent possible, the developmentally appropriate functional abilities and daily living skills needed by an individual. Intervention services include teaching and coordinating methods of training with family members caring for the eligible individual. Services include individual or group interventions.

16.03.09.573.04.a. Habilitative Skills Continued

- ▶ i. Group services must be provided by one (1) qualified staff providing direct services for a maximum of three (3) individuals.
- ▶ ii. As the number and needs of the individuals increase, the staff-to-individual ratio must be adjusted accordingly.
- ▶ iii. Group services should only be delivered when the individual's goals relate to benefiting from group interaction.

16.03.09.573.04.b. Behavioral Intervention.

- ▶ b. Behavioral Intervention. This service utilizes direct intervention techniques used to produce positive meaningful changes in behavior that incorporate replacement behaviors and reinforcement-based strategies. These services are provided to participants who exhibit interfering behaviors that impact the independence or abilities of the individual, such as impaired social skills and communication or destructive behaviors. Intervention services include teaching and coordinating methods of training with family members caring for the eligible child. Evidence-based or evidence-informed practices are used to promote positive behaviors and learning while reducing interfering behaviors and developing behavioral self-regulation. Services include individual or group behavioral interventions.

16.03.09573.04.b.

Behavioral Intervention Continued

- i. Group services must be provided by one (1) qualified staff providing direct services for a maximum of three (3) individuals
- ii. As the number and severity of the individuals with behavioral issues increases, the staff-to-individual ratio must be adjusted accordingly.
- iii. Group services should only be delivered when the individual's goals relate to benefiting from group interaction.

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16.03.09.573.04.c. Behavioral Consultation.

- ▶ c. Behavioral Consultation. Behavioral consultation assists other service professionals by consulting with the IEP team during the assessment process, performing advanced assessments, coordinating the implementation of the behavior implementation plan and providing ongoing training to the behavioral interventionist and other team members.
- ▶ i. Behavioral consultation cannot be provided as a direct intervention service.
- ▶ ii. Behavioral consultation must be limited to thirty-six (36) hours per student per year.

16.03.09.573.04.d. Interdisciplinary Training.

- ▶ d. Interdisciplinary Training. This is a companion service to behavioral intervention and is delivered by a specialist or professional. This service is used during the provision of professional service delivery with the individual present to assist the direct service provider in delivering the service in a manner that meets the individual's needs. This service is intended to be utilized for collaboration between the intervention professional and a Speech Language and Hearing Professional (SLP), Physical Therapist (PT), Occupational Therapist (OT), teacher, medical professional, or behavioral health professional. Interdisciplinary Training is used to assist with implementing an individual's health and medication monitoring, positioning and physical transferring, use of assistive equipment, and intervention techniques.

16.03.09.573.04.e. Crisis Intervention.

- ▶ e. Crisis Intervention. This service is defined as an unanticipated event, circumstance, of life situation that places an individual at risk of at least one of the following:
 - ▶ i. Hospitalization;
 - ▶ ii. Risk of out of home placement;
 - ▶ iii. Incarceration; or
 - ▶ iv. Physical harm to self or others, including a family altercation or psychiatric relapse.

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573.05 Clinical Assessment and Treatment Plan

- ▶ 05. Clinical Assessment and Treatment Plan. This service includes the comprehensive work of a clinical assessment and documentation of developmental objectives and strategies that address the individual's identified goals. The clinical assessment and treatment plan must contain the following minimum standards as outlined in the Idaho Medicaid Handbook:

Clinical Assessment and Treatment Plan Continue

- ▶ a. Participant demographic information;
- ▶ b. Clinical interview(s) with parent/decision making authority and direct caregiver;
- ▶ c. Administration of a current objective, validated behavioral assessment instrument approved by the Department;
- ▶ d. Review of assessments, reports, and relevant history;
- ▶ e. Observation(s) in more than one environment;
- ▶ f. Reinforcement inventory and preference assessment;
- ▶ g. Treatment plan including baseline data, and goals and behaviorally-stated measurable objectives; instructions to staff;
- ▶ h. Plan for parent/caregiver training;
- ▶ i. Transition plan;
- ▶ j. List of all services to be provided and who will provide them;
- ▶ k. Settings where services will be delivered; and
- ▶ l. Recommendations for frequency of service(s) in accordance with the Service Hours Recommendation Checklist.

16.03.09.573.05

Advanced Assessment.

- ▶ 06. Advanced Assessment. When an individual's complex needs require an advanced professional opinion, this assessment is requested for prior authorization. An advanced assessment supplements the current clinical treatment plan to provide additional detailed information needed to address an individual's increased level of need. This assessment must include a Functional Behavioral Assessment and additional observations in multiple environments, clinical interviews, and assessment tools. If an increased number of hours are recommended, additional goals or objectives are required to support the recommendation.

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16.03.09.573.05

Evidence-Based Model Supervision.

- ▶ 07. Evidence-Based Model Supervision. Evidence-based model (EBM) supervision is the clinical direction and oversight provided by the EBM professional to an EBM specialist or an EBM paraprofessional certified/credentialed within the same evidence-based model regarding the provision of services to an individual. Specifically:
 - ▶ a. The EBM professional delivers face-to-face observation and direction to the EBM specialist or the EBM paraprofessional provider regarding developmental and behavioral techniques, progress measurement, data collection, function of behaviors, and generalization of acquired skills for an individual.
 - ▶ b. This service is for the direct benefit of the individual and provides a real-time response to the intervention to maximize the benefit for the individual. It also informs of any modification needed to the methods to be implemented to support the accomplishment of behavioral outcomes in the plan of care in accordance with the EBM supervision requirements.

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