Service Code: **AFC**

Service Name: **DSPD Adult Foster Care**

Contract Type: No contract allowed for this service

Residential: No

Creation Date: 1/24/2001

Obsolete Date:

DSPD

Description:

AFC provides an adult with disabilities with the opportunity to reside in a small residential setting/atmosphere where they can develop independent living skills.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Daily	Standard	$7.31

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
SG	SELF DETERM NON-MEDICAID

Service Code: **APP** ***Creation Date:*** 1/24/2001

Service Name: **Authorized Psychological Payment** ***Obsolete Date:***

Contract Type: Either a non-fixed or fixed amount contract required DSPD

Residential: No

Description:

APP allows Psychologists to perform Eligibility Evaluations, and Court Ordered Evaluations (including Exception from Death Penalty Evaluations) for criminal defendants for the purpose of determining competency pursuant to Utah Law, and for court appearances and testimony as requested or required.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Session	Standard	$792.74
Quarter hour	Standard	$16.52
Personal Need	Standard	$1,651.54
Hourly	Standard	$66.06

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
PG	NON-MEDICAID ASSISTANCE
SG	SELF DETERM NON-MEDICAID

Service Code

Contractor Qualifications

The Contractor must have a doctorate from an accredited college or university, must be licensed as a Psychologist, and must have prior experience (at least 3 years) in mental health assessment and evaluation and specific experience (at least one year) in the assessment and diagnosis of mental retardation. Experience in forensic evaluations is desired. The contractor must be familiar with, understand and focus on the relevant leagl issues pertaining to the oarticular type of evaluation ordered by the court. Contractors may also be reauired to provide testimony in court when so directed.

Other

General Description: Contractors will be conducting various court ordered evaluations of defendants pursuant to the requirements of Utah Law and include a clinical opinion that addresses the type of evaluation ordered and provides the court with a conclusion as to whether or not the defendant meets the criteria established by the statute

Service Requirements: Evaluations are completed on defendants ordered to the DHS/DSPD by the district courts. The evaluations are completed in a timely fashion with results made available to the court, prosecuting attorney, defense attorney, and DHS/DSPD in writing per the law. Individuals performing evaluations under contract by DHS/DSPD may have to appear in court when so directed by the court.

Outcome Requirements

Evaluations completed on defendants ordered to DHS/DSPD by the district courts will be completed in a timely fashion with results made available to the court, the prosecuting attorney, and DHS/DSPD in writing within the time frames established by law. The evaluations will include a clinical opinion that addresses they type of evaluation ordered and provides the court with a conclusion as to whether the defandant meets the criteria established by the statute. Individuals performing the evaluations may have to appear in court when so directed by the cvourt.

Population Served

Eligilibility Evaluations: Persons over six years of age, referred for assessment who may have mental retardation or similar developmental disabilities and who may require the level of care provided in a nursing facility (according to Utah Administrative Rule R414-502-3). For children six years or younger, a developmental assessment will be requested.

Reference: Eligibility and Intake for Developmental Disability Supports: DHS/DSPD Policy 2-1, Utah Code 62a-5-101, Rule R539-1-1 and R539-1-2.

Court Ordered Evaluations: Defendants for whom an evaluation(s) has been ordered by a district court. Defendants may be housed in a community jail, a regional correctional facilitie, the Utah State Hospital, the Utah State Development Center, or

Staff to Client Ratios

Psychologocal evaluations will be on a one to one (1:1) basis, a parent or guardian may be present as applicable or

Staff Training

All contractors aned staff will be required to attend mandatory training when the need is determined by DHS?DSPD

Rate

Various evaluations, depending on the need will be administered. Estimates are for six to nine hours for the basic psychological compentency to stand trial evaluation, the psychological restoration evaluation of compentancy to stand trial, and psychological evaluation of diminished capacity at the time of the crime. Estimates of eight to twelve hours for the psychological evaluation for compentancy in a capital crime or death penality situation. Hours may vary but those in excess of the above estimates must be pre-approved by the DSPD Region Director.

Eligilibility evaluations Hourly	$60.00 per Hour.
Court appearances:	One quarter of hourly rate.

Service Code: **BC1** ***Creation Date:*** 3/13/2006

Service Name: **Behavior Consultation Service I** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

BC1 provides services to people whose behavior problems may be emerging, annoying, worrisome, objectionable, singular but not dangerous, and may interfere with learning or social relationships. Behavior Consultation services provide individually designed one-on-one interventions to replace the person's targeted behaviors with socially acceptable appropriate behaviors that increase the person?s ability to be integrated into the community.

USSDS Rates as of 12/23/2008

Unit	***Rate Type***	***Rate***
Quarter hour	Standard	$5.42

Service Eligibility

Eligibilit	***Description***
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:

Behavior Consultation I (BC1) services provide individually designed one-on-one interventions to replace the person's targeted behaviors with socially acceptable appropriate behaviors that increase the person?s ability to be integrated into the community. BC1?s provide services to people whose behavior problems may be emerging, annoying, worrisome, objectionable, singular but not dangerous, and may interfere with learning or social relationships. BC1?s provide individualized behavior consultation to families and/or staff who support people with non-serious behavior problems. The behaviors of the person shall not constitute an impending crisis, nor shall they be assessed as constituting a serious problem. BC1 services shall be based upon positive behavior supports. BC1 services include complete functional behavior assessment of the targeted behaviors, development of a behavior support plan, monitoring the implementation of plan, training of caregivers and support staff and periodic reassessment of the plan. Services are provided at the person's home or in the community. Contractor receives referrals for BC1 services through the DSPD Behavior Consultant Coordinator or designated region staff.

Behavior Supports

1. Behavioral intervention procedures shall be in accordance with DHS/DSPD Administrative Code R539-4 a copy of which can be found at: http://www.rules.utah.gov/publicat/code/r539/r539-004.htm.
2. All Behavior Support Plans shall emphasize a positive approach with effective treatment designed to acquire and maintain adaptive behaviors and prevent problem behaviors.
3. Written Behavior Support Plans shall include the following information:
   a. A summary of the Functional Behavioral Assessment:
      i. Describing the problem behavior.
      ii. Predicting the circumstances in which the problem behavior is most likely to occur.
      iii. Identifying the function of the problem behavior.
   b. Baseline data.
   c. Behavioral objective written in measurable and observable terms.
   d. Behavioral intervention procedures clearly written in detail to ensure consistent implementation by staff/supporters addressing the following areas:
      i. Prevention procedures designed to decrease the need for the problem behavior.
      ii. Planned responses and consequences for when the problem behavior occurs -- this includes safety issues and efforts to minimize reinforcement for the problem behavior.
      iii. Teaching or increasing replacement behaviors.
      iv. When appropriate, the Behavior Support Plan shall also address generalization, maintenance, and fading procedures.
   e. When Level II and Level III intrusive procedures are used, include a rationale for the use of intrusive procedures and a plan to discontinue the intrusive intervention over time. (See Administrative Code R539-4-1-3 definitions.)

f. Name and title of the Contractor/Employee who developed the Behavior Support Plan and name of the employee(s) responsible for supervising the implementation of the plan.
g. Data collection procedures that measure progress toward the objective.
h. Dates for review and program revisions in addition to required monthly summary.
i. Graphed data of the primary problem behavior(s) updated at least every 3 months for visual analysis.
j. The written approved Behavior Support Plan shall be available to all persons involved in implementing or supervising the Plan.

Eligibility Description

BG SPINAL CHORD GENERAL FUND
SG SELF DETERM NON-MEDICAID
SM WAIVER_MEDICAID

Population Served

The person shall be found eligible under the DHS/DSPD eligibility criteria and shall be receiving other services or shall be on the DHS/DSPD waiting list. All persons served shall have special behavioral needs such as aggression, self-injurious, property destruction, non-compliance, eating and toileting problems. BC1 shall focus on people with mental retardation or related condition or on adults with brain injury. BC1 services may be provided at the person?s home, a programmatic setting, or other naturally occurring environment in the community.

Contractor Qualifications

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training. Contractor must be certified by DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm.

Contractor shall have all applicable licenses or certifications as prescribed in Utah Administrative Code R501 found at http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

Staff Qualifications

BC1 staff must agree to be actively engaged in training provided by DHS/DSPD in positive behavioral supports and possess a Bachelors degree in a related field and any combination of training and experience of at least one year?s length working with people who have mental retardation, related conditions or adults with brain injury. Staff shall successfully complete a training course in the provision of positive behavioral supports prescribed by DSPD and approved by the State Medicaid Agency and shall successfully pass a learning assessment at the conclusion of the course.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record as required by Utah Administrative Code R501-14. http://rules.utah.gov/publicat/code/r501/r501-14.htm.

Staff to Person Ratios

Behavioral Consultation shall be one to one (1:1) service.

Record Keeping and Written Documentation

In order to assure the person?s needs are being met and to assist DHS/DSPD in its efforts to evaluate the effectiveness of services, a copy of the following information shall be forwarded to DHS/DSPD within 30 days of its completion and shall be kept on file by the contractor:

1. Functional Behavior Assessment
2. Behavior Support Plan
3. Follow-up Summary/Evaluation
4. Monthly summaries of the BC1 services

In order to document the provision of BC1 services, the contractor shall develop and maintain sufficient written documentation to support the following:

1. Number of hours worked and activity;
2. Applicable licensure and certification;
3. Documentation of training(s) provided with topic, dates, names of attendees; and,
4. An approved referral as indicated on DHS/DSPD Form 1056 in the case of those receiving supports from DHS/DSPD, and on an alternative written document in the case of those awaiting services that assures compliance with DHS/DSPD

eligibility requirements and can be compared with invoices.

Individual Assessment and Treatment Plan

1. Behavior Supports
Contractor shall maintain written documentation and shall comply with Administrative Code R539-4. http://rules.utah.gov/publicat/code/r539/r539.htm.
2. Support Plans Objectives and Outcomes
The Contractor shall be expected to establish individual objectives and track outcomes. DHS/DSPD defines a successful outcome for these services as a decrease in the behavior problem being addressed and the maintenance or increase in the frequency of occurrence of the replacement behavior.

Limitations:

1. Services provided by the Contractor cannot duplicate other supports and services available to the person. In addition, they must be cost efficient and demonstrate effectiveness for the intended use.
2. Contractor may not provide direct care for persons or transport persons for whom they are simultaneously providing behavioral consultation.
3. Behavior Support Plans developed by the Contractor are prohibited from including any of the following:
   a. Corporal punishment, examples: slapping, hitting, and pinching;
   b. Demeaning speech to a person that ridicules or is abusive;
   c. Seclusion -- defined as locked confinement in a room;
   d. Use of electric devices or other painful stimuli to manage behavior;
   e. Denial or restriction of access to assistive technology; except where removal prevents injury to self, others, or property; or,
   f. Withholding of meals as a consequence or punishment for problem behavior.

4. Behavior Support Plans that include Level II or Level III intrusive behavior intervention procedures require DHS/DSPD review and approval (Reference Administrative Code R539-4. http://rules.utah.gov/publicat/code/r539/r539.htm. The BC1 contractor may develop plans that include Level II or Level III interventions provided that these plans are developed in consultation with and reviewed by a BC2 or BC3 consultant and the BC1 consultant is NOT involved with developing or monitoring that portion of the plan that contains intrusive interventions. BC1 contractor may provide follow-up services for behavioral plans developed and monitored by BC2 or BC3 contractors. Only BC2 and BC3 Contractors may develop Behavior Support Plans that include Level II or Level III intrusive behavior interventions.

5. This service shall not be available to persons who might otherwise receive this service through the Medicaid State Plan or

Service Code: **BC2** ***Creation Date:*** 3/13/2006

Service Name: **Behavior Consultation II** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

BC2 services address serious behavior problems for people with disabilities. The interventions are based upon the principles of applied behavior analysis and focus on positive behavior supports. Services provide personalized behavior consultation to families and/or staff who support people with serious though not potentially life threatening behavior problems that may be complicated by medical or other factors.

USSDS Rates as of 12/23/2008

Unit	***Rate Type***	***Rate***
Quarter hour	Standard	$9.26

Service Eligibility

Eligibilit	***Description***
FP	
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:

Behavior Consultation II (BC2) one-on-one hourly services provided to address serious behavior problems for people with disabilities. Interventions used by BC2?s to address problem behavior shall be based upon the principles of applied behavior analysis and focus on positive behavior supports. BC2?s provide personalized behavior consultation to families and/or staff who support people with serious though not potentially life threatening behavior problems that may be complicated by medical or other factors. Problems addressed by BC2?s are identified as serious, but have not been judged to be treatment resistant or refractory and may derive from multiple and complex etiological factors. BC2 contractors may provide consultation on behavior supports with DSPD staff who work in region offices. BC2 services are considered crisis prevention. Contractors receive referrals for BC2 services through the DSPD Behavior Consultant Coordinator or designated region staff.

Behavior Supports

1. Behavioral intervention procedures shall be in accordance with DHS/DSPD Administrative Code R539-4 a copy of which can be found at: http://www.rules.utah.gov/publicat/code/r539/r539-004.htm.
2. All Behavior Support Plans shall emphasize a positive approach with effective treatment designed to acquire and maintain adaptive behaviors and prevent problem behaviors.
3. Written Behavior Support Plans shall include the following information:
   a. A summary of the Functional Behavioral Assessment:
      i. Describing the serious problem behavior.
      ii. Predicting the circumstances in which the problem behavior is most likely to occur.
      iii. Identifying the function of the problem behavior.
   b. Baseline data.
   c. Behavioral objective written in measurable and observable terms.
   d. Behavioral intervention procedures clearly written in detail to ensure consistent implementation by staff/supporters addressing the following areas:
      i. Prevention procedures designed to decrease the need for the problem behavior.
      ii. Planned responses and consequences for when the problem behavior occurs, this includes safety issues and efforts to minimize reinforcement for the problem behavior.
      iii. Teaching or increasing replacement behaviors.
      iv. When appropriate, the Behavior Support Plan shall also address generalization, maintenance, and fading procedures.

e. When Level II and Level III intrusive procedures are used, include a rationale for the use of intrusive procedures and a plan to discontinue the intrusive intervention over time. (See R539-4-1-3 definitions.)
f. Name and title of the Contractor/Employee who developed the Behavior Support Plan and name of the employee(s) responsible for supervising the implementation of the plan.
g. Data collection procedures that measure progress toward the objective.
h. Dates for review and program revisions in addition to required monthly summary.
j. Graphed data of the primary problem behavior(s) updated at least every 3 months for visual analysis.
j. The written approved Behavior Support Plan shall be available to all persons involved in implementing or supervising the Plan.

Eligibility Description
BG SPINAL CHORD GENERAL FUND
SG SELF DETERM NON-MEDICAID
SM WAIVER_MEDICAID

Population Served
The person shall be found eligible under the DHS/DSPD eligibility criteria and shall be receiving other services or shall be on the DHS/DSPD waiting list. All persons served shall have special behavioral needs such as aggression, self-injurious, property destruction, non-compliance, eating and toileting problems. BC2 shall focus on people with mental retardation or related condition or on adults with brain injury. BC2 services may be provided at the person?s home, a programmatic setting, or other naturally occurring environment in the community.

Contractor Qualifications
Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractors must also agree to participate in any DHS/DSPD provided Medicaid training. Contractor must be certified by DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm.

Contractor shall have all applicable licenses or certifications as prescribed in Utah Administrative Code R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits

Behavior Consultation Service II contractors shall agree to be actively engaged in training provided by DHS/DSPD in the provision of positive behavioral supports. Contractor shall successfully complete a training course in the provision of positive behavioral supports prescribed by DSPD and approved by the State Medicaid Agency and shall successfully pass a learning assessment at the conclusion of the course.

Staff to Person Ratios
Behavioral Consultation shall be one to one (1:1) service.

Staff Qualifications and Training
BC2 staff shall possess certification as a Board Certified Associate Behavior Analyst (for more information on certification, see www.bacb.com) and possess at least two years experience in the provision of services to persons with disabilities.; or, possess a post-graduate degree of at least a Masters level in a behaviorally related field, granted by an accredited American or Canadian institute of higher learning and have any combination of training and experience of at least one year working with people who have mental retardation, related conditions or brain injury. Contractor shall be certified by DSPD as an authorized provider of services to persons with disabilities in accordance Utah Code Section 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record as required by Utah Administrative Code R501-14. http://rules.utah.gov/publicat/code/r501/r501-14.htm.

BC2?s shall agree to be actively engaged in training in positive behavioral supports provided by DHS/DSPD and shall successfully complete a learning assessment upon completion of training.

Record Keeping and Written Documentation

In order to assure the person?s needs are being met and to assist DHS/DSPD in its efforts to evaluate the effectiveness of services, a copy of the following information shall be forwarded to DHS/DSPD within 30 days of its completion and shall be kept on file by the contractor:

1. Functional Behavior Assessment
2. Behavior Support Plan
3. Follow-up Summary/Evaluation
4. Monthly summaries of the BC2 services

BC2

In order to document the provision of BC2 services, the contractor shall develop and maintain sufficient written documentation to support the following:
1. Number of hours worked and activity;
2. Applicable licensure and certification;
3. Documentation of training(s) provided with topic, dates, names of attendees; and,
4. An approved referral as indicated on DHS/DSPD Form 1056 in the case of those receiving supports from DHS/DSPD, and on an alternative written document in the case of those awaiting services that assures compliance with DHS/DSPD eligibility requirements and can be compared with invoices.

Person Assessment and Treatment Plan

1. Behavior Supports
Contractors shall maintain written documentation and shall comply with Administrative Code R539-4. http://rules.utah.gov/publicat/code/r539/r539.htm.
2. Support Plans Objectives and Outcomes
The Contractor shall be expected to establish person objectives and track outcomes. DHS/DSPD defines a successful outcome for these services as a decrease in the behavior problem being addressed and the maintenance or increase in the frequency of occurrence of the replacement behavior.

Limitations:
1. Services provided by Contractors cannot duplicate other supports and services available to the person. In addition, they shall be cost efficient and demonstrate effectiveness for the intended use.
2. Contractors may not provide direct care for persons or transport persons for whom they are simultaneously providing behavioral consultation.
3. Behavior Support Plans developed by the Contractor are prohibited from including any of the following:
   a. Corporal punishment, examples: slapping, hitting, and pinching;
   b. Demeaning speech to a person that ridicules or is abusive;
   c. Seclusion -- defined as locked confinement in a room;
   d. Use of electric devices or other painful stimuli to manage behavior;
   e. Denial or restriction of access to assistive technology; except where removal prevents injury to self, others, or property; or,
   f. Withholding of meals as a consequence or punishment for problem behavior.
4. Behavior Support Plans, which include any Level II or Level III intrusive behavior intervention procedures, shall require DHS/DSPD review and approval. (Reference Administrative Code R539-4 http://rules.utah.gov/publicat/code/r539/r539.htm).
BC2?s can provide follow-up services for behavioral plans developed and monitored by BC3 contractors.

Service Code: **BC3** ***Creation Date:*** 3/13/2006

Service Name: **Behavior Consultation III** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

BC3 services address or prevent crisis behavior problems for people with disabilities by providing one-on-one hourly behavioral consultation with families and/or staff who support people with the most complex behavioral issues. The services focus on the most involved and complex, difficult, dangerous, potentially life-threatening and resistant to change problems. In addition, the person has failed intervention, is frightening to others and is severely limited to activities and opportunities they could otherwise access. The person's problems are complicated by or derive from multiple etiological factors. The Interventions are based upon the principles of applied behavior analysis and focus on positive behavior supports.

USSDS Rates as of 12/23/2008

Unit	***Rate Type***	***Rate***
Quarter hour	Standard	$14.18

Service Eligibility

Eligibilit	***Description***
FP	
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Outcome Requirements

General Description:

Behavior Consultation III (BC3) services address or prevent crisis behavior problems for people with disabilities by providing one-on-one hourly behavioral consultation with families and/or staff who support people with the most complex behavioral issues. BC3 services focus on the most involved and complex, difficult, dangerous, potentially life-threatening and resistant to change problems. In addition, the person has failed intervention, is frightening to others and is severely limited to activities and opportunities they could otherwise access. The person's problems are complicated by or derive from multiple etiological factors. Interventions used by BC3?s to address problem behavior shall be based upon the principles of applied behavior analysis and focus on positive behavior supports. BC3 contractors may provide consultation on behavior supports to DSPD staff who work in region offices. Contractors receive referrals for BC3 services through the DSPD Behavior Consultant Coordinator or designated region staff.

The BC3?s shall conduct Functional Behavior Assessments. Functional Assessments shall focus on hard to separate multiple functions and may require functional analysis manipulation procedures. Assessments shall include the effects of multiple organic and dual-diagnosis issues. These consultations shall most likely be on referrals that are the most difficult to assess, plan, implement, and evaluate. BC3?s shall design Behavior Support Plans, train families and/or staff on behavior support plans, evaluate the effectiveness of the Behavior Support Plans, and make adjustments in the plans as needed.

These plans shall address multiple targets with detailed procedures for prevention, consequences and replacement behaviors, crisis and safety issues, and may include Level II/III intrusive procedures. (See Administrative Code R539-4-1-3 definitions.) Interventions shall focus on skill development and prevention procedures based on the principles of applied behavior analysis. Issues complicated by family problems and dynamics shall be addressed.

BC3 Services need to be coordinated with schools and other agencies addressing these behavior problems.

Evaluation summaries shall be detailed and based on objective data and graphs with multiple targets and treatment conditions used for visual analysis. Evaluation Summaries shall be comprehensive, with graphs including treatment conditions and the effects of
other interventions (e.g., medications), and integrate information from multiple sources. BC3?s may also consult with DHS/DSPD staff about the behavioral needs of persons, review the behavior supports provided by others through contract or utilization reviews, and participate in clinical reviews, behavior peer reviews or crisis prevention planning.

Behavior Supports

1. Behavioral intervention procedures shall be in accordance with DHS/DSPD Administrative Code R539-4 a copy of which can be found at: http://www.rules.utah.gov/publicat/code/r539/r539-004.htm.

2. All Behavior Support Plans shall emphasize a positive approach with effective treatment designed to acquire and maintain adaptive behaviors and prevent problem behaviors.

3. Written Behavior Support Plans shall include the following information:

a. A summary of the Functional Behavioral Assessment:

i. Describing the critical problem behavior.

ii. Predicting the circumstances in which the problem behavior is most likely to occur.

iii. Identifying the function of the problem behavior.

b. Baseline data.

c. Behavioral objective written in measurable and observable terms.

d. Behavioral intervention procedures clearly written in detail to ensure consistent implementation by staff/supporters addressing the following areas:

i. Prevention procedures designed to decrease the need for the problem behavior.

ii. Planned responses and consequences for when the problem behavior occurs, this includes safety issues and efforts to minimize reinforcement for the problem behavior.

iii.Teaching or increasing replacement behaviors.

iv.When appropriate, the Behavior Support Plan shall also address generalization, maintenance, and fading procedures.

e. When Level II and Level III intrusive procedures are used, include a rationale for the use of intrusive procedures and a plan to discontinue the intrusive intervention over time.

f. Name and title of the Contractor/Employee who developed the Behavior Support Plan and name of the employee(s) responsible for supervising the implementation of the plan.

g. Data collection procedures that measure progress toward the objective.

h. Dates for review and program revisions in addition to required monthly summary.

i. Graphed data of the primary problem behavior(s) updated at least every 3 months for visual analysis.

j. The written approved Behavior Support Plan shall be available to all persons involved in implementing or supervising the Plan.

Eligibility Description

BG SPINAL CHORD GENERAL FUND
SG SELF DETERM NON-MEDICAID
SM WAIVER_MEDICAID

Population Served

The person shall be found eligible under the DHS/DSPD eligibility criteria and shall be receiving other services or shall be on the DHS/DSPD waiting list. All persons served shall have special behavioral needs such as aggression, self-injurious, property destruction, non-compliance, eating and toileting problems. BC3 services shall focus on people with mental retardation or related conditions or on adults with brain injury who suffer from the most complex, refractory and involved behavior problems that are potentially dangerous and life-threatening if left unattended. BC3 services may be provided at the person?s home, a programmatic setting, or other naturally occurring environment in the community.

Contractor Qualifications

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractors must also agree to participate in any DHS/DSPD provided Medicaid training. Contractor must be certified by DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm.

Contractor shall have all applicable licenses or certifications as prescribed in Utah Administrative Code R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits

Behavior Consultation Service II contractors shall agree to be actively engaged in training provided by DHS/DSPD in the provision of positive behavioral supports. Contractor shall successfully complete a training course in the provision of positive behavioral supports prescribed by DSPD and approved by the State Medicaid Agency and shall successfully pass a learning assessment at the conclusion of the course.

Staff to Person Ratios

Behavioral Consultation shall be one to one (1:1) service.

Staff Qualifications and Training

BC3 staff shall possess certification as a Board Certified Behavior Analyst (for more information on certification, see www.bacb.com) and possess at least three years of experience in the provision of services to persons with disabilities.; or, possess a post-graduate degree of at least a Ph.D. level in a field related to behavior management, granted by an accredited American or Canadian institute of higher learning. Contractor shall be certified by DSPD as an authorized provider of services to persons with disabilities in accordance Utah Code Annotated Ï 62A-5-103.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record as required by Utah Administrative Code R501-14. http://rules.utah.gov/publicat/code/r501/r501-14.htm.

BC3?s shall agree to be actively engaged in training in positive behavioral supports provided by DHS/DSPD and shall successfully complete a learning assessment upon completion of training.

Record Keeping and Written Documentation

In order to assure the person?s needs are being met and to assist DHS/DSPD in its efforts to evaluate the effectiveness of services, a copy of the following information shall be forwarded to DHS/DSPD within 30 days of its completion and shall be kept on file by the contractor:
1. Functional Behavior Assessment
2. Behavior Support Plan
3. Follow-up Summary/Evaluation
4. Monthly summaries of the BC3 services

In order to document the provision of BC3 services, the contractor shall develop and maintain sufficient written documentation to support the following:
1. Number of hours worked and activity;
2. Applicable licensure and certification;
3. Documentation of training(s) provided with topic, dates, names of attendees; and,
4. An approved referral as indicated on DHS/DSPD Form 1056 in the case of those receiving supports from DHS/DSPD, and on an alternative written document in the case of those awaiting services that assures compliance with DHS/DSPD eligibility requirements and can be compared with invoices.

Person Assessment and Treatment Plan

1. Behavior Supports
Contractors shall maintain written documentation and shall comply with Utah Administrative Code R539-4.
2. Support Plans Objectives and Outcomes
The Contractor shall be expected to establish person objectives and track outcomes. DHS/DSPD defines a successful outcome for these services as a decrease in the behavior problem being addressed and the maintenance or increase in the frequency of occurrence of the replacement behavior.

Limitations:
1. Services provided by Contractors cannot duplicate other supports and services available to the person. In addition, they shall be cost efficient and demonstrate effectiveness for the intended use.

2. Contractors may not provide direct care for persons or transport persons for whom they are simultaneously providing behavioral consultation.

3. Behavior Support Plans developed by the Contractor are prohibited from including any of the following:
a. Corporal Punishment, examples: slapping, hitting, and pinching;
b. Demeaning Speech to a person that ridicules or is abusive;
c. Seclusion -- defined as locked confinement in a room;
d. Use of electric devices or other painful stimuli to manage behavior;
e. Denial or restriction of access to assistive technology; except where removal prevents injury to self, others, or property; or,
f. Withholding of meals as a consequence or punishment for problem behavior.

4. Behavior Support Plans, which include any Level II or Level III intrusive behavior intervention procedures, shall require DHS/DSPD review and approval. (Reference Utah Administrative Code R539-4)). BC3?s can provide follow-up services for behavioral plans developed and monitored by BC3 contractors.

5. This service shall not be available to persons who might otherwise receive this service through the Medicaid State Plan

or any other funding source.

Service Code: **CH1** ***Creation Date:*** 1/24/2001

Service Name: **Chore Services - Self Admintered SAS** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:

CH1 helps maintain a clean, sanitary, and safe living environment for persons with disabilities who are unable to complete chore activities on their own. The service includes heavy household chores such as washing floors, windows, and walls; snow removal, lawn care; tacking down loose rugs and tiles; and moving heavy items of furniture in order to provide safe access and egress.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$3.25

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description . . . . . .

Chore Services (CH1) is a one-on-one hourly service that helps maintain a clean, sanitary, and safe living environment for persons with disabilities who are unable to complete chore activities on their own. CH1 includes heavy household chores such as washing floors, windows, and walls; snow removal, lawn care; tacking down loose rugs and tiles; and moving heavy items of furniture in order to provide safe access and egress. CH1 is not a skills training service.

CH1 may be provided under Self-Administered Service (SAS) method, only.

Limitations . . . . . .

CH1 may be provided only in the case where no other relative, caregiver, landlord, community/volunteer agency, or third-party payer is capable of or responsible for this provision. In the case of rental property, the landlord?s responsibility (pursuant to the lease agreement) will be examined prior to any authorization.

Chore services billed under the CH1 code may not be provided to persons simultaneously receiving services billed under the ELS, PPS, HHS, RHS, SL1, SLH or SLN service codes.

Population Served . . . . . .

The CH1 employee will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC) and acquired brain injury (ABI), as defined in Utah Administrative Code R539-1.

Employee?s Qualifications . . . . . .

The Employee must have all applicable licenses as prescribed in Utah Administrative Code R501, http://rules.utah.gov/publicat/code/r501/r501.htm, to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. Any non-licensed Employee must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Annotated Ï 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

The Employee must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on his or her behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Employee. Employees must also agree to participate in any DHS/DSPD provided Medicaid training.

Administrative Requirements . . . . . .

A.Policies and Procedures: The Employee shall have established policies and procedures, a copy of which shall be maintained and readily accessible at each person?s home. These policies and procedures shall:

1. Demonstrate the development and posting of an evacuation plan in each program site (person?s home), quarterly training on evacuation procedures and documentation of quarterly evacuation drills.
2. Govern the handling, storage, disposal and theft prevention of medication.

Staff Qualifications . . . . . .
All of the Employee?s staff must demonstrate competency (in the services covered by the contract), as determined by the Employee, in addition all applicable education, and training must be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Employee must ensure that CH1 staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a Bureau of Criminal Background Identification (BCI) background check through the Department of Human Services (DHS), Office of Licensing and have a record of the BCI results in the staff record.
http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff providing this service must be at least 16 years of age.

Staff Training Requirements . . . . . .
The Employee and staff must meet the following:

1. The Employee and staff providing CH1 services must be capable of physically completing all required tasks.
2. Maintain a clean, sanitary and safe living environment in the person?s home.

Staff Support . . . . . .
Actual type, frequency and duration of support will be defined in the person's Individual Support Plan?s Action Plan (ISP/AP) based on the person?s assessed needs.

Rate . . . . . .
CH1 is an hourly, one-on-one service.

Service Code: **CHA** ***Creation Date:*** 3/ 8/2006

Service Name: **Chore Services** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

CHA helps maintain a clean, sanitary, and safe living environment for persons with disabilities who are unable to complete chore activities on their own. The service includes heavy household chores such as washing floors, windows, and walls; snow removal, lawn care; tacking down loose rugs and tiles; and moving heavy items of furniture in order to provide safe access and egress.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$4.15

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

CHA may be provided under Agency-Based Services.

Limitations:
CHA may be provided only in the case where no other relative, caregiver, landlord, community/volunteer agency, or third-party payer is capable of or responsible for this provision. In the case of rental property, the responsibility of the landlord, pursuant to the lease agreement, will be examined prior to any authorization. Chore services billed under the CHA code may not be provided to persons simultaneously receiving services billed under the ELS, PPS, HHS, RHS, SLA, SLH or SLN service codes.

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and acquired brain injury, as defined in Utah Administrative Code R539-1.

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. Non-licensed contractors must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractors must also agree to participate in any DHS/DSPD provided Medicaid training.

Administrative Requirements
A.Policies and Procedures: Contractors shall have established policies and procedures, a copy of which shall be maintained and readily accessible at each program site (person?s home). These policies and procedures shall:
1. Demonstrate the development and posting of an evacuation plan in each program site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills.
2. Govern the handling, storage, disposal and theft prevention of medication.

Staff Qualifications:

All staff must demonstrate competency (in the services covered by the contract), as determined by the Contractor. In addition, all applicable education, and training must be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Contractor must ensure that Chore staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff providing this service must be at least 18 years of age.

Staff Training Requirements:
The contractor and staff must meet the following:
1. Employees providing chore services must be capable of physically completing all required tasks.
2. Maintain a clean, sanitary and safe living environment in the person?s home.

Staff Support:
Actual type, frequency and duration of support will be defined in the person's Individual Support Plan Action Plan (ISP/AP) based on the person?s assessed needs.

Rate:
CHA is an hourly, one-on-one service.

Service Code: **CLS** ***Creation Date:*** 1/24/2001

Service Name: **Community Living Supports** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:
CLS provides daily support, supervision, training, and assistance for people to live as independently as possible in their private homes, apartments, or group homes.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Daily	Standard	$380.97

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID

Service Code

Other

General Description. . . . . ..
Community Living Supports (CLS) provides daily support, supervision, training, and assistance for people to live as independently as possible in their private homes, apartments, or group homes. CLS can include up to 24-hour direct care but is generally 18-hours during the weekdays and 24-hours on weekends, holidays and vacations. The actual type, frequency and duration of direct care staff support is defined in the person?s Individual Support Plan (ISP) and is based upon the assessed needs of the person. CLS is available to those who live alone or with roommates. CLS includes maintenance of individual health and safety; and assistance with activities of daily living such as eating, bathing, and dressing.

The following waiver services are included under this code:
Behavior Analysis Services
Chore Services
Companion Services
Homemaker Services
Personal Assistance
Personal Budget Assistance
Transportation

Persons are excluded from receiving the following waiver services while receiving funding for CLS:

Host Home
Family Training and Preparation Services
Professional Parent
Supported Living

Persons receiving CLS are excluded from using the following service codes:

AFC, CLI, COM, HHS, PPS, SLH, SLN, SLA, BA1, BA2, BA3, BC1, BC2, BC3, BPB, BPM, BPP, CH1, CH2, FS1, FS3, FS4, FS5, FS6, FSV, FTP, HS1, HSQ, LKS, PAC, PAP, PAS, PBA, PEI, PEP, PER, RP1, RP2, RP3, RP4, RP5, RP6, RPS.

Behavioral program development must be provided by bachelor, masters or Ph.D. level Behavior Analysts. CLS is provided in a home-like environment, by an individual or an approved entity/agency in a group home, private home, or other approved residential setting other than a Nursing Facility (NF), Intermediate Care Facility for Individuals with Mental Retardation (ICF/MR), adult host home or professional parent home.

Population Served . . . . . .
The Contractor will serve people currently receiving services from DHS/DSPD with acquired brain injury (ABI), as defined in Utah Administrative Code R539-1.

Contractor?s Qualifications . . . . . .
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501 to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits governing the type of service provided.

Contractor must be enrolled as an approved individual Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractors must also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor shall be under DHS/DPSD contract to provide CLS and certified by DHS/DSPD.

Contractor shall provide emergency procedures for fire and other disasters that require the development and posting of an evacuation plan for site based services and quarterly training on evacuation procedures and documentation of quarterly evacuation drills.

Contractor shall disclose room and board charges and food stamps or other income not originating with DHS/DSPD.

Contractors under license with DHS, Office of Licensing shall assure the presence of at least one staff trained by a certified instructor, in first aid and CPR on duty with persons at all times.

Contractors shall assure the presence of staff at each licensed site that is responsible for supervision of the day-to-day operations of the site and for operation of the program.

Administrative Requirements. . . . . .
Policies and Procedures: Contractors shall have established policies and procedures, a copy of which shall be maintained and readily accessible at each facility. These policies and procedures shall:

a. Establish the amount of time family or friends may stay as overnight guests;
b. Disclose board and room charges and food stamps or other income not originating with DHS/DSPD;
c. For residential providers, include emergency procedures for fire and other disasters that require the development and posting of an evacuation plan in each residential site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills;
d. Govern the handling, storage, disposal and theft prevention of medication; and,
e. rovide procedures regarding the nutrition of the person.

Staff Qualifications . . . . . .
Staff shall demonstrate competency in providing CLS services, as determined by the Contractor, in addition, all applicable education, and training shall be completed before performing any work for persons without supervision.

CLS staff shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff shall pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

CLS staff shall be at least 18 years of age.

Specific Training Requirements . . . . . .
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to perform the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 12 within 6 months of employment.

1. Medication competency:
   a. Identification of common medications, their effects, purpose and side effects;
   b. Identification of medications and medication side effects specific to the person;
   c. Recording and documentation of self-administration of medications; and,
   d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.
2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.

6. Principles of age appropriate community inclusion and natural support development specific to the person.
7. Preferences and non-negotiable routines specific to the person.
8. Significant functional limitations and disabling conditions specific to the person.
9. Key elements of the Americans with Disabilities Act.
10. Person centered assessment and plan development.
11. How to develop and support the person?s preferred recreational and leisure activities.
12. Contractors and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
   a. Effects of brain injuries on behavior;
   b. Transitioning from hospitals to community support programs including available resources;
   c. Functional impact of brain changing;
   d. Health and medication;
   e. Role of the direct care staff relating to the treatment and rehabilitation process;
   f. Treatment plan and behavioral supports; and,
   g. Awareness of the family?s perspective on the brain Injury.

CLS staff shall pass a BCI background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record (http://rules.utah.gov/publicat/code/r501/r501-14.htm).

CLS staff shall be at least 18 years old.

Direct Service Requirements . . . . . .

A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing the applicable portion of the ISP?s Action Plan (ISP/AP). The ISP document includes the Action Plan and Support Strategies, and may include a Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.
2. Once the ISP/AP has been developed, the Contractor must orient the person to the plan and ensure the person is involved in its implementation.
3. The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
4. The Contractor, as a member of the person's team, is required to meet at least annually (within 12 months of the last Person-Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B.Psychotropic Medications

1. Psychotropic Medications include any drug prescribed to stabilize or improve mood, mental status, or behavior.
2. For persons on psychotropic medications, the Contractor will complete a specific type of Support Strategy referred to as a Psychotropic Medication Plan that contains the following information:
   a. Identification of the specific medication by it generic or brand name; the date which the medication was commenced on or is to be commenced, dosage, titration plans, and expected duration of medication, as determined by a qualified medical professional.
   b. A statement of the psychiatric diagnosis or specific behavioral-pharmacological hypothesis for each medication prescribed. (If multiple medications are to be used, an explanation for the combination of medications will be stated.)
   c. Identification of side effects to monitor. When antipsychotic medications are used, monitoring procedures may utilize standardized assessments instruments such as the Abnormal Involuntary Movement Scale (AIMS).
   d. A statement of specific behaviors or symptoms targeted to assess advantages and disadvantages of the prescribed psychotropic medications.
   e. Identification of other support and services that are available and would be useful in the treatment of the targeted behavior of symptom and/or any related illness or condition of the person. Such supports or services may include Behavior Support Plans, psychotherapy or laboratory studies.

C. Behavior Supports

1. Behavioral intervention procedures that utilize Level II and Level III interventions shall be in accordance with DHS/DSPD Administrative Rule. (See Utah Administrative Code R539-4-1-3 definitions.)
2. All Behavior Support Plans should emphasize a positive approach with effective treatment designed to acquire and maintain adaptive behaviors and prevent problem behaviors.
3. Written Behavior Support Plans shall include the following information:
   a. A summary of the Functional Behavioral Assessment:
      i. Describing the problem behavior.
      ii. Predicting the circumstances in which the problem behavior is most likely to occur.
      iii. Identifying the function of the problem behavior.
   b. Baseline data.
   c. Behavioral objective written in measurable and observable terms.
   d. Behavioral intervention procedures clearly written in detail to ensure consistent implementation by staff/supporters addressing the following areas:
      i. Prevention procedures designed to decrease the need for the problem behavior.
      ii. Planned responses and consequences for when the problem behavior occurs, this includes safety issues and

efforts to minimize reinforcement for theproblem behavior.

iii. Teaching or increasing replacement behaviors.

iv. When appropriate, the Behavior Support Plan should also address generalization, maintenance, and fading procedures.

e. When Level II and Level III intrusive procedures are used, include a rationale for the use of intrusive procedures and a plan to discontinue the intrusive intervention over time. (See Utah Administrative Code R539-4-1-3 definitions.)

f.Name and title of the employee(s) who developed the Behavior Support Plan and identify the person who is responsible for supervising the implementation of the plan.

g. Data collection procedures that measure progress toward the objective.

h. Dates for review and program revisions in addition to required monthly progress notes.

i. Graphed data of the primary problem behavior(s) updated at least every 3 months for visual analysis.

j. The written approved Behavior Support Plan shall be available to all staff involved in implementing or supervising the Plan.

D. Representative Payee

1. As per R539-3-5(1), persons shall have access to and control over personal funds unless the person/representative voluntarily signs a DHS/DSPD Voluntary Financial Support Agreement (Form 1-3), The Contractor's Human Rights Committee may recommend to the person?s team to restrict a person?s right to manage personal funds, if the person?s money, health or safety is placed in jeopardy by severe mishandling, unlimited access or exploitation of funds by the person or others. The Contractor?s staff shall give the person training, support and opportunities to manage finances to the maximum extent possible.

2. The Contractor?s staff shall document the handling of personal funds in a way that is not harmful or embarrassing to the person and supports the intent of the income source. The team may determine how a person can be assisted with financial matters, recommend the type of financial support a person may need and refer the person to a review by the Contractor?s Human Rights Committee. The Contractor?s staff should act as representative or protective payee only in a situation where no other knowledgeable, financially competent adult willing to take on the representative or protective payee responsibilities can be identified. The Contractor, with approval by the DHS/DSPD Director or designee, can submit an alternative procedure to the one listed below.

3. Upon receipt of the person?s team approval or a DHS/DSPD Form 1-3, signed by the person/representative, Contractor?s staff shall manage the major personal business affairs of a person. Major personal business affairs include management of personal funds, checking account, savings account, or other financial matters related to supplemental income. Any variance from procedures must be approved by the Contractor's Human Rights Committee or requested by the person/representative and documented in the AP.

4. As per R539-3-5(2), the Contractor shall follow all Social Security Administration requirements outlined in 20 CFR 416.601-665.

5. The Contractor?s staff shall review financial records with the person at least monthly.

a. The Contractor?s staff shall maintain documentation of this review in the person?s records.

b. An accurate record shall be kept of all funds deposited with the Contractor for use by the person. This record shall contain a list of deposits and withdrawals by category of food, rent, clothing and leisure. This record shall be verifiable with receipts and/or monthly bank statements.

c. Purchases over $20.00 per item shall be substantiated by receipts signed by the person and professional staff. Multiple items purchased over $20.00 shall be verified with receipts, cancelled checks or monthly bank statements.

6. A record shall be kept of the person?s petty cash funds. The amount of cash maintained in the person?s petty cash account shall not exceed $50.00 without Contractor?s administrative approval. Records shall be kept of all deposits and withdrawals to the petty cash account.

7. The Contractor?s staff shall assure accuracy of personal financial records through monthly review performed by someone other than the Contractor?s staff authorizing expenditures. This review shall include verifying receipts of purchases of single items exceeding $20.00 in value. A quarterly administrative review of monthly financial documentation, bank statement, receipts and purchases shall be conducted by each Contractor for a random sample of persons receiving support to ensure adequate control of finances for all persons served by the Contractor. The Contractor?s staff shall maintain documentation that proved reviews were conducted.

8. It is recommended that the Contractor protect the person?s funds by using methods such as:

a. not writing checks for more than $35.00 cash a week;

b. not using the Automatic Teller Machine for transactions; and,

c. making deposits with no cash back.

These actions help to protect the person?s funds by establishing a bank record of the total funds received by the person and requiring the person to sign all transactions. The Contractor?s Human Rights Committee may propose specific limits on a person?s access to money and allowable spending amounts for the person?s team review and approval.

9. Contractor?s staff must provide documentation of the handling of person?s funds in a manner that is least intrusive and restrictive to the person even if the Contractor staff act as representative or protective payee of the persons funds.

10. Representative or protective payees are entitled to a reconciled financial statement of fiscal activity at least monthly.

11. Representative or protective payee?s monthly statement shall be forwarded each quarter to the Support Coordinator.

12. Contractor shall comply with DHS/DSPD representative payee records reviews.

E. Person?s Personal Funds

1. A person shall not give cash to or make purchases from the Contractor or Contractor?s staff. A person shall not write checks to the Contractor?s staff. Only in cases of emergency, may a person write a check to repay a loan made by the

Contractor. Contractor shall ensure the person has adequate access to personal finances in order to cover anticipated expenditures.

2. The Contractor?s staff shall not loan or give money to a person. The Contractor shall not loan or give money to a person except in case of an emergency. A person shall not loan or give money to the Contractor?s staff or the Contractor itself.

3. In the event of an emergency situation, a Contractor may write a check to the person or the person may borrow money from the Contractor. The person?s support team must be notified and approve the actions of the Contractor in this situation. The Contractor?s staff must document the emergency and the person?s support team approval and maintain this documentation in the person?s record. The Contractor shall have policies and procedures in place to make sure a person does not continuously owe the Contractor money due to emergency situations.

4. Belongings with a purchase price or value of $50.00 or more shall be inventoried. The inventory shall also include other items of significance to the person, which may cost less than $50.00. The inventory shall be maintained on an ongoing basis and reviewed annually. Discarded items shall be deleted from the inventory list. Documentation of the reason for the deletion of an item shall be maintained and shall require the signature of the person/representative and one Contractor staff or two Contractor staff if the person/representative is not available. Personal possessions shall be released to the person/representative whenever the person moves.

F. Health and Safety Requirements

1. Contractor shall assure that persons receive training, opportunities to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the Individual Service Plan, as allowed by the person's Medicaid and insurance plans.

2. Contractor staff shall assure persons receive training and assistance to:

a. Safely follow physician orders;

b. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the person's physician; and,

c. Document the frequency, dosage, and type of medication taken.

3. Medications shall be properly stored according to the person's needs and capabilities, as determined by the team.

4. Contractor staff shall immediately contact the appropriate medical professional to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, misadministration of medication, medication administered at the wrong time, etc.

a. Any medication errors that occur shall be documented in the person's file and reported to the Support Coordinator and Contractor?s Director.

5. Contractor shall notify the Support Coordinator and person representative within 24 hours of the development of a medical issue for any person, such as illness requiring medical appointments or emergency room visit. This does not include medical appointments for general health check-ups.

6. Any allergies the person has shall be recorded by Contractor staff in the person's medical record and disclosed to the person's primary physician.

7. Contractor staff shall assure persons receive training and assistance to:

a. Identify primary health care practitioners; and

b. Obtain dental and physical examinations.

G.Health and Nutrition Requirements

Service Code: **CO1** ***Creation Date:*** 3/27/2006

Service Name: **Companion Service - Self Administered - SAS** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:

CO1 is a non-medical care, supervision, and socialization service for functionally impaired adults. Companions may assist or supervise the person with such tasks as meal preparation, laundry, and shopping, but do not perform these services as discrete services. Companions do not provide hands on nursing care. Companions may perform light housekeeping tasks that are incidental to the care and supervision of the person.

USSDS Rates as of 12/23/2008

Unit	*Rate Type*	*Rate*
Quarter hour	Standard	$2.98
Daily	Standard	$73.88

Service Eligibility

Eligibilit	*Description*
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Companion (CO1) is one-on-one hourly and daily non-medical care, supervision, and socialization services for functionally impaired adults. Companions may assist or supervise the person with such tasks as meal preparation, laundry, and shopping, but do not perform these services as discrete services. Companions do not provide hands on nursing care. Companions may perform light housekeeping tasks that are incidental to the care and supervision of the person. CO1 is provided in accordance with a therapeutic goal in the person?s plan as is not purely diversional in nature. The following services are included under this code.

Personal Assistance (PA1): Persons are excluded from receiving the following services and CO1: (Cannot bill for CO1 and the codes listed below)

Adult Foster Care (AFC)
Host Home Support (HHS)
Professional Parent Supports (PPS)
Residential Habilitation Support (previous Community Living Support) (RHS)
Residential Habilitation Intensive Support (previous Community Living Intensive Support) (RHI)

Persons who receive CO1 may not bill for Supported Living, Day Support or Supported Employment services that occur during the same hours of the day.

CO1 services are intended for those participating in the Self-Administered Services method, only.

Population Served:
The Employee shall serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and adults age 18 and older with acquired brain injury, as defined in Utah Administrative Rule R539-1 (http://rules.utah.gov/publicat/code/r539/r539.htm).

Employee?s Qualifications:
Employee shall have all applicable licenses or certifications as prescribed in Utah Administrative Rule R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

Employee shall be enrolled as an approved Medicaid Provider with the Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Employee. Employees shall also agree to participate in any DHS/DSPD provided Medicaid training.

Employee shall be under DHS, DPSD contract to provide COM and certified by DSPD.

Employee shall provide emergency procedures for fire and other disasters.

Employee shall disclose room and board charges and food stamps or other income not originating with DHS/DSPD

Employee shall develop and implement a policy to govern the handling, storage, disposal and theft prevention of medication

Employee shall develop and implement a procedure regarding the nutrition of the Person.

Staff Qualifications:
Staff shall demonstrate competency in providing CO1 services, as determined by the Employer, in addition, all applicable education, and training shall be completed before performing any work for persons without supervision.

CO1 staff shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Empluee shall pass a BCI background check through the Department of Human Services, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

CO1 staff shall be at least 16 years of age.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to complete the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 12 within 6 months of employment.

1. Medication competency:
   a. Identification of common medications, their effects, purpose and side effects,
   b. Identification of medications and medication side effects specific to the person,
   c. Recording and documentation of self-administration of medications, and
   d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.
2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Principles of age appropriate community inclusion and natural support development specific to the person.
7. Preferences and non-negotiable routines specific to the person.
8. Significant functional limitations and disabling conditions specific to the person.
9. Key elements of the American with Disabilities Act.
10. Person centered assessment and plan development.
11. How to develop and support the person?s preferred recreational and leisure activities.
12. Employees and Employee?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
    a. Effects of brain injuries on behavior,
    b. Transitioning from hospitals to community support programs including available resources,
    c. Functional impact of brain changing,
    d. Health and medication ,
    e. Role of the direct care staff relating to the treatment and rehabilitation process,
    f. Treatment plan and behavioral supports, and
    g. Awareness of the Family?s perspective on the brain Injury .

Direct Service Requirements:
A. Person-Centered Planning: Employee staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.
   1. The Employee is responsible for implementing the applicable portion of the ISP?s Action Plan (ISP/AP) These may include a Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, and data collection and/or Task Analysis sheet for skill training or other support.

2. Once the ISP/AP has been developed, the Employee shall orient the person to that part of the plan that is applicable to the Employee and ensure the person is involved in its implementation.
3. The Employee shall develop and implement Support Strategies for the person. Employee shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
4. The Employee, as a member of the person's Team, is required to assist in assessments and meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Persons' Personal Funds

1. In the event of an emergency situation, a Employee may write a check to the person or the person may borrow money from the Employee. The person?s support team shall be notified and grant approval of the Employee?s actions. The Employee?s staff shall document the emergency and the person?s support team approval and maintain this documentation in the persons record. The Employee shall have policies and procedures in place to make sure a person does not continuously owe the Employee money due to emergency situations.
2. A person shall not give cash to or make purchases from the Employee or Employee?s staff. A person shall not write checks to the Employee?s staff. Only in cases of emergency, may a person write a check to repay a loan made by the Employee. Employee shall ensure the person has adequate access to personal finances in order to cover anticipated expenditures. The exceptions to persons making payments to the Employee are as follows: a) reimbursement to the Employee for destruction of property by the person, if approved by the team, and allowable by contract, and b) room and board charges.
3. The Employee shall not loan or give money to a person. The Employee shall not loan or give money to a person except in case of an emergency. A person shall not loan or give money to the Employee?s staff or the Employee itself.
4. Belongings with a purchase price or value of $50.00 or more shall be inventoried. The inventory shall also include other items of significance to the person, which may cost less than $50.00. The inventory shall be maintained on an ongoing basis and reviewed annually. Discarded items shall be deleted from the inventory list. Documentation of the reason for the deletion of an item shall be maintained and shall require the signature of the person/representative and one Employee staff or two Employee staff if the person/representative is not available. Personal possessions shall be released to the person/representative whenever the person moves.

C. Health and Safety Requirements

1. Employee shall assure that persons receive training, opportunities to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the Person Service Plan, as allowed by the person's Medicaid and insurance plans.
2. Employee staff shall assure persons receive training and assistance to:
   a. Identify primary health care practitioners; and
   b. Obtain dental and physical examinations.
   c. Safely follow physician orders;
   d. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the person's physician;
   e. Document the frequency, dosage, and type of medication taken.
3. Medications shall be properly stored according to the person's needs and capabilities, as determined by the Team.
4. Employee shall immediately contact the appropriate medical professional to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, misadministration of medication, medication administered at the wrong time, or failure to follow laboratory survey schedule, etc.
   a. Any medication errors that occur shall be documented in the person's file and reported to the Support Coordinator and Employee Director or designee.
5. Employee shall notify the Support Coordinator and person representative within 24 hours of the development of a medical issue for any person, such as illness requiring medical appointments or an emergency room visit. This does not include medical appointments for general health check-ups.
6. Any allergies the person has shall be recorded by Employee staff in the person's medical record and disclosed to the person's primary physician.

D. Health and Nutrition Requirements

1. Persons shall have kitchen privileges with access to food and ingredients. Kitchen privileges may be limited if approved by the Human Rights Committee, in the interest of the person?s health.
2. .Employee staff shall assist persons in planning meals to meet basic nutritional standards, special diets, food preferences, customs, and appetites.

E. Transportation: Employee shall provide routine transportation to shopping and other community activities, based on the Employee's and Team's reasonable, professional judgment. The Employer shall check employee?s driving record annually and shall assure that driver?s with problematic records are not allowed to continue providing transportation as part of this service. Employers shall check annually that employee drivers providing transportation in their personal vehicles have current/adequate auto insurance. Employers shall keep documentation of this review and copies of the driver?s record and auto insurance in the employee?s file.

Driver?s make certain that:

1. Persons are not left unattended in the vehicle.
2. Persons use seat belts and remain seated while the vehicle is in motion.

3. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively operating a lift on vehicles that require the keys to be in the ignition to operate the lift.
4. All persons in wheelchairs use seat belts, or locking mechanisms to immobilize wheelchairs during travel.
5. Persons are transported in safety restraint seats when required by Utah State law.
6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving.
7. Persons arrive safely at the scheduled time and arranged destination, that no one is left alone along the way to or from day supports even in emergency situations or when the health and safety of others may be in question. If necessary during an emergency, the driver may wait until another driver arrives to complete the transport.

F. Access to Community Services
Employee shall assist the person in accessing community services and resources, including but not limited to finding housing, applying for food stamps, obtaining Social Security benefits, etc.

Staff Support:
CO1 is a one-to-one service with an hourly and daily rate. If a person requires more than 6 hours a day of CO1 then the daily rate shall be used. Actual type, frequency and duration of direct care staff support, and other community living supports shall be defined in the person's ISP/AP based on the person?s selected housing arrangement and assessed needs.

Service Code: COM
Service Name: Companion Services
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/24/2001
Obsolete Date:
DSPD

Description:

COM is a non-medical care, supervision, and socialization service for functionally impaired adults. Companions may assist or supervise the person with such tasks as meal preparation, laundry, and shopping, but do not perform these services as discrete services. Companions do not provide hands on nursing care. Companions may perform light housekeeping tasks that are incidental to the care and supervision of the person.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$3.93
Daily	Standard	$94.33

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Companion (COM) is one-on-one hourly and daily non-medical care, supervision, and socialization services for functionally impaired adults. Companions may assist or supervise the person with such tasks as meal preparation, laundry, and shopping, but do not perform these services as discrete services. Companions do not provide hands on nursing care. Companions may perform light housekeeping tasks that are incidental to the care and supervision of the person. COM is provided in accordance with a therapeutic goal in the person?s plan as is not purely diversional in nature. The following services are included under this code.

Personal Assistance (PAC)

Persons are excluded from receiving the following services and COM: (Cannot bill for COM and the codes listed above and below in bold.)

Adult Foster Care (AFC)
Host Home Support (HHS)
Professional Parent Supports (PPS)
Residential Habilitation Support (previous Community Living Support) (RHS)
Residential Habilitation Intensive Support (previous Community Living Intensive Support) (RHI)

Persons who receive COM may not bill for Supported Living, Day Support or Supported Employment services that occur during the same hours of the day.

COM services are intended for those participating in the Provider-based method, only.

Population Served:
The Contractor shall serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and adults age 18 and older with acquired brain injury, as defined in Utah Administrative Code R539-1 (http://rules.utah.gov/publicat/code/r539/r539.htm).

Contractor?s Qualifications:
Contractor shall have all applicable licenses or certifications as prescribed in Utah Administrative Code R501

http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor shall be under DHS, DPSD contract to provide COM and certified by DSPD.

Contractor shall provide emergency procedures for fire and other disasters.

Contractor shall disclose room and board charges and food stamps or other income not originating with DHS/DSPD.

Contractor shall develop and implement a policy to govern the handling, storage, disposal and theft prevention of medication

Contractor shall develop and implement a procedure regarding the nutrition of the Person.

Staff Qualifications:
Staff shall demonstrate competency in providing COM services, as determined by the Contractor, in addition, all applicable education, and training shall be completed before performing any work for persons without supervision.

COM staff shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff shall pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

COM staff shall be at least 18 years of age.

Specific Training Requirements:
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to complete the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 12 within 6 months of employment.

1. Medication competency:
   a. Identification of common medications, their effects, purpose and side effects,
   b. Identification of medications and medication side effects specific to the person,
   c. Recording and documentation of self-administration of medications, and
   d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.
2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Principles of age appropriate community inclusion and natural support development specific to the person.
7. Preferences and non-negotiable routines specific to the person.
8. Significant functional limitations and disabling conditions specific to the person.
9. Key elements of the Americans with Disabilities Act.
10. Person centered assessment and plan development.
11. How to develop and support the person?s preferred recreational and leisure activities.
12. Contractor and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
   a. Effects of brain injuries on behavior,
   b. Transitioning from hospitals to community support programs including available resources,
   c. Functional impact of brain changing,
   d. Health and medication,
   e. Role of the direct care staff relating to the treatment and rehabilitation process,
   f. Treatment plan and behavioral supports, and
   g. Awareness of the family?s perspective on the brain injury.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD

Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). These may include a Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, and data collection and/or Task Analysis sheet for skill training or other support.
2. Once the ISP/AP has been developed, the Contractor shall orient the person to that part of the plan that is applicable to the Contractor and ensure the person is involved in its implementation.
3. The Contractor shall develop and implement Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
4. The Contractor, as a member of the person's Team, is required to assist in assessments and meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Person?s Personal Funds

1. In the event of an emergency situation, a Contractor may write a check to the person or the person may borrow money from the Contractor. The person?s support team shall be notified and grant approval of the Contractor?s actions. The Contractor?s staff shall document the emergency and the person?s support team approval and maintain this documentation in the persons record. The Contractor shall have policies and procedures in place to make sure a person does not continuously owe the Contractor money due to emergency situations.
2. A person shall not give cash to or make purchases from the Contractor or Contractor?s staff. A person shall not write checks to the Contractor?s staff. Only in cases of emergency, may a person write a check to repay a loan made by the Contractor. Contractor shall ensure the person has adequate access to personal finances in order to cover anticipated expenditures. The exceptions to persons making payments to the Contractor are as follows: a) reimbursement to the Contractor for destruction of property by the person, if approved by the team, and allowable by contract, and b) room and board charges.
3. The Contractor?s staff shall not loan or give money to a person. The Contractor shall not loan or give money to a person except in case of an emergency. A person shall not loan or give money to the Contractor?s staff or the Contractor itself.
4. Belongings with a purchase price or value of $50.00 or more shall be inventoried. The inventory shall also include other items of significance to the person, which may cost less than $50.00. The inventory shall be maintained on an ongoing basis and reviewed annually. Discarded items shall be deleted from the inventory list. Documentation of the reason for the deletion of an item shall be maintained and shall require the signature of the person/representative and one Contractor staff or two Contractor staff if the person/representative is not available. Personal possessions shall be released to the person/representative whenever the person moves.

C. Health and Safety Requirements

1. Contractor shall assure that persons receive training, opportunities to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the person?s ISP, as allowed by the person's Medicaid and insurance plans.
2. Contractor staff shall assure persons receive training and assistance to:
   a. Identify primary health care practitioners;
   b. Obtain dental and physical examinations;
   c. Safely follow physician orders;
   e. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the person's physician; and,
   d. Document the frequency, dosage, and type of medication taken.
3. Medications shall be properly stored according to the person's needs and capabilities, as determined by the team.
4. Contractor staff shall immediately contact the appropriate medical professional to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, misadministration of medication, medication administered at the wrong time, or failure to follow laboratory survey schedule, etc.
   a. Any medication errors that occur shall be documented in the person's file and reported to the Support Coordinator and Contractor Director or designee.
5. Contractor shall notify the Support Coordinator and person representative within 24 hours of the development of a medical issue for any person, such as illness requiring medical appointments or an emergency room visit. This does not include medical appointments for general health check-ups.
6. Any allergies the person has shall be recorded by Contractor staff in the person's medical record and disclosed to the person's primary physician.

D. Health and Nutrition Requirements

1. Persons shall have kitchen privileges with access to food and ingredients. Kitchen privileges may be limited if approved by the Human Rights Committee, in the interest of the person?s health.
2. Contractor staff shall assist persons in planning meals to meet basic nutritional standards, special diets, food preferences, customs, and appetites.

E. Transportation

Contractor shall provide routine transportation to shopping and other community activities, based on the Contractor's and team's reasonable, professional judgment.

The Contractor shall check driver?s driving record annually and shall assure that driver?s with problematic records are not

allowed to continue providing transportation as part of this service. Contractor shall check annually that drivers providing transportation in their personal vehicles have current/adequate auto insurance. Contractor shall keep documentation of this review and copies of the driver?s record and auto insurance in the employee?s file.

Drivers make certain that:

1. Persons are not left unattended in the vehicle.
2. Persons use seat belts and remain seated while the vehicle is in motion.
3. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively operating a lift on vehicles that require the keys to be in the ignition to operate the lift.
4. All persons in wheelchairs use seat belts, or locking mechanisms to immobilize wheelchairs during travel.
5. Persons are transported in safety restraint seats when required by Utah State law.
6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving.
7. Persons arrive safely at the scheduled time and arranged destination, that no one is left alone along the way to or from day supports even in emergency situations or when the health and safety of others may be in question. If necessary during an emergency, the driver may wait until another driver arrives to complete the transport.

F. Access to Community Services

Contractor shall assist the person in accessing community services and resources, including but not limited to finding housing, applying for food stamps, obtaining Social Security benefits, etc.

Staff Support:

COM is a one-to-one service with an hourly and daily rate. If a person requires more than 6 hours a day of COM then the daily rate shall be used. Actual type, frequency and duration of direct care staff support, and other community living supports shall be defined in the person's ISP/AP based on the person?s selected housing arrangement and assessed needs.

Service Code: **CSB** ***Creation Date:*** 4/15/2003

Service Name: **Community Service Broker** ***Obsolete Date:***

Contract Type: Either a non-fixed or fixed amount contract required DSPD

Residential: No

Description:

CSB is an individual who is a skilled advisor and has additional talents in connecting/linking people with disabilities to resources that will enhance their quality of life. The Community Service Broker will guide and/or demonstrate how persons with a disability can access needed community supports and services. Community Service Brokers provide a technical role in the development of needs assessments and person-centered planning

USSDS Rates as of 12/23/2008

Unit	***Rate Type***	***Rate***
Quarter hour	Standard	$5.82
Hourly	Standard	$23.30

Service Eligibility

Eligibilit	***Description***
BG	SPINAL CHORD GENERAL FUND
PG	NON-MEDICAID ASSISTANCE
SG	SELF DETERM NON-MEDICAID

Service Code

Client Assessment/Tx Plan

Client Assesment/TX Plan:

1. Client receives a letter stating that the CSB services are available and requests that services be arranged. Along with this letter, they will receive a list of current contracted community service brokers. The will use this list to select the broker of their choice.
2. Client will send a Request for Services reply form to the DSPD CSB coordinator identifying their choice of contractor and service need.
3. The DSPD CSB Coordinator will contact the CSB Contractor and review the funding and availability of the Contractor.
4. Approved referral is sent to contractor.
5. Contractor will contact the client and complete the assessment process, including an Action Plan outlining services.
6. Contractor will forward completed Action Plan to DSPD CSB coordinator.
7. Services will be documented by the Contractor on the Activity Log/Survey form.
8. The Activity Log/Survey form will be attached to the billing form 295S and forwarded to the DSPDCSB Coordinator for review and approval of payment.
9. Services will be provided within a maximum of 90-days.
10. Payment cannot be made for services that have not been rendered.

Contractor Qualifications

1. Contractor and (all conttractor staff) must be at least 18 years of age, and
2. Contractor must have minimum of five years experience working with people with disabilities and their families in a volunteer or professional capacity, and
3. Contractor must have a bachelors degree, preferably in a filed or study related to social health or equivilant work experience, and
4. Be familiar with state and community resources available to people with diabilities and know how to access these resources, and
5. Must pass a BCI check before any contasct with clients, and

Other

The Community Service Broker Model is a crisis prevention model designed to deliver services to people with disabilities and their families. This service is time limited (temporary) and used when people with disabilities have qualified for DHS/DSPD services and are on the ?DHS/DSPD waiting list?. The DHS/DSPD waiting list includes Physical Disabilities, Developmental Disability and Mental Retardation, and Acquired Brain Injury. Community Service Brokering is a community support that

facilitates client and family education on self-determination and self-advocacy. Community Service Brokering is responsible for the coordination and referral of community resources to expand the range of support options.

A Community Service Broker is an individual that is a skilled advisor and has additional talents in connecting/linking people with disabilities to resources that will enhance their quality of life. The Community Service Broker will guide and/or demonstrate how persons with a disability can access needed community supports and services. Community Service Brokers provide a technical role in the development of needs assessments and person-centered planning. Community Service Brokers will have skills to assess areas of need, and the expertise to develop resources outside of the scope of

Population Served

DSPD eligible people of all ages who have mental retardation, developmental disabilities and/or related diagnoses and other related conditions, physical disabilities (age 18 and up,) or acquired brain injury (age 18 and up, and who are on the DHS/DSPD waiting list

Record Keeping

The Contractor will be required to maintain written documentation/records on the following:
A referral from DHS/DSPD Region Office for each client served, describing authorized services.
Activity Log and Survey form with support documentation that the Contractor will maintain for each client served.
The activity log will outline date services were delivered, units, and brief description of activity.
Prior to payment, the survey portion of this form must be completed by the client or a family member.
A copy of the 295S Billing Form
Person Centered Planning - An Action Plan form noting services requested by the client and approved by DHS/DSPD for each client served.
Contractor will provide the outcome of the services delivered within 10 days of completion of delivered services.

Staff Training

Contractors will attend DSPD orientation training for Community Service Brokers prior to client contact. DSPD will schedule and conduct the training with the Community Service Broker Contractor. Thr date for Contractor training will be included in the Contract Award Letter. Training is required prior to the commencement of the contract and will be approximately four hours. Additional training may be requested
in writing and addressed to 120 North 200 West, #411, Salt Lake City, UT 84103, Attention DSPD CSB Coordinator.
This training will include DSPD requirement review, conflict of interest review, Person-centered Planning, Support Strategies, as well as, DSPD ?Dos and Don?ts. This training is to educate the new contractors about the needs of the clients while balancing those with the needs of the Department of Human Services/Division of Services for People with Disabilities.

Treatment Plans

While the person with the disability is on the waiting list there are numerous services that the Community Service Broker may assist with, outside of DSPD provided services. Contractor will have experience in finding resources that will assist People with Disabilities, in one or more of these areas. Such non-DSPD provided services may include but are not limited to:

Supporting the client in the development of person-centered planning.
Developing support strategies.
Finding resources to train clients in self determination and self advocacy.
Expanding and developing support options outside the immediate family to individuals such as neighbors, clergy, co-workers (includes non-paid natural supports.)
Connecting clients with social services and mental health services.
Linking clients to school systems supports.
Providing resources for transition planning.
Finding resources to help clients with social security benefits.
Connecting clients to financial planners.
Linking clients to resources for locating housing.
Finding and facilitating financial assistance.
Finding resources for resolving guardianship issues.
Finding resources or assisting with advocacy.
Supporting the client in the maximizing benefit options.
Finding and facilitating supports outside the traditional system of paid provider supports.
Finding and facilitating transportation supports.
Finding resources for job supports/education/training.
Finding resources where clients can receive assistance on Assistive Technology/Adaptation.
Connecting to protective payee services outside DSPD system.
Locating and facilitating assistance with Health Care (ie, home health care, free clinics.)
Connecting clients with homeownership resources to obtain information on the process and responsibilities of buying a home.

Staff Requirements

Contractor and their CSB staff must attend DSPD orientation training for Community Service Brokers and sign the Code of Conduct form prior to working with clients. The BCI check is required and shall be paid for by the Contractor. This is included in the established rate.

Rate

Limitations and Special Conditions:
Services provided by a Community Service Broker cannot duplicate other supports and services available to the individual. In addition, they must be cost efficient and demonstrate effectiveness for the intended use.
The Contractor will be permitted to provide transportation for the client . All persons transporting clients must have a current drivers liscence, current automobile insurance coverage and a vehicle that can safely transport a client based on their needs.
The Contractor will not be allowed to meet with clients at Contractor?s residence.
The Contractor will not be permitted to administer services that are not identified in the DSPD approved Action Plan or contract.
Service Rates to Contractors may be negotiated for a less amount, but may not exceed the DHS established rate.
Total services may not exceed $2645 annually, for each client served.
The Contractor will be paid based on actual units.

Service Code: **DSG** ***Creation Date:*** 3/13/2006

Service Name: **Day Supports Group** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

DSG provides daily and hourly support, supervision and training for groups of children, adults and the elderly. The service provides a safe, non-residential, community habilitation program in a structured programmatic setting, other naturally occurring environment or community setting where people can gather in groups during the day to avoid becoming isolated and participate in and contribute to their community. It maintains or improves a person?s job-readiness skills, work abilities, dexterity, stamina, memory, personal safety, interpersonal relations, self-help, communication, mobility and other functional abilities and life skills.

USSDS Rates as of 12/23/2008

Unit	***Rate Type***	***Rate***
Daily	Standard	$151.35

Service Eligibility

Eligibilit	***Description***
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:

Day Supports [set up on a] Group (DSG) provides daily and hourly support, supervision and training for groups of children, adults and the elderly. DSG provides a safe, non-residential, community habilitation program in a structured programmatic setting, other naturally occurring environment or community setting where people can gather in groups during the day to avoid becoming isolated and participate in and contribute to their community. DSG maintains or improves a person?s job-readiness skills, work abilities, dexterity, stamina, memory, personal safety, interpersonal relations, self-help, communication, mobility and other functional abilities and life skills. Daily DSG may be used to provide appropriate staff to maintain the health and safety of persons during provision of MTP services so long as persons in groups receiving Daily DSG at the same time as MTP receive an average of six (6) hours of support a day. Daily DSG programs should be operational for at least 7.5 hours on regular business days to allow for staggered arrivals and departures.

Limitations:

1. DSG is intended for persons with mental retardation and related conditions (MR.RC); DSG is not available as a self-administered service; DSG is available through provider-based services only.

2. DSG services may on occasion occur in the person?s home or residence, though this service is primarily intended to be operated from a structured programmatic setting within the community.

3. DSG services rendered consistently in a non-site setting or facility in which four or more persons participate at any one time shall be licensed in accordance with Utah Administrative Code R501, [http://rules.utah.gov/publicat/code/r501/r501.htm].

4. Services that are provided to the person and paid for by the State of Utah Division of Vocational Rehabilitation shall not be submitted to DHS/DSPD for duplicate payment.

5. Services that are provided to the person and paid for by the person?s school shall not be submitted to DHS/DSPD for duplicate payment.

6. Wages paid to persons for incidental work performed during the time DSG reimbursement is claimed shall fully conform to Federal Department of Labor wage regulations and policy. Wages paid to persons receiving DSG services shall be commensurate for other employees performing similar labor. If the Contractor pays a person less than the minimum wage, the Contractor shall have a certificate pursuant to Section 14 (C) of the Fair Labor Standards Act from the Federal

Department of Labor permitting payment of a sub-minimum wage. [http://www.dol.gov/esa/whd/flsa/index.htm]

7. Payment for transportation of persons to and from the location where DSG services are delivered is not included in this service. [See MTP service description].

8. DSG may not be billed for the same day that Extended Living Supports (ELS) are billed.

9. DSG may not be billed at the same time as any other service except for MTP, BC1, BC2, BC3, PM1 or PM2.

10. DSG is not provided on holidays and weekends for persons who receive RHI, RHS, PPS, HHS and Daily COM.

11. If not otherwise specified on the worksheet, the minimum allowable DSG staff supervision is 1:8 (one (1) staff to eight (8) people).

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC) as defined in Utah Administrative Code R539-1. [http://rules.utah.gov/publicat/code/r539/r539.htm]

Contractor?s Qualifications:
If site based services are provided to four (4) or more persons at any one time, the Contractor shall have all applicable licenses as prescribed in Utah Administrative Code R501 [http://rules.utah.gov/publicat/code/r501/r501.htm] to operate and provide the particular type of services being offered and shall comply with insurance requirements and any local ordinances or permits. Non-licensed Contractor shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103. [http://www.le.state.ut.us/~code/TITLE62A/62A05.htm]

Contractor shall be enrolled as an approved Medicaid provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor shall have established policies and procedures, a copy of which shall be maintained and readily accessible at each facility. These policies and procedures shall:
a). Demonstrate the development and posting of an evacuation plan in each program site, quarterly training on evacuation procedures and documentation
of quarterly evacuation drills, and
b) provide provisions to govern the handling, storage, disposal and theft
prevention of medication.

Contractor shall assure that wages paid to persons receiving DSG services are commensurate to other employees performing similar labor. The Contractor who pay persons receiving DSG less than the minimum wage shall have a Certificate pursuant to Section 14 (C) of the Fair Labor Standards Act from the Federal Department of Labor permitting payment of a sub-minimum wage. [http://www.dol.gov/esa/whd/flsa/index.htm]

Contractor shall ensure that DSG staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Contractor shall be under a DHS/DSPD contract to provide DSG.

Contractor?s Staff Qualifications:
Staff shall demonstrate competency in providing DSG services, as determined by the Contractor, in addition, all applicable education, and training shall be completed before performing any work for persons without supervision.

DSG staff shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff shall pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

DSG staff shall be at least 18 years of age.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to complete the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas one (1) through eiemployment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 12 within six (6) months of employment. Competency for DSG staff may include knowing where to find information or who to contact in case of a question or unusual event.

1. Medication competency:
   a. Identification of common medications, their effects, purpose and side effects;
   b. Identification of medications and medication side effects specific to the person;
   c. Recording and documentation of self-administration of medications; and,
   d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.

2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Principles of age appropriate community inclusion and natural support development specific to the person.
7. Preferences and non-negotiable routines specific to the person.
8. Significant functional limitations and disabling conditions specific to the person.
9. Key elements of the Americans with Disabilities Act.
10. Person centered assessment and plan development.
11. How to develop and support the person?s preferred work activities.
12. Contractor and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
    a. Effects of brain injuries on behavior;
    b. Transitioning from hospitals to community support programs including available resources;
    c. Health and medication;
    e. Role of the direct care staff relating to the treatment and rehabilitation process;
    f. Treatment plan and behavioral supports; and,
    g. Awareness of the Family?s perspective on the brain injury.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.

2. Once the ISP/AP has been developed, the Contractor shall orient the person to that part of the plan that pertains to the Contractor and ensure that the person is involved in its implementation.

3. The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.

4. The Contractor, as a member of the person's team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

Contractor shall provide emergency procedures for fire and other disasters that require the development and posting of an evacuation plan for site based services and quarterly training on evacuation procedures and documentation of quarterly evacuation drills.

Contractor under license with DHS, Office of Licensing shall assure the presence of at least one staff trained by a certified instructor, in first aid and CPR on duty with persons at all times.

Contractor shall assure the presence of staff at each licensed site who is responsible for supervision of the day to day operations of the site and for operation of the program.

Contractor shall develop and implement fiscal policies, such as internal controls that separate payments from funding sources, such policies shall be sufficient to ensure and document that any financial benefit realized by a Contractor as a result of a contract with a federal, state, county, city or other agency to use the Contractor facility, was of benefit to the persons receiving DSG.

Contractor shall develop and implement procedures regarding behavior support plans and behavioral intervention procedures that comply with Administrative Code R539-4.

Contractor shall develop and implement procedures that assure proper nutrition of the person during periods of the provision of DSG.

Staff Support:

Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person?s assessed needs. Hours of support are established in the person?s worksheet and/or ISP/AP.

Record keeping
In addition to the General Requirements for record keeping, the Contractor shall maintain accurate records, such as attendance records and timesheets, of all instances of service delivery.

Service Code: **DSI** ***Creation Date:*** 3/13/2006

Service Name: **Day Supports for an Individual** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

DSI provides one-to-one support, supervision and training for a child, adult or elder. The service may be provided as a daily or hourly service. It provides a safe, non-residential, community habilitation program in a structured programmatic setting, other naturally occurring environment or community setting where a person can receive supports during the day to avoid becoming isolated and to participate in and contribute to his or her community. The service maintains or improves a person?s job-readiness skills, work abilities, dexterity, stamina, memory, personal safety, interpersonal relations, self-help, communication, mobility and

USSDS Rates as of 12/23/2008

Unit	***Rate Type***	***Rate***
Quarter hour	Standard	$8.46

Service Eligibility

Eligibilit	***Description***
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:

Day Supports [for an] Individual (DSI) [formerly DTA and DTB] provides one-to-one support, supervision and training for a child, adult or elder. DSI may be provided as a daily or hourly service. DSI provides a safe, non-residential, community habilitation program in a structured programmatic setting, other naturally occurring environment or community setting where a person can receive supports during the day to avoid becoming isolated and to participate in and contribute to his or her community. DSI maintains or improves a person?s job-readiness skills, work abilities, dexterity, stamina, memory, personal safety, interpersonal relations, self-help, communication, mobility and other functional abilities and life skills.

Limitations:

1. DSI is intended for persons with mental retardation and related conditions.
2. DSI is not available as a self-administered service; DSI is available through provider-based services only.
3. DSI services may on occasion occur in the person?s home or residence, though this service is primarily intended to be operated from a structured programmatic setting within the community.
4. DSI services rendered consistently in a non-site setting or facility in which four or more persons participate at any one time shall be licensed in accordance with Utah Administrative Code R501, [http://rules.utah.gov/publicat/code/r501/r501.htm].
5. Services that are provided to the person and paid for by the State of Utah Division of Vocational Rehabilitation shall not be submitted to DHS/DSPD for duplicate payment.
6. Services that are provided to the person and paid for by the person?s school shall not be submitted to DHS/DSPD for duplicate payment.
7. Wages paid to persons for incidental work performed during the time DSI reimbursement is claimed shall fully conform to Federal Department of Labor wage regulations and policy. Wages paid to persons receiving DSI services shall be commensurate for other employees performing similar labor. If the contractor pays a person less than the minimum wage, the contractor shall have a Certificate pursuant to Section 14 (C) of the Fair Labor Standards Act from the Federal Department of Labor permitting payment of a sub-minimum wage. [http://www.dol.gov/esa/whd/flsa/index.htm]
8. Routine, Non-Medical transportation is included in DSI unless the person receives MTP. [See MTP service description].

9. DSI may not be billed for the same day that Extended Living Supports (ELS) are billed.
10. DSI may not be billed at the same time as any other service except for BC1, BC2, BC3, PM1 or PM2.

11. DSI is not provided on holidays and weekends for individuals who receive RHI, RHS, PPS, HHS and Daily COM.
12. The minimum allowable DSI staff supervision is 1:1 (one staff to one person).

Population Served:
The Contractor shall serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, as defined in Utah Administrative Code R539-1. [http://rules.utah.gov/publicat/code/r539/r539.htm]

Contractor?s Qualifications:
If site based services are provided to four or more persons at any one time, the Contractor shall have all applicable licenses other functional abilities and life skills. as prescribed in Utah Administrative Rule R501 [http://rules.utah.gov/publicat/code/r501/r501.htm] to operate and provide
the particular type of services being offered and shall comply with insurance requirements and any local ordinances or permits. A non-licensed contractor shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Annotated Ï 62A-5-103. [http://www.le.state.ut.us/~code/TITLE62A/62A05.htm]

Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor shall have established policies and procedures, a copy of which shall be maintained and readilyaccessible at each facility. These policies and procedures shall: a) Demonstrate the development and posting of an evacuation plan in each program site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills; and, b) Provide provisions to govern the handling, storage, disposal and theft prevention of medication.

Contractor shall assure that wages paid to persons receiving DSI services are commensurate to other employees performing similar labor. A Contractor who pay persons receiving DSI less than the minimum wage shall have a Certificate pursuant to Section 14 (C) of the Fair Labor Standards Act from the Federal Department of Labor permitting payment of a sub-minimum wage. [http://www.dol.gov/esa/whd/flsa/index.htm]

The Contractor shall ensure that DSI staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Contractor shall be under DHS/DSPD contract to provide DSI.

Staff Qualifications:
Staff shall demonstrate competency in providing DSI services, as determined by the Contractor, in addition, all applicable education, and training shall be completed before performing any work for persons without supervision.

DSI staff shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff shall pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

DSI staff shall be at least 18 years of age.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to performthe critical job functions for DSI and orients them to the person being supported. DSI training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

DSI staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 12 within 6 months of employment.

1. Medication competency:
   a. Identification of common medications, their effects, purpose and side effects,
   b. Identification of medications and medication side effects specific to the person,
   c. Recording and documentation of self-administration of medications, and
   d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.

2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Principles of age appropriate community inclusion and natural support development specific to the person.
7. Preferences and non-negotiable routines specific to the person.
8. Significant functional limitations and disabling conditions specific to the person.

9. Key elements of the Americans with Disabilities Act.
10. Person centered assessment and plan development.
11. How to develop and support the person?s preferred work activities.
12. Contractor and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
    a. Effects of brain injuries on behavior,
    b. Transitioning from hospitals to community support programs including available resources,
    c. Functional impact of brain changing,
    d. Health and medication,
    e. Role of the direct care staff relating to the treatment and rehabilitation process,
    f. Treatment plan and behavioral supports, and
    g. Awareness of the Family?s perspective on the brain injury.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.

2. Once the ISP/AP has been developed, the Contractor shall orient the person to that part of the plan that pertains to the Contractor and ensure that the person is involved in its implementation.

3. The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.

4. The Contractor, as a member of the person's team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

Contractor shall provide emergency procedures for fire and other disasters that require the development and posting of an evacuation plan for site based services and quarterly training on evacuation procedures and documentation of quarterly evacuation drills.

Contractor under license with DHS, Office of Licensing shall assure the presence of at least one staff trained by a certified instructor, in first aid and CPR on duty with persons at all times.

Contractor shall assure the presence of staff at each licensed site who is responsible for supervision of the day-to-day operations of the site and for operation of the program.

Contractor shall develop and implement fiscal policies, such as internal controls that separate payments from funding sources, such policies shall be sufficient to ensure and document that any financial benefit realized by a Contractor as a result of a contract with a federal, state, county, city or other agency to use the contractor facility, was of benefit to the persons receiving DSI.

Contractor shall develop and implement procedures regarding behavior support plans and behavioral intervention procedures that comply with Utah Administrative Code R539-4.

Contractor shall develop and implement procedures that assure proper nutrition of the person during periods of the provision of DSI.

Transportation:
Contractor shall provide routine transportation to shopping and other community activities, based on the Contractor's and team's reasonable and professional judgment.

The Contractor shall check driver?s driving record annually and shall assure that drivers with problematic records are not allowed to continue providing transportation as part of this service. Contractor shall check annually that drivers providing transportation in their personal vehicles have current/adequate auto insurance. Contractor shall keep documentation of this review and copies of the driver?s record and auto insurance in the employee?s file.

Drivers make certain that:
1. Persons are not left unattended in the vehicle.
2. Persons use seat belts and remain seated while the vehicle is in motion.
3. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively operating a lift on vehicles that require the keys to be in the ignition to operate the lift.
4. All persons in wheelchairs use seat belts, or locking mechanisms to immobilize wheelchairs during travel.
5. Persons are transported in safety restraint seats when required by Utah State law.

6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving.
7. Persons arrive safely at the scheduled time and arranged destination, that no one is left alone along the way to or from day supports even in emergency situations or when the health and safety of others may be in question. If necessary during an emergency, the driver may wait until another driver arrives to complete the transport.

Staff Support:
Actual type, frequency and duration of support shall be defined in the person's ISP/AP based on the person?s assessed needs. Hours of support are established in the person?s ISP/AP.

Record Keeping:
In addition to the General Requirements for record keeping, the Contractor shall maintain accurate records, such as attendance records and time sheets, recording the delivery of face-to-face and direct DSI services.

Service Code: **DSP** ***Creation Date:*** 12/12/2007

Service Name: **DAY SUPPORTS- PARTIAL DAY** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

DSP provides hourly support, supervision and habilitation for individuals and groups of up to 20 children and adults in a safe, non-residential, structured community habilitation programmatic setting, or in other naturally occurring environment or community settings where people can gather in groups during the day after normally occurring school or training activities have ended. The purpose of the service is to help people avoid becoming isolated and encourages them to participate in and contribute to their community. The service also helps maintain or improves a person?s dexterity, stamina, memory, personal safety, interpersonal relations, self-help, communication, mobility, hygiene and other functional abilities and life skills. Services may include assistance with feeding and toileting, and implementation of behavioral support plans.

USSDS Rates as of 12/23/2008

Unit	*Rate Type*	*Rate*
Quarter hour	Standard	$6.30

Service Eligibility

Eligibilit	*Description*
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Day Supports- Partial Day (DSP) service provides hourly support, supervision and habilitation for individuals and groups of up to 20 children and adults. The DSP service provides a safe, non-residential, community habilitation program in a structured programmatic setting, or other naturally occurring environment or community setting where people can gather in groups during the day after normally occurring school or training activities have ended for the day or week to avoid becoming isolated and encourages persons to participate in and contribute to their community. The DSP service maintains or improves a person?s dexterity, stamina, memory, personal safety, interpersonal relations, self-help, communication, mobility, hygiene and other functional abilities and life skills. Services may include assistance with feeding and toileting, and implementation of behavioral support plans. DSP may be used to provide appropriate staff to maintain the health and safety of persons. The DSP programs should be operational for at least four hours on regular business days to allow for staggered arrivals and departures.

Limitations:
1. DSP services are intended for persons with intellectual and developmental disabilities and related conditions; DSP is not available as a self-administered service; DSP is available through provider-based services only.
2. DSP services may on occasion occur in the person?s home or residence, though this service is primarily intended to be operated from a structured programmatic setting within the community.
3. DSP services rendered consistently in a non-site setting or facility in which four or more persons participate at any one time shall be licensed in accordance with Utah Administrative Code, Rule R501, [http://rules.utah.gov/publicat/code/r501/r501.htm].
4. Services that are provided to the person and paid for by the person?s school, including transportation services, shall not be submitted to DHS/DSPD for duplicate payment.
5. Payment for transportation of persons to and from the location where DSP services are delivered is not included in this service.
6. DSP services may not be billed at the same time as any other service except for BC1, BC2, BC3, PM1 or PM2.
7. DSP services are not intended to be used in conjunction with or to supplement DSG or DSI services and may NOT be ordered for individuals receiving DSG or DSI.
8. If not otherwise specified on the worksheet, the minimum allowable DSP staff supervision ratio is not to exceed 1:6 [one (1) staff to six (6) persons].
9. In no case will more than four persons in home settings be served by the Contractor at any time; this requirement includes the Contractor?s own minor children under the age of 14 in the case of services rendered in a Contractor?s home.

DSP

Population Served:
The Contractor will serve persons currently receiving services from DHS/DSPD with intellectual and developmental disabilities and related conditions as defined in Utah Administrative Code, Rule R539-1. [http://rules.utah.gov/publicat/code/r539/r539.htm]

Contractor?s Qualifications:
If site based services are provided to four (4) or more persons at any one time, the Contractor shall have all applicable licenses as prescribed in Utah Administrative Code, Rule R501 [http://rules.utah.gov/publicat/code/r501/r501.htm] to operate and provide the particular type of services being offered and shall comply with insurance requirements and any local ordinances or permits. Non-licensed Contractor shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103. [http://www.le.state.ut.us/~code/TITLE62A/62A05.htm]

Contractor shall be enrolled as an approved Medicaid provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. The Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor shall have established policies and procedures, a copy of which shall be maintained and readily accessible at each facility. These policies and procedures shall: a). Demonstrate the development and posting of an evacuation plan in each program site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills, and b) provide provisions to govern the handling, storage, disposal and theft prevention of medication.

Contractor shall ensure that DSP staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and the contract with DHS/DSPD.

Contractor shall be under a DHS/DSPD contract to provide DSP services.

Contractor?s Staff Qualifications:
Staff shall demonstrate competency in providing DSP services, as determined by the Contractor. In addition, all applicable education, and training shall be completed before staff may perform any work for persons without supervision.

DSP staff shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and the contract with DHS/DSPD.

In accordance with Utah Code ÏÏ 62A-2-120 through 122, or Utah Administrative Code, Rule R501-14 staff working in an employment or volunteer capacity shall pass the criminal background checks conducted by the DHS, Office of Licensing (DHS/OL) annually. See http://rules.utah.gov/publicat/code/r501/r501-14.htm.

DSP staff shall be at least 18 years of age.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to complete the critical job functions for this service and orients them to the person being supported by this service. Staff training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with intellectual disability, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas one (1) through eight (8) within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 12 within six (6) months of employment. Competency for DSP staff shall include the following:

1. Knowing where to find information on who to contact in case of a question or unusual event;
2. Medication competency:
   a. Identification of common medications, their effects, purpose and side effects;
   b. Identification of medications and medication side effects specific to the person;
   c. Recording and documentation of self-administration of medications; and,
   d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.
3. Recognition of illness or symptoms of health deterioration specific to the person
4. Dietary issues specific to the person.
5. Critical health care issues specific to the person.
6. Swallowing and eating difficulties specific to the person.
7. Principles of age appropriate community inclusion and natural support development specific to the person.
8. Preferences and non-negotiable routines specific to the person.
9. Significant functional limitations and disabling conditions specific to the person.
10. Key elements of the Americans with Disabilities Act.
11. Person centered assessment and plan development.
12. How to develop and support the person?s preferred work activities.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.
1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Medication Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.

2. Once the ISP/AP has been developed, the Contractor shall orient the person to that part of the plan that pertains to the Contractor and ensure that the person is involved in its implementation.

3. The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.

4. The Contractor, as a member of the person's team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

5. The Contractor shall provide emergency procedures for fire and other disasters that require the development and posting of an evacuation plan for site based services and quarterly training on evacuation procedures and documentation of quarterly evacuation drills.

6. The Contractor under license with the DHS/OL shall assure the presence of at least one staff trained by a certified instructor, in first aid and CPR on duty with persons at all times.

7. The Contractor shall assure the presence of staff at each licensed site that is responsible for supervision of the day-to-day operations of the site and for operation of the program.

8. The Contractor shall develop and implement fiscal policies, such as internal controls, that separate payments from funding sources. Such policies shall be sufficient to ensure and document that any financial benefit realized by a Contractor as a result of a contract with a federal, state, county, city or other agency to use the Contractor facility, was of benefit to the persons receiving DSP.

9. The Contractor shall develop and implement procedures regarding behavior support plans and behavioral intervention procedures that comply with Utah Administrative Code, Rule R539-4.

10. The Contractor shall develop and implement procedures that assure proper nutrition of the person during periods of the provision of DSP, and shall be capable of providing maintenance and support of feeding.

Staff Support:
Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person?s assessed needs. Staff-to-person ratios are established in the person?s worksheet and/or ISP/AP.

Record keeping

Service Code: **DSW** ***Creation Date:*** 1/25/2001

Service Name: **Day Supports using a Worksheet** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

DSW provides non-residential community habilitation programs for children, adults and the elderly to help them gain or improve the skills that they would normally require in a structured program setting or other naturally occurring environment in their community. The service may include work related activities for adults that do not duplicate other programs, such as Utah Division of Vocational Rehabilitation. Its services are also designed to help children, adults, and the elderly to acquire the skills necessary to enjoy socializing and to fully participate and avoid becoming isolated in their homes or communities. Services are generally provided in structured programmatic settings, other naturally occurring environments in the community, or in job skills development settings. However, these services are intended to supervise and develop self-help, communication, mobility and life skills and are not primarily intended to develop or enhance vocational skills or educational achievements.

USSDS Rates as of 12/23/2008

Unit	*Rate Type*	*Rate*
Daily	Standard	$151.35

Service Eligibility

Eligibilit	*Description*
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID

Service Code

Other

General Description. . . . . .

Day Supports using a Worksheet (DSW) provides non-residential community habilitation programs for children, adults and the elderly to help them gain or improve the skills that they would normally require in a structured program setting or other naturally occurring environment in their community. DSW may include work related activities for adults that do not duplicate other programs, such as Utah Division of Vocational Rehabilitation. DSW services are also designed to help children, adults, and the elderly to acquire the skills necessary to enjoy socializing and to fully participate and avoid becoming isolated in their homes or communities. Services are generally provided in structured programmatic settings, other naturally occurring environments in the community, or in job skills development settings. However, these services are intended to supervise and develop self-help, communication, mobility and life skills and are not primarily intended to develop or enhance vocational skills or educational achievements. DSW services are rendered to persons on a group basis. DSW may be used to provide appropriate staff to maintain the health and safety of individuals during provision of MTP services so long as individuals in groups receiving DSW at the same time as MTP receive an average of 6 hours of DSW a day. DSW programs should be open for at least 7.5 hours on regular business days.

DSW is available through Provider-Based Services.

Limitations . . . . . .

1. DSW is intended for persons with acquired brain injury (ABI) over the age of 18.
2. DSW services may on occasion occur in the person?s home or residence, though this service is primarily intended to be operated from a structured programmatic setting within the community.
3. Services rendered consistently in a non-site setting in which four or more persons participate at any one time must be licensed in accordance with Utah Administrative Rule R501. [http://rules.utah.gov/publicat/code/r501/r501.htm].
4. Services reimbursed for persons eligible for services by the State of Utah Division of Vocational Rehabilitation Services are excluded for payment as a waiver service under this definition.
5. Contractor shall fully conform to Federal Department of Labor wage regulations and policies. [http://www.dol.gov/esa/whd/flsa/index.htm]
6. Transportation is not included in this service. [See MTP service description].
7. DSW may not be billed for the same day that Extended Living Supports (ELS) are billed.
8. DSW may not be billed at the same time as any other service except for MTP, BC1, BC2, BC3, PM1 or PM2.
9. DSW is not provided on holidays and weekends.

DSW

Population Served . . . . . .
The Contractor will serve people currently receiving services from DHS/DSPD with acquired brain injury (ABI), as defined in Utah Administrative Code R539-1. [http://rules.utah.gov/publicat/code/r539/r539.htm]

Contractor?s Qualifications . . . . . .
If site based services are provided to four or more persons at any one time, the Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501 [http://rules.utah.gov/publicat/code/r501/r501.htm] to operate and provide the particular type of services being offered and must comply with insurance requirements and any local ordinances or permits. Non-licensed contractors must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Annotated Ï 62A-5-103. [http://www.le.state.ut.us/~code/TITLE62A/62A05.htm]

Wages shall be commensurate for other employees performing similar labor. If the Contractor pays a person less than the minimum wage, the Contractor must have a Certificate from the Federal Department of Labor permitting payment of a sub-minimum wage. [http://www.dol.gov/esa/whd/flsa/index.htm]

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

The Contractor must ensure that the Day Supports staff is trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Contractor shall be under DHS, DSPD contract to provide DSW.

Contractor shall provide emergency procedures for fire and other disasters that require the development and posting of an evacuation plan for site-based services and quarterly training on evacuation procedures and documentation of quarterly evacuation drills.

Contractors under license with DHS, Office of Licensing shall assure the presence of at least one staff trained by a certified instructor, in first aid and CPR on duty with persons at all times.

Contractor shall assure the presence of staff at each licensed site who is responsible for supervision of the day to day operations of the site and for operation of the program.

Staff Qualifications . . . . . .
DSW staff must demonstrate competency (in the services covered by the contract), as determined by the Contractor, in addition all applicable education, and training must be completed before the delivery of any supports to persons and performing any work for persons without supervision.

DSW staff shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

DSW staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

DSW staff must be age 18 or older.

Direct Service Requirements . . . .
A. Person-Centered Planning: Contractor?s staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plans Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.
2. Once the ISP/AP has been developed, the Contractor must orient the person to that part of the plan that pertains to the Contractor and ensure that the person is involved in its implementation.
3. The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
4. The Contractor, as a member of the person's team, is required to meet at least annually (within 12 months of the last Person-Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

Staff Support . . . . . .
Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person?s assessed needs.

Record Keeping . . . . . .
In addition to the General Requirements for record keeping, the Contractor shall maintain accurate records, such as

attendance records, time sheets, of all instances of service delivery.

Service Code: DTP
Service Name: Daily Transportation Payment
Contract Type: No contract allowed for this service
Residential: No

Creation Date: 3/ 9/2006
Obsolete Date:
DSPD

Description:
DTP provides transportation for the person in order to help them gain access to waiver and other community services, activities and resources, specified by the individual support plan (ISP).

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Mile	Standard	$0.36

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code
Other
General Description:
Daily Transportation Payment (DTP) provides transportation for persons choosing Self-Administered Services (SAS) and certain other residential services.
Transportation services are offered in order to enable persons to gain access to waiver and other community services, activities and resources, specified by the individual support plan (ISP).
Persons receiving services shall be trained, assisted and provided opportunities to use regular transportation services available to the general public in their communities. Whenever possible, family, neighbors, friends, or community agencies that can provide this service without charge will be utilized.

Limitations:
DTP will not be reimbursed for medical transportation, transportation that is available at no charge, or as part of administrative expenditures. Additional transportation supports will not be available to residential or day support Contractor contracted to provide transportation to and from the person?s residence to the site(s) of a day support when payment for transportation is included in the established rate paid to the community living or day support Contractor. Only persons receiving services billed under the SLA, SLH, SLN, SEI, SED, SEE, COM, HHS, PPS, RP1, RP2, RP3, RP4 and RP5 codes may receive DTP transportation services.

Population Served:
Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and acquired brain injury (ABI), as defined in Utah Administrative Code R539-1.
http://rules.utah.gov/publicat/code/r539/r539.htm

Contractor?s Qualifications:
Contractor shall have all applicable licenses as prescribed in Utah Administrative Code R501
http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

Contractor shall be enrolled as an approved Medicaid provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor shall ensure that Transportation and other support staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Contractor shall check driver?s driving record annually and shall assure that driver?s with problematic records are not allowed to continue providing DTP services. Contractor shall check annually that drivers providing transportation in their personal vehicles have current/adequate auto insurance. Contractor shall keep documentation of this review and copies of the driver?s record and auto insurance in the driver?s file.

Contractor shall be under a DHS/DSPD contract to provide DTP services and shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103.

Staff Qualifications:
All staff shall demonstrate competency in providing DTP services as determined by the Contractor. In addition, all applicable education and training shall be completed before the delivery of any supports to persons and before performing any work for persons without supervision.

Drivers shall be trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

All staff rendering this service shall possess current and valid driver?s licenses appropriate for the rendering of this service as required by Utah Administrative Code R708, http://rules.utah.gov/publicat/code/r708/r708.htm UAC.

Drivers who provide DTP services shall be at least 18 years old.

Staff must receive training including but not limited to:
1. First aid;
2. Procedures for accidents and emergencies in the vehicle(s) at all times; and,
3. Specific techniques for safe transportation of persons who have unique medical or physical considerations.

Direct Service Requirements:
The Contractor shall make certain that:

1. Persons are not left unattended in the vehicle.
2. Persons remain seated while the vehicle is in motion.
3. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively operating a lift on vehicles that require the keys to be in the ignition to operate the lift.
4. All persons in wheelchairs use seat belts, or locking mechanisms to immobilize wheelchairs during travel.
5. Persons are transported in safety restraint seats when required by Utah State law.
6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving.
7. Persons arrive safely at the scheduled time and arranged destination, that no person is left alone along the way to or from day supports even in emergency situations or when the health and safety of others may be in question. If necessary during an emergency, the driver may wait until another driver arrives to complete the DTP service.
8. Failure to serve the person under these terms may be cause for termination of this service.

Staff Support:
Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person?s assessed needs. Hours of support are established in the person?s ISP/AP.

Record keeping
In addition to the General Requirements for record keeping, the Contractor shall maintain accurate records, such as transportation records, pick-up and delivery sheets and time sheets, recording the delivery of DTP services.

Rate:
DTP provides a daily payment for transportation to and from a person's home or living facility to community habilitation programs or facilities that provide day supports. The DTP mileage rate is the same as the mileage rate established by the

Service Code: **EA1** ***Creation Date:*** 1/25/2001

Service Name: **Environmental Accessibility Adaptations Home** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:
EA1 allows for making physical adaptations to the home that are needed to ensure the health and welfare of the individual, or enable the individual to function with greater independence in the home.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Personal Need	Standard	$10,000.00

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Population Served
Services are provided to individuals who are found eligible by DHS?DSPD. Eligibility codes that are open to this service are SM and SG.

Record Keeping
The contractor must follow state purchasing policy which includes getting price quotes from three vendors. If three are not available, a minimum of two quotes must be obtained. A copy of the bid requests and invoices will be kept with the Support Coordinator, by client. All purchases over $5000 must be processed at the State DSPD office.

Tx/Serv Requirement
Reasons for adaptations are to be documented in the individuals service plan.

Rate
$1 to $10,000 per location.

Service Code: **EA2** ***Creation Date:*** 1/25/2001

Service Name: **Environmental Accessibility Adaptations - Vehicular** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:
EA2 allows for modifying of the client?s vehicle as needed to ensure the health and welfare of the client, or enable the individual to function with greater independence.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Personal Need	Standard	$10,000.00

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan
Reasons for adaptations are documented in the individuals service plan.

Population Served
Services are provided to clients who are found eligible by DHS/DSPD. Eligibility codes open for this service are SM and SG.

Record Keeping
The contractor must follow State Purchasing Policy, which included getting bids from three vendors. If three are not available, a minimum of two quotes must be obtained. A copy of the bid requersts and invoices will be kept by the suport coordinator, by client. All purchases over $5000 must be processed by the State DSPD office.

Rate
Up to $10,000 per client/vehicle.

Service Code: **ELS** ***Creation Date:*** 3/ 8/2006

Service Name: **Extended Living Supports** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

ELS provides hourly supervision, socialization, personal care and supports for persons who reside in a community living setting who do not normally attend an employment, day or school program. Usually, this service is provided for short periods of time, such as during times of illness, recovery from surgery, breaks from school and/or transition between service providers. The service may also be used on a flexible basis to accommodate the person?s needs, such as time between the school day and when residential services begin if time between school and home fluctuates regularly.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$3.91

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Extended Living Supports (ELS) provide hourly one-on-one or group supervision, socialization, personal care and supports for persons who reside in a community living setting who do not normally attend an employment, day or school program. Usually, this service is provided for short periods of time, such as during times of illness, recovery from surgery, breaks from school and/or transition between service providers. ELS may also be used on a flexible basis to accommodate the person?s needs, such as time between the school day and when residential services begin if time between school and home fluctuates regularly. The focus of this support is an extension of the objectives/goals found in the individual?s support plan. When the individual shares staff with another consumer, the total number of hours billed for each individual will be reduced proportionately. The following services are included as part of the ELS code and will not be reimbursed separately:

Chore Services (CH1, CHA)
Companion Services (COM, CO1)
Homemaker Services (HS1, HSQ)
Personal Assistance (PA1, PAC)
Routine, Non-medical Transportation (DTP)

ELS is available through Provider-based services only.

Limitations:
ELS services are for extra residential coverage only, and supplements RHI (previously CLI), RHS (previously CLS), HHS, and PPS services only. For persons who may need long term extended supports, the RHS, RHI, HHS, or PPS worksheet shall be modified to reflect the change in level of support to a 24 hour, 7 day per week reimbursement. ELS is not available to children living in their parent?s or legal guardian?s home. Persons receiving services billed under the ELS service code may not simultaneously receive services billed under the CH1, CHA, COM, CO1, HS1, HSQ, PAC, PA1 or DTP service codes. All of the requirements listed in the qualifying residential code shall apply to ELS. Contractor shall review the residential code partnered with ELS for additional ELS requirements.

Population Served:
The Contractor will serve persons with mental retardation and related conditions (MR.RC), and adults aged 18 an over who have an acquired brain injury (ABI), as defined in Utah Administrative Code R539-1.

http://rules.utah.gov/publicat/code/r539/r539.htm Persons must be current recipients of RHS or RHI, HHS, or PPS services.

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501 (http://rules.utah.gov/publicat/code/r501/r501.htm) to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

Contractor must be enrolled as an approved Medicaid Provider with the Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor shall be under DHS, DPSD contract to provide ELS and certified by DHS/DSPD.

Staff Qualifications:
ELS staff must demonstrate competency (in the services covered by the contract), as determined by the Contractor. In addition, all applicable education, and training must be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Contractor must ensure that ELS staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

ELS staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

ELS staff must be at least 18 years old

All requirements listed in the applicable Residential Service Descriptions for the person (RHI, RHS, HHS or PPS apply to ELS).

Staff Support:
ELS may include 6 hour one-on-one or group direct care staff support. Actual type, frequency and duration of direct care staff support will be defined in the person's Individual Support Plan?s Action Plan (ISP/AP) based on the person?s selected housing arrangement and assessed needs.

Rate:
ELS may include 6 hour one-on-one or group direct care staff support. Payments for residential services are not made for room and board, the cost of facility maintenance, routine upkeep or improvement. Personal needs costs are covered through personal income such as Social Security and other income (SSA, SSI, employment).

Service Code: **FMS** ***Creation Date:*** 3/ 1/2006

Service Name: **Fiscal Management Service** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

FMS is an alternative to the Provider Agency Service model that offers persons with mental retardation or related conditions, brain injury, or physical disabilities and their families the choice of using Self-Administered Services (SAS). SAS allows the person to hire, train, and supervise employees who provide the direct services they need.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Month	Low Tier	$30.96
Month	High Tier	$101.25

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description: (07/31/07)
Self-Administered Services (SAS) offer an alternative to Provider Agency Services by allowing persons with mental retardation or related conditions, acquired brain injury, or physical disabilities (?Persons?) and their families to hire, train, and supervise employees to provide direct services. Pursuant to Federal law pertaining to Home and Community Based Services waivers (Title 42, Code of Federal Regulations), payment for services rendered under the SAS method may be effected only by using the services of a Financial Management Service intermediary (?Fiscal Agent?). Waiver enrollees may receive any service offered within each of the applicable waiver programs in which they are enrolled. Only those persons who the Support Coordinator has determined are qualified for the following services may elect to participate in the SAS method for the procurement of these services.

Utah Community Supports Waiver	Service Code	
Chore Services (Individual)	CH1	
Companion Services		CO1
Family Training and Preparation Services	TF1	
Homemaker Services (Individual)	HS1	
Personal Assistance Services		PA1
Respite Care (Parent Managed)		RP1
Respite Care (Parent Managed)		RP6
Group Respite		RP7
Group Respite with Room and Board included	RP8	
Supported Living	SL1	
Transportation Services		DTP

Acquired Brain Injury Waiver	Service Code	
Chore Services (15 min.)	CH1	
Homemaker Service		HS1
Respite (Level 1), unskilled (15 min.)	RP1	

Respite (Level 1), unskilled (day)	RP1
Supported Living (15 min.)	SL1
Transportation (per mile)	DTP

Physical Disabilities Waiver	Service Code
Personal Attendant Care	PA1

Persons with disabilities and their families ("Client") hire staff ("Employee") in accordance with Federal Internal Revenue Service ("IRS") and Federal and State Department of Labor ("DOL") rules and regulations (IRS Revenue Ruling 87-41; IRS Publication 15-A: Employer's Supplemental Tax Guide; Federal DOL Publication WH 1409, Title 29 CFR Part 552, Subpart A, Section 3: Application of the Fair Labor Standards Act to Domestic Service; and states = ABC Test).

The Fiscal Agent (?Contractor?) is a private or public entity that is approved by the IRS (under IRS Revenue Procedure 70-6) to act as the client's intermediary for the purpose of managing employment taxes, including income tax withholding, FICA, FUTA/SUTA, and brokering/managing benefits, including worker's compensation and state disability insurance premiums (if applicable). The Contractor collects employment documents and verifies signatures from clients prior to distributing paychecks to the client's employees. The client remains the employer of record, retaining control over the hiring, training, management, and supervision of employees who provide direct care services.

Once a client is determined eligible for any of the above listed services and chooses to participate in SAS, the client?s Support Coordinator shall assist the client in the development of a Support Plan. The Support Coordinator shall assure that the client meets the Medicaid compliance requirements necessary to participate in this program. The Support Coordinator shall provide the client with choices for a fiscal agent contractor. Once the client makes a selection, the Support Coordinator shall refer the client to the chosen contractor for financial management services.

The Support Coordinator shall give the Contractor a copy of the client's approved budget worksheet. It will indicate the client's total amount of authorized resources. The client?s account will then be opened for a rate to cover the costs of issuing employee wages and benefits, record keeping, reporting and training for both clients and the Contractor?s staff. The authorized rate will include the Contractor's service charge.

The Contractor shall process employee timesheets, generate payments, withhold all required state and federal taxes according to IRS and DOL rules and regulations, and maintain accurate records of the client's current available resources. Clients receiving services from the Contractor are limited by their own budget. It is the responsibility of the Contractor to monitor the cutoff of the budget according to the allocation in the client's Support Plan, and to notify the client?s Support Coordinator as the total annual allocation of resources in terms of units of service and dollars is approached.

The Support Coordinator shall monitor payments and assist in resolution of billing problems on a limited basis, if needed.

Population Served

The Contractor will serve children and adults currently receiving services from DHS/DSPD with mental retardation and related conditions, and adults age 18 and older with acquired brain injury (ABI) or physical disabilities (PD), as defined in Utah Administrative Code, Rule R539-1. (http://rules.utah.gov/publicat/code/r539/r539.htm)

Contractor?s Qualifications

The Contractor shall have all applicable licenses as prescribed in Utah Administrative Code, Rule R501 to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed Contractor shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103.

The Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and shall possess a current and valid National Provider Identification number (NPI) and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. The Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

In addition, the Contractor shall:

A. Retain on staff a Certified Public Accountant with at least five years of experience.

B. Obtain a Federal Employer Identification Number (EIN) by filing the IRS Form SS-4, Application for Employer Identification Number.

C. Have a basic understanding of developmental disabilities.

D. Understand the philosophy and practice of SAS, as determined by the Contractor. The Contractor?s staff must be trained in the principles of self-determination within one year of the effective date of this contract for current staff members or one year of the date of hire for new staff. Successful completion of the training, as determined by the Contractor, must

be documented in each staff member's personnel file.

E. Have sufficient resources necessary to make payroll at least twice monthly.

F. Maintain a Utah-based accounting department and/or customer service department with staff assigned to this office that reside within the State of Utah whenever the Contractor is serving 200 or more persons within the State of Utah. This customer service department will be staffed with sufficient resources to allow operations between the hours of 9:00 AM and 5: 00 PM during normal business days, excluding legal holidays and will be available to assist persons who require assistance with regard to their Financial Management Service, either telephonically or in person through visits to the office. At all times, the Contractor shall maintain a telephone-based customer service department with TTY capabilities that will allow operations between the hours of 9:00 AM and 5: 00 PM during normal business days, excluding legal holidays and will be available to assist persons who require assistance with regard to their Financial Management Service.

G. Maintain a claims processing system that is Medicaid compliant as determined by the Bureau of Medicaid Operations. However, the Contractor shall submit all claims for services under this FMS service code, including a breakdown of services paid by client and service code, to DHS for payment.

H. Ensure that all of its staff who have any role or responsibility surrounding the oversight or management of DHS/DSPD or client resources pass a background investigation conducted by the Bureau of Criminal Identification (BCI) through the DHS Office of Licensing, including a query of the National Crime Information Center (NCIC) in the case of staff who have resided outside the State of Utah for a period exceeding six (6) weeks during the past five (5) years. The Contractor shall maintain the results of these background investigations in the personnel file of each staff member, and those that have been found to possess a criminal record involving crimes of fraud or finance shall be barred from employment in any service involving oversight of funds.

Staff Qualifications:

All staff shall demonstrate competency (in the services covered by the contract), as determined by the Contractor. In addition, all applicable education, and training shall be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Contractor shall ensure that Contractor?s FMS staff are trained in the applicable Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and Contract.

The Contractor?s professional staff shall be licensed and in good standing in their state of practice. The Contractor?s professional staff providing services in the State of Utah shall be licensed and in good standing according to the applicable license and standards of the Division of Occupational Professional Licensing.

Direct Service Requirements:

A. Person-centered Assistance

The Contractor shall:

1. Obtain a completed and signed Form 2678, Employer Appointment of Agent, from each client receiving services from the Contractor, in accordance with IRS Revenue Procedure 70-6.

2. Provide all clients with a packet of all of the forms required when using a Fiscal Agent, including all tax forms (IRS Forms W-4 and 2678), Immigration forms (INS form I-9), payroll schedules, and Contractor's contact information, and training materials.

3. Verify that clients? employees complete the following forms, copies of which shall be maintained by the Contractor:
a. INS Form I-9, including readable supporting documentation (i.e. copies of employee?s driver's license, social security card, passport). If fines are levied against a client for failure to maintain required documentation regarding employability, and the Contractor has failed to maintain readable copies of the required documentation in support of the client, the Contractor shall be responsible for all resulting fines. Contractor must ensure that both Part(s) A and B of the Form I-9 are accurately completed.
b. IRS Form W-4
c. IRS Form SS-4 authorizing the FMS to file on their behalf a request to obtain an Employer Identification Number (EIN).

4. Ensure that all clients? employees submit to and successfully pass a background investigation conducted by the BCI, including a query of the National Crime Information Center (NCIC) in the case of employees who have resided outside the State of Utah for a period exceeding six (6) weeks during the past five (5) years.
a. The Contractor shall advise clients that pursuant to Utah Code Ï 62A-2-120, clients must submit the forms necessary to complete background checks of their employees to the Background Check Coordinator at the DHS/DSPD State Office. The required forms shall be submitted within thirty days of an employee?s hire date.
b. The Contractor shall not process any payroll payments for employees who fail to submit to a background investigation within thirty days of employment, until such time as the employee submits to such a background investigation.
c. The Contractor shall also ensure that a report is made to the Background Check Coordinator of DHS/DSPD whenever an

employee fails to submit to a background check within 30 days of hire, or a client fails to submit the paperwork necessary to obtain an employee background check within 30 days of hire.

5. Generate and issue paychecks to clients? employees based on DHS/DSPD approved employee timesheets.

6. Withhold and deposit all required income taxes and FICA and SUTA/FUTA payments on behalf of its clients. Any federal and/or state penalties assessed for failure to withhold the correct amount and/or for untimely filing and depositing, shall be paid by the Contractor.

7. Assist clients in procuring benefits, including the processing of premiums (e.g., Workers? Compensation, health, life, etc.) and managing any withholding, when applicable.

8. Maintain a customer service system for clients and employees who may have billing questions or require other assistance. As part of its customer service system, the Contractor shall:
a. Maintain an 800 number for calls received outside the immediate office area.
b. Return messages within 24 hours of their receipt Monday thru Friday. Messages left between noon on Friday and Sunday evening shall be returned the following Monday.
c. Have the capability to provide assistance in English and Spanish.
d. Have the capability to provide assistance through TTY.

9. Obtain IRS approval for Agent status and file consolidated payroll reports for multiple employers. The Contractor must obtain federal designation as Fiscal Agent under IRS Rule 3504 (Acts to be Performed by Agents). A Fiscal Agent applicant must make an election with the appropriate IRS Service Center via Form 2678 (Employer Appointment of Agent). The Contractor will, if required, comply with IRS Regulations 3306(a)(3)(c)(2), 3506 and 31.3306(c)(5)-1 and 31.3506 (all parts), together with IRS Publication 926, Household Employer's Tax Guide.

The Contractor shall consolidate the federal filing requirements, and obtain approval for consolidated filing for unemployment insurance through the Department of Workforce Services.

B. Timesheet System

1. The Contractor shall maintain a timesheet system that records the client?s name and identifying number, the name of the employee actually rendering the service to the client, the date each service is rendered, the type of service rendered on each date, and the time the employee commenced and ended each service delivery. In the case of multiple services offered to the client on the same date, the timesheet shall specify both the types of services rendered and the time the employee commenced and ended service delivery for each service rendered.

2. The Contractor shall record timesheet information in an electronic database. The database shall maintain the same level of detail as is recorded on the timesheet submitted by the employer, including the name of the employee rendering the service, the date the service was rendered, the type of service rendered, and the time service delivery both commenced and ended. In the case of multiple services offered to the client on the same date, the database shall record this same information for each service rendered.
a. The Contractor shall generate a spending summary report for each client that details the number of units used and the dollar amount spent on each service during each pay period. The report shall also detail the number of available units remaining for each service as well as the total dollar amount remaining for the purchase of services. The Contractor shall reconcile employee time to paid units on the client level.
b. The Contractor shall provide the client with training on how employees properly enter their time into the timesheet.

C. Payroll Support Request

The Contractor shall issue payroll on a semi-monthly basis to the client?s employees. The Contractor shall adhere to the processing guidelines listed below:

1. The Contractor shall approve payrolls and submit requests for payroll support payment to DHS/DSPD only for payrolls that are supported by timesheets that contain the signatures of both the client as well as the employee and which contain a specification of the hours worked including date, time of start and finish of service, and the type of service for each employee performing a service on each date for which a service is rendered.

2. Payrolls shall only be processed by the Contractor and submitted to DHS/DSPD for payroll support payment when the payrolls are within the budget allocated for each client with regard to both units of service available within those budget(s) as well as remaining funds for those services available within the budget.

D. Reporting Requirements

1. All reports must be in writing and maintained at the Contractor?s place of business. The Contractor shall maintain a monthly and year-to-date summary of monies paid specified by client. DHS/DSPD reserves the right, at any time, to request these summaries for review and audit.

2. Spending Summary Report

The Contractor shall ensure that the client does not authorize payment for employee payroll expenses in excess of their annual budget. The Contractor shall assist the client in managing available resources by issuing an easy to read report indicating the remaining resources available expressed in both units of service as well as funds available to the client for each service and in total. This report shall be entitled the Spending Summary Report and it shall be issued bi-weekly in conjunction with each pay period.

3. The Contractor shall generate the following report, which shall be delivered to the client no later than the 15th day after the issuance of a payroll support request for the final payroll of each month:

Client Spending Detail Report
The report shall be mailed or otherwise provided to the client monthly and provide check-level detail, grouped by service, including summaries of account activity by day with budget variances. Details must be tied to the budget and the Spending Summary Report.

4. The Contractor shall generate the following report that shall be delivered to the client?s support coordinator no later than the 15th day after the issuance of a payroll support request for the final payroll of each month:

Case Load Summary
The report shall be mailed via U. S. Postal Service or e-mailed to DHS/DSPD regional offices and support coordinators monthly and shall summarize the spending history of each client receiving services. Information shall include, beginning allocations, fund transfers, ending allocations, actual expenses paid, the number of units of each type of service delivered, and current year-to-date totals as of the date the last payroll was issued, including an estimate of reasonably expected current obligations.

5. In addition, the Contractor shall issue the reports below, upon the request of DHS/DSPD to DHS/DSPD management. DHS/DSPD management reports shall be delivered electronically via e-mail to: cabee@utah.gov. These reports shall be produced using Microsoft Excel or other agreed upon format.
a. Detail by Client
This report shall be submitted quarterly no later than the 15th day after the conclusion of each fiscal quarter to DHS/DSPD management and provide a year-to-date spending detail for each client. Information shall include, payment amounts, the number of units used, cost per unit, service dates, and service descriptions.
b. Detail by Employee
This report shall be submitted quarterly no later than the 15th day after the conclusion of each fiscal quarter to DHS/DSPD management and provide a year-to-date spending detail by employee. Information shall include client name, employee name, payment dates, amounts, service code, service date, and service description.
c. Current Employee List
This report shall be issued no later than the 15th of each month and shall list all employees open during the preceding two payroll periods identified by the identification (ID) numbers of the client served. This report shall also contain a complete listing of the demographics and identifying information retained by the Contractor for each employee listed.

6. The Contractor shall submit to DHS/DSPD no later than the 15th of the month following the close of each fiscal quarter, copies of the quarterly report detailing the Federal employment tax filings as well as reports summarizing quarterly FUTA filings and annual SUTA filings for each employee to the Department of Workforce Services.

7. The Contractor shall annually provide to DHS/DSPD management an electronic copy of each employee?s IRS W-2 and W-3 forms. This submission shall be made no later than the 31st of March of the year succeeding the year being reported.

E. Quality Enhancement

1. The Contractor shall develop a back-up plan for processing payment in the event the computerized system goes down for any period of time. The plan should ensure that payments are not delayed.

2. The Contractor shall develop a system to prevent overpayments including edits or other technologies to prevent the payment of duplicate or overlapping claims for payment or salary. Clients shall have access to current information regarding authorized resources expressed in both units of service as well as funds. The Contractor shall be responsible for reimbursing DHS/DSPD for any amounts disbursed in excess of authorizations given by DHS/DSPD.

3. The Contractor shall develop a process to ensure that all timesheets are approved prior to payment and that only current employees are receiving paychecks.

F. Training Requirements

The training requirements are as follows:

1. The Contractor shall offer training to persons, their families and legal representatives regarding methods of interviewing,

selecting and hiring staff, legal requirements for retaining and discharging staff, methods of staff supervision, and such other topics as are required, in the opinion of the Contractor to assist persons to effectively self-administer their services; and,

2. The FMS shall provide information and training to the client to permit them to complete the requisite paperwork for employment and payroll purposes of their employees.

Should the person, his/her family, or legal representative require additional training beyond that which is routinely offered by the FMS Contractor, those services may be offered utilizing the Family Training and Preparation (TF1,TFA) or the Family and Individual Training and Preparation Services (TFB), as determined by the person-centered planning team (PCP).

G. Special Record Keeping Requirements

1. The Contractor shall maintain current client and employee files on site of the business location. Should the Contractor maintain a business location within the State of Utah, these files shall be maintained at the Contractor?s Utah location. Files will contain the client and employee's personnel documentation, as applicable (i.e., Form I-9, Form W-4, copy of employee?s driver's license, current address, work status, etc.).

2. All records and reports, maintained by the Contractor in performance of its obligations under this service description, shall conform to a format proposed by the Contractor and agreed to by DHS/DSPD. This requirement shall pertain to records including but not limited to timesheets, client detail spending reports, caseload summary reports, detail by client reports, detail by employee reports, current employee lists as well as quarterly and annual FUTA and SUTA filings and any other reports required by DHS/DSPD. Reports not furnished in the format proposed by the Contractor and agreed to by DHS/DSPD will not be accepted by DHS/DSPD.

H. Transitions between FMS providers

1. Upon reaching the decision to change FMS providers, persons or their representatives will be expected to provide formal notification to their Support Coordinator and to their existing FMS of their intention to discharge them and retain a replacement FMS, at the same time as they notify the on-coming FMS of their intention to engage them.

2. When a person informs a Financial Management Service provider (FMS) of his/her intent to engage them in replacement of their existing FMS provider, the on-coming FMS will immediately send the person, or their representative, a packet of enrollment forms that will include, at a minimum:

a. A form authorizing the on-coming FMS to file on their behalf an Internal Revenue Service (IRS) Form SS-4 to obtain an Employer Identification Number (EIN). Alternatively, the on-coming FMS contractor may simply make contact with the DSPD State Office at 801-538-4202 to inquire of and receive the EIN of the transitioning client.;

b. An IRS Form 2678 designating the on-coming FMS as that person?s new fiscal agent, to be returned to the on-coming FMS for filing with the IRS;

c. A draft letter conforming to the instructions contained within Internal Revenue Bulletin: 2003-43 informing the Internal Revenue Service of the person?s (or their representative?s) decision to terminate the services of their previously designated FMS, which when executed by the person or their representative, will be returned to the on-coming FMS for filing with the IRS; and, an IRS Form 8821 conveying the client?s limited Power of Attorney to the on-coming FMS contractor, though the inclusion of this form is optional based on the normal business practices of the on-coming FMS contractor, and is NOT required by DHS/DSPD.

d. A form requesting the out-going FMS to furnish to the DSPD State Office the following information:

1) Employer FEIN;
2) Employer State ID number;
3) Employer SUTA ID number; and,
4) The person?s USSDS identification number.

3. When the person or their representative notifies their support coordinator of their intent to transfer FMS providers, the support coordinator will review with the person or their representative their current expenditure of funds for the purchase of services and any forecasted expenditures through the end of the current month, until the on-coming FMS assumes fiscal agency. The support coordinator will also consult with the out-going FMS to receive their input based on history regarding expected remaining expenditures and obligations that the person may reasonably be expected to have incurred (but not yet paid) or to incur through the end of the month in which the notice of intent to transfer is given. Based on this discovery, the support coordinator will cause a revised DHS Form 1056 to be issued to the outgoing FMS specifying the remaining funds that the out-going FMS is authorized to process for the person. The on-coming FMS will be issued a DHS Form 1056 detailing the funds that the FMS is authorized to process on behalf of the person in their assumption of fiscal agency. In addition, the person?s support coordinator will cause to be issued within five (5) business days of receiving notice of a client?s intent to transfer to a different FMS Contractor or terminate FMS service altogether, a letter to the out-going FMS (DHS/DSPD Form 2-9T)from the Department, officially terminating the FMS service by the out-going Contractor for the particular person effective the last day of the month in which notice of intent to transition or terminate FMS service was tendered to the person?s support coordinator, if such notice of intent to transfer or terminate FMS service is tendered by the 15th day of the month, and effective the last day of the succeeding month if notice is tendered following the 15th day of the month.

4. The out-going FMS provider?s authorization to provide FMS services to the individual will expire on the last day of the

month in which notice of intent to transition or terminate FMS service was tendered to the person?s support coordinator, if such notice of intent to transfer or terminate FMS service is tendered by the 15th day of the month, and will expire on the last day of the succeeding month if notice is tendered following the 15th day of the month. The on-coming FMS provider?s authorization to begin providing FMS services for the individual will be effective on the first day of the first pay period of the month following the month in which the individual has tendered the notice of intent to transfer if such notice is tendered by the 15th day of the month and will be effective on the first day of the first pay period of the second month if notice is tendered following the 15th day of the month. Unanticipated or late claims for expenditures submitted by the client within the first fourteen (14) days of the first month of service of the new FMS contractor may be submitted to the former FMS contractor for payment, and the former FMS contractor will be reimbursed for these payments, once the claims are verified, by DHS/DSPD. Late claims for payment or reimbursement of expenditures incurred during the service of the former FMS provider submitted after the first fourteen (14) days of the first month of service of the new FMS contractor will NOT be considered for reimbursement by DHS/DSPD, unless the express approval of the DHS/DSPD Regional Director is obtained in special circumstances.

5. The on-coming FMS will report to DHS/DSPD no later than the last business day of each month that it is engaged by a new client, a list of all employees for that client for which it is providing payroll service, for the purposes of ensuring that appropriate criminal background investigation (CBI) materials have been submitted for review and clearance pursuant to Rule R501-14, UAC. This list will include all employees for each client served by the FMS, though subsequent lists will require only the identifying information for all employees newly hired during succeeding months. This list will be furnished to DHS/DSPD?s Background Screening Technician who will review the list and notify the FMS of any employees who have failed to be successfully cleared. This procedure will be deemed by DHS/DSPD as the FMS?s satisfaction of its obligations contained within the Direct Service Requirements, Section A (4)(b) of Part II (Scope of Work and Special Conditions) of their contract with DHS.

6. The on-coming FMS will assume fiscal agency on the first day of the first pay period of the calendar month following their receipt of notice from the person or the person?s representative of their desire to engage them. Such notice will be required from persons no later than the 15th day of the month. This interval has been selected to allow sufficient time for the processing and filing of forms required by the IRS, the processing and filing of CBI clearances, and to allow the existing FMS the opportunity to explore remediation or reconciliation with the person or their representative. Failing any such remediation or reconciliation however, the on-coming FMS will assume fiscal agency on the first day of the first pay period of the month following their receipt of notification of the person (or their representative?s) intent to transfer FMS providers. Should the person accept the remediation or reconciliation efforts of their existing FMS, that existing FMS will be required to file a new Form 2678 with the IRS, unless a letter terminating their fiscal agency, pursuant to Internal Revenue Bulletin 2003-43 has NOT been filed by the person or his/her representative. Nothing in this section shall be construed as permitting any actions on the part of the existing FMS Contractor to obstruct or impede in any way or otherwise adversely influence the person?s choice to change FMS contractors, and no such actions are permitted under any circumstances.

7. Since transitions between FMS contractors will occur at the start of the first pay-period in the month, it is expected that FMS contractors will be paid on a per person per month basis using rates established and published by the Department with split-billings not permitted.

8. FMS providers may bill for their fee during the first month of transition and for any subsequent months in which the Contractor is on record and opened as the FMS provider for the person.

I. Limitations:

The Contractor shall not provide clients with home or community-based services in addition to FMS services.

J. Rates The following rate table is provided (FY08 rates beginning July 1, 2007):

SERVICE CODE DESCRIPTION OF SERVICE UNIT NEW CONTRACTOR RATE ($)
FISCAL MANAGEMENT SERVICES (FMS) CONTRACTED RATES

Service Code: **FP1**

Service Name: **Fingerprinting Services**

Contract Type: Open or non-fixed dollar amount contract required

Residential: No

Creation Date: 9/ 1/2005

Obsolete Date:

DSPD

Description:

FP1 provides reimbursement for the fee charged by local law enforcement agencies that offer fingerprinting services to potential and/or existing employees of families using the self-administered services model.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Personal Need	Standard	$16.00

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
PG	NON-MEDICAID ASSISTANCE
SG	SELF DETERM NON-MEDICAID

Service Code

Other

This code is to provided reimbursement of the fee charged by local law enforcement agencies providing fingerpringing services to potential and/or existing employees of famlies using the self-administered services model. Only fingerprinting performed by local authorities will be reimbursed under this code. The reimbursement will be paid using a fiscal agent or

Service Code: **FS1**

Creation Date: 1/25/2001

Service Name: **Family Support Own Home Model (Parent Managed Services)**

Obsolete Date:

Contract Type: No contract allowed for this service

DSPD

Residential: No

Description:

Family support provides direct support designed to increase the capabilities of families to care for their family member with disabilities in their natural home setting. Support is offered in one or more of the following areas: developmental programming to assist in the acquisition of self care, communication, mobility, and social skills; behavior management techniques, specialized intervention for dealing with unique health needs of the individual; and any other training or assistance which enables the family to maintain the person with disabilities at home and contribute to his/her growth and well being. The parent managed service model provides the parent the opportunity to hire the employees under a Fiscal Agent Model.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$2.98

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: **FS5** ***Creation Date:*** 1/ 1/2005

Service Name: **Family Supports for the Brain Injury Specific Program** ***Obsolete Date:***

Contract Type: Either a non-fixed or fixed amount contract required DSPD

Residential: No

Description:

Family assistance and support serves the purpose of enabling the family member with An acquired brain injury , who so desires, to remain in and be supported in the family home. FS5 is intended to support both the family member with a disability and the rest of the family to live as much like other families as possible with the intent of preventing or delaying unwanted out of home placement. Services are provided intermittently on a consulting basis by a professional with a bachelors degree in social work or behavior sciences or four years full time paid work experience in a related field.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$3.80

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID

Service Code

Other

General Description: Family Assistance and Support (FS5) serves the purpose of enabling the person with an Acquired Brain Injury (ABI), who desires to remain in and be supported in the family home. FS5 is intended to support both the person with a disability and the rest of the family to live as much like other families as possible with the intent of preventing or delaying unwanted out of home placement. The services can include training in areas such as parenting, skill training for daily living or social-leisure-recreation, behavior management and coordinating with school and others.

Family Support Requirements: FS5 is designed to prevent unwanted out of home placement and/or institutionalization and can be provided either in or out of the home to a person and his/her family These supports may include provisions to accommodate the person's disability in accessing supports offered in the community, providing instructions, supervision and training to the family/caregiver/person in all areas of daily living. The supports may also include other activities that are identified in the person's Person Centered Support Plan (PCSP) as necessary for continued skill development.

Skill development supports may include:
1) Developing interventions to cope with problems or unique situations that may occur within the complexity of the family,

2) Techniques of behavior supports,
3) Enrollment in special summer programs,
4) Social skills development,
5) Appropriate leisure time activities,
6) Instruction and consultation for the person with disabilities, the parent and/or sibling(s).

The Contractor will provide a written plan including a minimum of the following components:
1) Documentation of the person's choice of service,
2) Statement of justification,
3) A support need identified in the PCSP written as a goal and/or support,
4) Time frames established to identify how long this service is needed.

Eligibility Description:

BG BRAIN INJURY GENERAL FUND
BM BRAIN INJURY MEDICAID

Population to be Served: Family Training for the person and the person's family is available to persons age 18 and over and who are eligible for the Home and Community Based Waiver for persons with an ABI.

Contractor Qualifications The Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. The Contractor must also agree to participate in any DHS/DSPD provided Medicaid training. The Contractor must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ann. ü 62A-5-103.

The Contractor shall have all applicable licenses or certifications as prescribed in Utah Administrative Code, Rule R501 found at http://www.le.state.ut.us/~code/TITLE62A/62A05.htm.r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

Staff Qualifications. Services are provided intermittently, on a consulting basis, by a professional with a bachelor's degree in social or behavior sciences, or four years of full time paid work experience in this or a related field.

Staff to Person Ratio: Staff to person ratio is 1:1 or less, if more than one person is receiving the support at the same time. For those situations where two or more people are being served at the same time, the rate would be split accordingly.

Limitations: For alternative supports, please refer to Supported Living (SLH) and Community Living Supports (CLS) Services.

Service Code: **FS6** ***Creation Date:*** 1/ 1/2005

Service Name: **Family Supports for the Brain Injury Specific Program** ***Obsolete Date:***

Contract Type: Either a non-fixed or fixed amount contract required DSPD

Residential: No

Description:

Family assistance and support serves the purpose of enabling the family member with An acquired brain injury , who so desires, to remain in and be supported in the family home. FS6 is intended to support both the family member with a disability and the rest of the family to live as much like other families as possible with the intent of preventing or delaying unwanted out of home placement. Services are provided intermittently on a consulting basis by a professional with a masters degree in social work or behavior sciences or six years full time paid work experience in a related field.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$5.42

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID

Service Code

Other

General Description:

Family Assistance and Support (FS6) serves the purpose of enabling the person with an Acquired Brain Injury (ABI), who desires, to remain in and be supported in the family home. FS6 is intended to support both the person with a disability and the rest of the family to live as much like other families as possible with the intent of preventing or delaying unwanted out of home placement. The services are highly personalized specific techniques addressing behavior, communication, social and cognitive skills and facilitate conflict resolutions with other support providers.

Service Requirements:

FS6 is designed to prevent unwanted out of home placement and/or institutionalization and can be provided either in or out of the home to a person and his/her family. These supports may include provisions to accommodate the person's disability in accessing supports offered in the community, providing instructions, supervision and training to the family/caregiver/person in all areas of daily living. The supports may also include other activities that are identified in the person's PCSP as necessary for continued skill development.

Skill development supports may include:
1) Developing interventions to cope with problems or unique situations that may occur within the complexity of the family,

2) Techniques of behavior supports,
3) Enrollment in special summer programs,
4) Social skills development,
5) Appropriate leisure time activities,
6) Instruction and consultation for the person with disabilities, the parent and/or sibling(s).

The Contractor will provide a written plan including a minimum of the following components:
1) Documentation of the person's choice of service,
2) Statement of Justification,
3) A support need identified in the PCSP written as a goal and/or support,
4) Time frames established to identify how long this service is needed.

Eligibility Description:

BG BRAIN INJURY GENERAL FUND
BM BRAIN INJURY MEDICAID

Population to be Served:

Family Training for the person and the person's family is available to persons age 18 and over and who are eligible for the Home and Community Based Waiver for persons with an ABI.

Contractor Qualifications

The Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. The Contractor must also agree to participate in any DHS/DSPD provided Medicaid training. The Contractor must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ann. Ï 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm.

The Contractor shall have all applicable licenses or certifications as prescribed in Utah Administrative Code, Rule R501 found at http://www.le.state.ut.us/~code/TITLE62A/62A05.htm.r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

Staffs Qualifications

Services are provided on an infrequent, consulting basis by a mental health professional with a master's degree in social or behavior sciences, or six years of full time paid work experience in this or a related field.

Staff to Person Ratio:

Staff to person ratio is 1:1 or less, if more than one person is receiving the support at the same time. For those situations where two or more people are being served at the same time, the rate would be split accordingly.

Limitations:

For alternative supports, please refer to Supported Living (SLH) and Community Living Supports (CLS) Services.

Rate:

FS6 is usually purchased separately from other services.

Service Code: **FSV** ***Creation Date:*** 1/25/2001

Service Name: **Family Assistance Individualized Rate-Center Purchases** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:
Various items needed to support individuals to live in their family home setting. Items may include classes to train parents, and/or funding to buy or repair equipment/personal items.

USSDS Rates as of 12/23/2008

Unit	*Rate Type*	*Rate*
Session	Standard	$2,000.00

Service Eligibility

Eligibilit	*Description*
BG	SPINAL CHORD GENERAL FUND
PG	NON-MEDICAID ASSISTANCE
SG	SELF DETERM NON-MEDICAID

Service Code: **FTP**

Creation Date: 1/25/2001

Service Name: **DCFS: Family Transportation Payment-Non Medical Mileage. DSPD: Transportation Supports/Per Mile**

Obsolete Date:

Contract Type: No contract allowed for this service

DCFS
DSPD

Residential: No

Description:

DCFS
Payments made to Foster Parents to cover the cost of transporting Foster Care youth to and from activities which are included in the service plan. These activities may include medical, dental, and mental health appointment if the child is not medicaid eligible.
The requested daily rate of $8.70 is a negotiated rate used in a sole source contract for a child in DCFS custody placed in California and is the cost to transport the child to and from school, daily. It is based on actual charges out of state. The provider must pay to have a child in DCFS custody transported daily to and from and off site school.

DSPD
Transportation supports serve the purpose of allowing the person access to other supports necessary to live an inclusive community life. They are only provided as independent services when transportation is not otherwise available as an element of another service. The need for transportation must be documented as necessary to fulfill other identified support in the Individual Service Plan and the associated documents. Transportation Supports will pay the established per-mile rate for transportation approved under the individual?s Individual Support Plan.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Mile	Standard	$0.36
Trip or Ticket	Standard	$999.00
Month	Standard	$999.99
Daily	Standard	$8.70

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
FB	CHILD WELFARE NON IV-E
SG	SELF DETERM NON-MEDICAID
SK	KIDS IN CUSTODY MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Community Living Residential Supports can be found on the Community Living Supports

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to transportation as well as all applicable licensing and certification requirements.

Population Served
Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated Ï 62A-5-101, and found eligible by the Division .

Record Keeping
Treatment and service requirements are documented in the individual?s plan and community living worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS
Providers are required to meet division policies and guidelines governing records, including but not limited to individual?s records, and file documentation and retention.

Staff to Client Ratios
N/A

Staff Training
Provider and staff must meet all requirements specified in Division Policy and Rule:
Policy 2-7 Procedure 6E
Rule R539-8-4
Policy 2-8 pertaining to Transportation Supports

Tx/Serv Requirement
Transportation Supports are only provided as independent waiver services when transportation is not otherwise available as an element of another waiver service. The need for transportation must be documented as necessary to fulfill other identified supports in the individual support plan and the associated outcomes.

Transportation (codes MTP and RTS) are for services provided to individuals who are attending a day training, prevocational service, or supported employment. Transportation is provided to and from the individual?s own home or residential site by the day training provider or from their residential site by the residential provider to the day training, prevocational service or supported employment location.

Transportation in a private vehicle will be reimbursed at the FTP mileage rate. Individuals providing the service must have a valid Utah Driver License and liability insurance as required by state law. This transportation option must be pre approved by the regional director.

Limitations: Medicaid payment for transportation under the approved waiver plan is not available through medical transportation, transportation available through the State plan, transportation that is available at no charge, or as part of administrative expenditures. Additional transportation supports will not be available to residential or day support providers contracted to provide transportation to and from the person?s residence to the site(s) of a day support when payment for transportation is included in the established rate paid to the community living or day support provider.

Staff Requirements
Staffing requirements are established in the individual worksheets.

Service Code: **HAP** ***Creation Date:*** 1/25/2001

Service Name: **Community Based Housing Allowance Program** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:
HAP assists individuals participating in Division residential programs to meet the housing costs attributable to the acquisition, retention, use, and occupancy of a personal home or community residential living in the community.

USSDS Rates as of 12/23/2008

Unit	*Rate Type*	*Rate*
Personal Need	Standard	$4,905.00
Month	Standard	$408.75

Service Eligibility

Eligibilit	*Description*
BG	SPINAL CHORD GENERAL FUND
SG	SELF DETERM NON-MEDICAID

Service Code

Contractor Qualifications
Providers must comply with all division policies and guidelines pertaining to community living residential supports as well as all applicable licensing requirements.

Other
To assist individuals participating in Division residential programs to meet the housing costs attributable to the acquisition, retention, use, and occupancy of a personal home or community residential living in the community. The Division will provide a monthly rental allowance based upon the amount indicated on the Community-Based Housing Allowance application. This program is a Human Services' State Agency Grant and is not counted as income towards the individual's

Population Served
Services are provided to individuals receiving Community Living Residential or Residential Supports who provide documentation of their application to their local housing authority.

Record Keeping
SPECIAL RECORD KEEPING REQUIREMENTS
Providers are required to meet division policies and guidelines governing records, including but not limited to individual?s records, and file documentation and retention. Records of rental payments must also be maintained.

Staff to Client Ratios
N/A

Staff Training
N/a

Tx/Serv Requirement
The Division provides monthly rental allowance based upon the amount indicated on the Community Based Housing Allowance Application. The Community - Based Housing Assistance program assists individuals participating in Division of Services for People with Disabilities residential programs to meet the housing costs attributable to the acquisition, retention, use, and occupancy of a personal home or Community Residential Living arrangements in the community. This program is to assist the individual/ provider in meeting rent shortfalls. The Community-Based Housing Assistance program is a Human Services State Agency Grant and is, as such, not counted as income towards the individual's benefits. This service is based upon budget constraints. The Housing Assistance form must be done on all individuals to determine housing costs even if

additional housing allowance is not required. The HAP payment is not part of the person?s budget and must be released back to the Region when community housing assistance becomes available. The relinquished HAP funds will be used for an

Staff Requirements

N/A

Service Code: HHS
Service Name: Host Home Supports
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
DSPD

Description:

HHS provides a home-like setting that offers support, supervision, training and assistance for adults in a certified residential setting or other certified private home. HHS may not be provided in a Nursing Facility (NF), or an Intermediate Care Facility for Individuals with Mental Retardation (ICF/MR). HHS services include daily supports to maintain individual health and safety, and

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Daily	Standard	$232.93

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

The following services are included as part of the HHS code and will not be reimbursed separately:
Chore Services (CH1, CHA)
Companion Services (COM)
Homemaker Services (HS1 & HSQ)
Personal Assistance (PAC)
Routine, Non-medical Transportation (DTP)

Persons are excluded from receiving the following services for HHS: (Cannot bill for HHS and the codes listed above and below)
Adult Foster Care (AFC)
Community Service Broker (CSB)
Consumer Preparation (PAP)
Family Support (FS1)
Family Training and Preparation Services (TFA, TF1)
Family and Individual Training and Preparation Services (TFB, TF2)
Professional Parent Supports (PPS)
Residential Habilitation Supports (previous Community Living Support) (RHS)
Residential Habilitation Intensive Support (previous Community Living Intensive Support) (RHI)
Respite (RP1, RP2, RP3, RP4 & RP5,)
Supported Living (SL1, SLH & SLN)

Family Training and Preparation Services (TFA, TF1) and Family and Individual Training and Preparation Services (TFB, TF2) may be made available to persons when an exceptional care need exists, after the review and approval of the Regional Director of the DHS/DSPD region where the person is residing.

HHS and other support staff are retained and supervised by the Contractor and certified to provide Host Home services. The Contractor is responsible for recruitment, selection, training, and on-going supervision of HHS and other support staff (including identification of wages and work schedules), support and technical assistance to Host Home, documentation, the person?s support strategies, and meeting certification, waiver, contract, rule, and statute requirements.

HHS is available through Provider-Based Services only.

Limitations:
Contractor or HHS staff shall not have custody or guardianship of the person. Contractor shall assure that HHS staff only provide services for one person per home operated by the Contractor, OR, that the region director in the region where the home operates has provided prior written approval allowing two persons to receive HHS together in the same home. No more than three persons may receive PPS/HHS services together in the same home. Host Home staff may not act as a conservator or representative payee with Social Security Administration for persons they support in HHS services. HHS shall not used to provide services to persons in the home of a direct relative or legal guardian.

Population Served:
assistance with activities. The Contractor will serve adults age 18 and older currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and adults age 18 and older with acquired brain injury (ABI), as defined in Utah Administrative Code R539-1 (http://rules.utah.gov/publicat/code/r539/r539.htm).

Contractor?s Qualifications:
Contractor shall have all applicable licenses as prescribed in Utah Administrative Code R501, (http://rules.utah.gov/publicat/code/r501/r501.htm) to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

Contractor shall be enrolled as an approved Medicaid Provider with the Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor shall be under DHS, DPSD contract to provide HHS and certified by DSPD.

Contractor shall provide emergency procedures for fire and other disasters and training on evacuation procedures.

Contractor shall disclose room and board charges and food stamps or other income not originating with DHS/DSPD.

Administrative Requirements
Policies and Procedures: Contractor shall have established policies and procedures, a copy of which shall be maintained and readily accessible at each program site. These policies and procedures shall:
1. Disclose board and room charges and food stamps or other income not originating with DHS/DSPD.
2. For residential providers, include emergency procedures for fire and other disasters that require the development and posting of an evacuation plan in each residential site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills.
3. Govern the handling, storage, disposal and theft prevention of medication
4. Provide procedures regarding the nutrition of the person.

Staff Qualifications:
HHS and other support staff shall be trained in the Staff Training Requirements as outlined in General Requirements, Home and Community Based Waiver, rule, statute, and contract.

All staff shall demonstrate competency (in the services covered by the contract), as determined by the Contractor, in addition all applicable education, and training shall be completed before the delivery of any supports to persons and performing any work for persons without supervision.

HHS and other support staff shall pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

Host Home Parents shall be at least 21 years old.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to complete the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and acquired brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 12 within 6 months of employment.
1.Medication competency:
a. Identification of common medications, their effects, purpose and side effects,
b. Identification of medications and medication side effects specific to the person,
c. Recording and documentation of self-administration of medications, and
d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.
2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.

4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Principles of age appropriate community inclusion and natural support development specific to the person.
7. Preferences and non-negotiable routines specific to the person.
8. Significant functional limitations and disabling conditions specific to the person.
9. Key elements of the Americans with Disabilities Act.
10. Person-centered assessment and plan development.
11. How to develop and support the person?s preferred recreational and leisure activities.
12. Contractor and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
a. Effects of brain injuries on behavior,
b. Transitioning from hospitals to community support programs including available resources,
c. Functional impact of brain changing,
d. Health and medication,
e. Role of the direct care staff relating to the treatment and rehabilitation process,
f. Treatment plan and behavioral supports, and
g. Awareness of the Family?s perspective on the brain injury.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.
1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). These may include a Behavior Support Plan, Psychotropic Medication Plan, Staff Instruction sheet, and data collection and/or Task Analysis sheet for skill training or other support.
2. Once the ISP/AP has been developed, the Contractor shall orient the person to that part of the plan that pertains to the Contractor and ensure the person is involved in its implementation.
3. The Contractor shall develop and implement Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
4. The Contractor, as a member of the person's team, is required to assist in assessments and meet at least annually (within 12 months of the last Person-Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.
B.Psychotropic Medications
1. Psychotropic Medications include any drug prescribed to stabilize or improve mood, mental status, or behavior.
2. For persons on psychotropic medications, the Contractor shall complete a specific type of Support Strategy referred to as a Psychotropic Medication Plan that contains the following information:
a. Identification of the specific medication by it generic or brand name; the date on which the medication was commenced or is to be commenced, and dosage as determined by a qualified medical professional.
b. Identification of side effects to monitor. When antipsychotic medications are used, monitoring procedures may utilize standardized assessment instruments such as the Abnormal Involuntary Movement Scale (AIMS).
c. A statement of specific behaviors or symptoms targeted to assess advantages and disadvantages of the prescribed psychotropic medications.
d. Identification of other support and services that are available and would be useful in the treatment of the targeted behavior or symptom and/or any related illness or condition of the person. Such supports or services may include Behavior Support Plans, psychotherapy or laboratory studies (for example, blood work to check lithium serum, CBC, liver function).
C. Persons' Personal Funds
1. In the event of an emergency situation, a Contractor may write a check to the person or the person may borrow money from the Contractor. The person?s support team shall be notified and grant approval of the Contractor?s actions. The Contractor?s staff shall document the emergency and the person?s support team approval and maintain this documentation in the persons record. The Contractor shall have policies and procedures in place to make sure a person does not continuously owe the Contractor money due to emergency situations.
2. A person shall not give cash to, or make purchases from, the Contractor or Contractor?s staff. A person shall not write checks to the Contractor?s staff. Only in cases of emergency, may a person write a check to repay a loan made by the Contractor. Contractor shall ensure the person has adequate access to personal finances in order to cover anticipated expenditures. The exceptions to persons making payments to the Contractor are as follows: a) reimbursement to the Contractor for destruction of property by the person, if approved by the team, and allowable by contract, and b) room and board charges.
3. The Contractor?s staff shall not loan or give money to a person. The Contractor shall not loan or give money to a person except in case of an emergency. A person shall not loan or give money to the Contractor?s staff or the Contractor itself.
4. Belongings with a purchase price or value of $50.00 or more shall be inventoried. The inventory shall also include other items of significance to the person, which may cost less than $50.00. The inventory shall be maintained on an ongoing basis and reviewed annually. Discarded items shall be deleted from the inventory list. Documentation of the reason for the deletion of an item shall be maintained and shall require the signature of the person/representative and one Contractor staff or two Contractor staff if the person/representative is not available. Personal possessions shall be released to the person/representative whenever the person moves.
D. Health and Safety Requirements
1. Contractor shall assure that persons receive training, opportunities to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the ISP, as allowed by the person's Medicaid and

insurance plans.
2. Contractor staff shall assure persons receive training and assistance to:
a. Identify primary health care practitioners;
b. Obtain dental and physical examinations.
c. Safely follow physician orders;
e. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the person's physician; and,
d. Document the frequency, dosage, and type of medication taken.
3. Person health information including the following:
a. A record of all medical and /or dental examinations performed, including assessments, treatments, and prescribed medication(s);
b. A record of all surgeries, immunizations, illnesses, chronic complaints, and significant changes in health;
c. Authorization for any emergency medical treatment needed;
d. A record of all medication(s) taken by the person;
e. A record of all incidents requiring first aid and/or a referral to medical personnel or a health care facility;
f. A record of all medication errors; and,
g. A record of all accidents or injuries.
4. Medications shall be properly stored according to the person's needs and capabilities, as determined by the team.
5. Contractor staff shall immediately contact the appropriate medical professional to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, misadministration of medication, medication administered at the wrong time, or failure to follow laboratory survey schedule, etc.
a. Any medication errors that occur shall be documented in the person's file and reported to the Support Coordinator and Contractor Director or designee.
6. Contractor shall notify the Support Coordinator and personal representative within 24 hours of the development of a medical issue for any person, such as illness requiring medical appointments or an emergency room visit. This does not include medical appointments for general health check-ups.
7. Any allergies the person has shall be recorded by Contractor staff in the person's medical record and disclosed to the person's primary physician.
E. Health and Nutrition Requirements
1. Persons shall have kitchen privileges with access to food and ingredients. Kitchen privileges may be limited if approved by the Human Rights Committee, in the interest of the person?s health.
2. Contractor staff shall assist persons in planning meals to meet basic nutritional standards, special diets, food preferences, customs, and appetites.
F. Transportation
Contractor shall provide routine transportation to shopping and other community activities, based on the Contractor's and team's reasonable, professional judgment.

The Contractor shall check driver?s driving records annually and shall assure that drivers with problematic records are not allowed to continue providing transportation as part of this service. Contractor shall check annually that drivers providing transportation in their personal vehicles have current/adequate auto insurance. Contractor shall keep documentation of this review and copies of the driver?s record and auto insurance in the employee?s file.

Drivers make certain that:
1. Persons are not left unattended in the vehicle.
2. Persons use seat belts and remain seated while the vehicle is in motion.
3. Keys are removed from the vehicle at all times when the driver is not in the driver's seat unless the driver is actively operating a lift on vehicles that require the keys to be in the ignition to operate the lift.
4. All persons in wheelchairs use seat belts, or locking mechanisms to immobilize wheelchairs during travel.
5. Persons are transported in safety restraint seats when required by Utah State law.
6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving.
7. Persons arrive safely at the scheduled time and arranged destination, that no one is left alone along the way to or from day supports even in emergency situations or when the health and safety of others may be in question. If necessary during an emergency, the driver may wait until another driver arrives to complete the transport
G. Access to Community Services
Contractor shall assist the person in obtaining assistance from community and government organizations, including but not limited to finding housing, applying for food stamps, obtaining Social Security benefits, etc. Contractor shall also collaborate with applicable school, person welfare, and other agencies/individuals involved in the person?s care.

Staff Support:
Actual type, frequency and duration of direct care staff support, and other community living supports shall be defined in the person's ISP/AP based on the person?s selected housing arrangement and assessed needs. The support coordinator identifies the total hours of direct support needed by the person and the Contractor determines how to split the total hours between the host home provider and other direct support staff. HHS can include up to 24-hour direct care staff support.

Rate:
HHS is paid as a daily rate. HHS can include up to 24-hour direct care staff support. Generally, however, HHS is provided for up to 24-hours on holidays and weekends and for 18-hours per day on days when the person is in school, at work or

receiving other daytime supports. Additional services to support a person during the summer school recess or during

Service Code: **HS1** ***Creation Date:*** 1/ 1/2005

Service Name: **Homemaker Services - Self Administered SAS** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:

HS1 provides the help needed to maintain the person's home in a clean, sanitary, and safe environment. Services include general household activities such as meal preparation and routine household care provided by a trained homemaker when the individual regularly responsible for those activities is temporarily absent or if the person is unable to manage the home and care for him or herself or other in the home.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$3.25

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Homemaker Services (HS1) provides an hourly one-on-one service needed to maintain the person's home in a clean, sanitary, and safe environment. Services include general household activities such as meal preparation and routine household care provided by a trained homemaker, when the individual regularly responsible for those activities is temporarily absent or if the person is unable to manage the home and care for him or herself or other in the home. HS1 is not a skills training service.

HS1 may be provided under Self-Administered Services method only.

Limitations: HS1 may be provided only in the case where no other relative, caregiver, landlord, community/volunteer agency, or third-party payer is capable of or responsible for this provision. Persons receiving services billed under the COM, ELS, PPS, HHS, RHS, SLA, SLH and SLN service codes may not simultaneously receive services billed under the HS1 code.

Population Served: The Employee will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and acquired brain injury, as defined in Utah Administrative Rule R539-1.

Employee?s Qualifications: Employee must have all applicable licenses as prescribed in Utah Administrative Rule R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. Non-licensed Employees must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Section 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

Employee must be enrolled as an approved Medicaid Provider with the Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Employee. Employees must also agree to participate in any DHS/DSPD provided Medicaid training.

Administrative Requirements
A. Policies and Procedures: Employees shall have established policies and procedures, a copy of which shall be

maintained and readily accessible at each facility. These policies and procedures shall:

1. Demonstrate the development and posting of an evacuation plan in each program site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills.
2. Govern the handling, storage, disposal and theft prevention of medication

Staff Qualifications: All staff must demonstrate competency (in the services covered by the contract), as determined by the Employer, in addition all applicable education, and training must be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Employer must ensure that Chore staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a BCI background check through the Department of Human Services, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff providing this service must be at least 16 years of age.

Staff Training Requirements: The Employee and staff must meet the following:

1. Employees providing homemaker services must be capable of physically completing all required tasks.
2. Maintain a clean, sanitary and safe living environment in the person?s home.

Staff Support: Actual type, frequency and duration of support will be defined in the client's ISP/AP based on the client?s assessed needs.

Service Code: **HSQ** ***Creation Date:*** 1/25/2001

Service Name: **Homemaker Services** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

HSQ provides an hourly one-on-one service needed to maintain the person's home in a clean, sanitary, and safe environment. Services include general household activities such as meal preparation and routine household care provided by a trained homemaker when the individual regularly responsible for those activities is temporarily absent or if the person is unable to manage the home and care for him or herself or other in the home.

USSDS Rates as of 12/23/2008

Unit	***Rate Type***	***Rate***
Quarter hour	Standard	$4.15

Service Eligibility

Eligibilit	***Description***
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Homemaker Services (HSQ) provides an hourly one-on-one service needed to maintain the person's home in a clean, sanitary, and safe environment. Services include general household activities such as meal preparation and routine household care provided by a trained homemaker, when the individual regularly responsible for those activities is temporarily absent or if the person is unable to manage the home and care for him or herself or other in the home. HSQ is not a skills training service.

HSQ may be provided under Agency-Based Services.

Limitations:
HSQ may be provided only in the case where no other relative, caregiver, landlord, community/volunteer agency, or third-party payer is capable of or responsible for this provision. Persons receiving services billed under the COM, ELS, PPS, HHS, RHS, SLA, SLH and SLN service codes may not simultaneously receive services billed under the HSQ code.

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and acquired brain injury, as defined in Utah Administrative Code R539-1.

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed contractor must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

Administrative Requirements
A. Policies and Procedures: Contractor shall have established policies and procedures, a copy of which shall be maintained

and readily accessible at each program site (client?s home). These policies and procedures shall:

1. Demonstrate the development and posting of an evacuation plan in each program site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills.
2. Govern the handling, storage, disposal and theft prevention of medication

Staff Qualifications:
All staff must demonstrate competency (in the services covered by the contract), as determined by the Contractor, in addition all applicable education, and training must be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Contractor must ensure that Chore staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff providing this service must be at least 18 years of age.

Staff Training Requirements:
The contractor and staff must meet the following:

1. Employees providing homemaker services must be capable of physically completing all required tasks.
2. Maintain a clean, sanitary and safe living environment in the person?s home.

Staff Support:
Actual type, frequency and duration of support will be defined in the client's Individual Support Plan Action Plan (ISP/AP) based on the client?s assessed needs.

Rate:
HSQ is an hourly, one-on-one service.

Service Code: **MAG**

Service Name: **Cash Assistance Payment**

Contract Type: No contract allowed for this service

Residential: No

Creation Date: 1/25/2001

Obsolete Date:

DSPD

Description:

MAG provides services to enhance the individual's quality of life and assist the family in maintaining the individual in the family

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Personal Need	Standard	$2,000.00
Month	Standard	$175.00

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
PG	NON-MEDICAID ASSISTANCE
SG	SELF DETERM NON-MEDICAID

Service Code: **MHT** ***Creation Date:*** 5/26/2006

Service Name: **Mental Health Therapy** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

MHT provides face-to-face interventions for a person that focuses on improving their emotional and mental adjustment and social functioning based on measurable treatment goals identified in the person?s individual treatment plan.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$23.49

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
SG	SELF DETERM NON-MEDICAID

Service Code

Other

General Service Description: Mental health therapy means face-to-face interventions with an individual person with a focus on improving the person?s emotional and mental adjustment and social functioning based on measurable treatment goals identified in the person?s individual treatment plan.

Specific Service Description: At a minimum, mental health therapy shall include documentation of:

a. Date and actual clock time of service.
b. Duration of the service.
c. Setting in which the service was rendered.
d. Specific service rendered.
e. Treatment goal(s).
f. Clinical note describing the person?s progress toward treatment goal(s).
g. Signature and title of individual who rendered the services.

Population Served: The Contractor will serve children and adults currently receiving services from DHS/DSPD with mental retardation and related conditions, and adults age 18 and older with acquired brain injury or physical disabilities, as defined in Utah Administrative Rule R539-1. (http://rules.utah.gov/publicat/code/r539/r539.htm).

Contractor?s Qualifications: Contractor must have all applicable licenses as prescribed in Utah Administrative Rule R501 to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits governing the type of service provided. All contractors must be certified by DSPD as an authorized provider of services to persons with disabilities in accordance 62A-5-103, UCA. Contractor must be enrolled as an approved Medicaid Provider with the Department of Health.

Discharge Reports: To document progress at termination from a supplemental mental health service, the Contractor shall complete a discharge summary on each person regardless of length of treatment. The summary shall include date of discharge, progress on treatment goals and recommendations for future service or treatment needs. The Contractor shall maintain a copy of the discharge summary in the person file. A copy of the report shall be sent to the DHS/DSPD caseworker within thirty (30) days of termination of the Medication Management or Mental Health Therapy. The Contractor shall furnish a copy of the Discharge Report to the Person or their representative.

Quality Improvement: The Contractor shall cooperate with all State, or DHS/DSPD utilization review procedures and processes. The Contractor shall have a written quality improvement plan that includes the following:

a. The process to evaluate all aspects of the organization including the quality and timeliness of services delivered;
b. Except for Contractor?s in an individual practice, the plan shall include a quality improvement committee that has the authority to report its findings and recommendations for improvement to the agency?s director. The quality improvement committee must meet a least quarterly to conduct or review quality improvement activities and make recommendations for

improvement; and, A process to implement changes as a result of the internal assessment, data analysis, recommendations of the quality improvement, or recommendations of DHS/DSPD based on program or contract audit, and reviews.

Limitations:
The following services are not allowed under any circumstances:
a. Services where the therapist or others during the session use coercive or intrusive techniques (e.g., coercive physical restraints, including interference with body functions such as vision, breathing and movement, or noxious stimulation) to evoke an emotional response in the person such as rage or to cause the person to undergo a rebirth experience. Coercive techniques are sometimes also referred to as holding therapy, rage therapy, rage reduction therapy or rebirthing therapy.
b. Services wherein the therapist instructs and directs the family or other natural supports in the use of coercive techniques that are to be used with the person in the home or other setting outside the therapy session.
c. Services that are funded by the Medicaid State Plan or other funding sources are not eligible for reimbursement under this contract

Treatment Plan:
When providing supplemental mental health services, the Contractor must develop a treatment plan. The treatment plan is a written, individualized plan that contains measurable treatment goals related to problems identified in the psychiatric evaluation. The treatment plan must be developed either by the individual identified in Section 4 (Contractor Qualifications) who conducted the psychiatric evaluation, or by an individual who actually delivers the services after review and update, if necessary, of the evaluation. The treatment plan must be designed to improve and/or stabilize the person?s condition. A treatment plan is not required if the Psychiatric Evaluation is the only service the person receives. A treatment plan is required if Medication Management or Mental Health Therapy follows the Psychiatric Evaluation. If there is more than one Contractor providing services to a person there may be more than one treatment plan.
a.. The entire treatment plan shall be written within 30 days of the first session with the person. The treatment plan shall be developed in consultation with the DHS/DSPD caseworker.
b. The treatment plan must include the following:
1) Measurable treatment goals developed in conjunction with the person;
2) If the treatment plan contains skills development services, it must include measurable goals specific to all skills issues being addressed with this treatment method;
3) The treatment regimen and the specific treatment methods that will be used to meet the measurable treatment goals;
4) A projected schedule for service delivery, including the expected frequency and duration of each treatment method;

5) The credentials of individuals who will furnish the services; and, Signature, title and date of the individual who developed the treatment plan, and Schedule for review of treatment plan.
c. A copy of the treatment plan shall be sent to the DHS/DSPD caseworker within 10 days of completion. The Contractor shall retain a copy of the treatment plan in the person file

Staff Qualifications: : Staff providing mental health therapy shall be one of the following:
A licensed mental health therapist practicing within the scope of his or her licensure in accordance with Title 58, Utah Code Annotated 1953, as amended:
a. Licensed physician;
b. Licensed psychologist;
c. Licensed clinical social worker;
d. Licensed advanced practice registered nurse;
e. Licensed marriage and family therapist;
f. Licensed professional counselor;

Staff providing services under this code must be licensed by the Division of Professional and Occupational Licensing (DOPL) pursuant to Utah Administrative Code R156, UAC and Section 58 of the Utah Code Annotated. All staff must demonstrate competency, as determined by the Contractor before the delivery of any supports to clients.

Staff must pass a BCI background check through the Department of Human Services, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm Staff performing service under this service definition must possess knowledge and experience working with persons with disabilities.

Service Code: MMD
Creation Date: 5/26/2006
Service Name: Medication Management by an MD
Obsolete Date:
Contract Type: Either a non-fixed or fixed amount contract required
DSPD
Residential: No

Description:
MMD provides face-to-face intervention that includes prescribing, administering, monitoring or reviewing the client's medication and medication regime.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Session	Standard	$80.45

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
PG	NON-MEDICAID ASSISTANCE
SG	SELF DETERM NON-MEDICAID

Service Code

Other

General service description: A face-to-face clinical intervention that includes prescribing, administering, monitoring or reviewing the person?s medication or medication regimen. This service may also include providing information to the person as well as DHS/DSPD staff and the person?s supports (with the person?s written informed consent) regarding the person?s medication regimen for the purposes of coordinating treatment needs. Services may include assessing the need for and prescribing psychotropic medications.

Specific service description
(1) At a minimum, the intervention shall include documentation of:
a. Date and actual clock time of the service;
b. Duration of the service;
c. Setting in which the service was rendered;
d. Specific service rendered (i.e., psychiatric evaluation);
e. Summary of psychiatric interventions that includes:
Diagnoses;
Treatment goals;
Summary of person?s progress toward achieving these goals;
(2) Summary of recommended psychiatric treatment services and interventions including medications prescribed, and other recommended services including recommended laboratory surveillance schedules, as appropriate;
f. Signature and title of individual who rendered the service.
g.The Contractor shall retain a copy of the evaluation in the person file and upon request by DHS/DSPD provide a written copy of the evaluation to the DHS/DSPD caseworker within twenty (20) days of completion

Treatment Plan:
When providing supplemental mental health services, the Contractor must develop a treatment plan. The treatment plan is a written, individualized plan that contains measurable treatment goals related to problems identified in the psychiatric evaluation. The treatment plan must be developed either by the individual identified in Section 4 (Contractor Qualifications) who conducted the psychiatric evaluation, or by an individual who actually delivers the services after review and update, if necessary, of the evaluation. The treatment plan must be designed to improve and/or stabilize the person?s condition. A treatment plan is not required if the Psychiatric Evaluation is the only service the person receives. A treatment plan is required if Medication Management or Mental Health Therapy follows the Psychiatric Evaluation. If there is more than one Contractor providing services to a person there may be more than one treatment plan.
a. The entire treatment plan shall be written within 30 days of the first session with the person. The treatment plan shall be developed in consultation with the DHS/DSPD caseworker.
b. The treatment plan must include the following:
1) Measurable treatment goals developed in conjunction with the person;

2) If the treatment plan contains skills development services, it must include measurable goals specific to all skills issues being addressed with this treatment method;
3) The treatment regimen?the specific treatment methods that will be used to meet the measurable treatment goals;
4) A projected schedule for service delivery, including the expected frequency and duration of each treatment method;

5) The credentials of individuals who will furnish the services; and, Signature, title and date of the individual who developed the treatment plan, and schedule for review of treatment plan.
c. A copy of the treatment plan shall be sent to the DHS/DSPD caseworker within 10 days of completion. The Contractor shall retain a copy of the treatment plan in the person's file.

Staff Qualifications
The individual(s) providing MMD services shall be one of the following:
a. Licensed physician.
b. Licensed Advanced Practice Registered Nurse.
Staff providing services under this code must be licensed by the Division of Professional and Occupational Licensing (DOPL) pursuant to Utah Administrative Code R156, UAC and Section 58 of the Utah Code Annotated. All staff must demonstrate competency, as determined by the Contractor before the delivery of any supports to clients.

Staff must pass a BCI background check through the Department of Human Services, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

Staff performing service under this service definition must possess knowledge and experience working with persons with disabilities.

Population Served
The Contractor will serve children and adults currently receiving services from DHS/DSPD with mental retardation and related conditions, and adults age 18 and older with acquired brain injury or physical disabilities, as defined in Utah Administrative Rule R539-1. (http://rules.utah.gov/publicat/code/r539/r539.htm).

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Rule R501 to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits governing the type of service provided. All contractors must be certified by DSPD as an authorized provider of services to persons with disabilities in accordance 62A-5-103, UCA. Contractor must be enrolled as an approved Medicaid Provider with the Department of Health.

Discharge Reports
To document progress at termination from a supplemental mental health service, the Contractor shall complete a discharge summary on each person regardless of length of treatment. The summary shall include date of discharge, progress on treatment goals and recommendations for future service or treatment needs. The Contractor shall maintain a copy of the discharge summary in the person file. A copy of the report shall be sent to the DHS/DSPD caseworker within thirty (30) days of termination of the Medication Management or Mental Health Therapy. The Contractor shall furnish a copy of the Discharge Report to the Person or their representative.

Quality Improvement
The Contractor shall cooperate with all State, or DHS/DSPD utilization review procedures and processes. The Contractor shall have a written quality improvement plan that includes the following:
a. The process to evaluate all aspects of the organization including the quality and timeliness of services delivered;
b. Except for Contractor?s in an individual practice, the plan shall include a quality improvement committee that has the authority to report its findings and recommendations for improvement to the agency?s director. The quality improvement committee must meet a least quarterly to conduct or review quality improvement activities and make recommendations for improvement; and,
A process to implement changes as a result of the internal assessment, data analysis, recommendations of the quality improvement, or recommendations of DHS/DSPD based on program or contract audit, and reviews.

Limitations:
The following services are not allowed under any circumstances:
a. Services where the therapist or others during the session use coercive or intrusive techniques (e.g., coercive physical restraints, including interference with body functions such as vision, breathing and movement, or noxious stimulation) to evoke an emotional response in the person such as rage or to cause the person to undergo a rebirth experience. Coercive techniques are sometimes also referred to as holding therapy, rage therapy, rage reduction therapy or rebirthing therapy. Services wherein the therapist instructs and directs the family or other natural supports in the use of coercive techniques

Service Code: **MRE** ***Creation Date:*** 1/25/2001

Service Name: **Mental Retardation Evaluation** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:
MRE is used for payment for services to individuals who are referred to DSPD Contracted Medical Clinics for Medication and/or psychiatric/Behavioral Evaluations.

USSDS Rates as of 12/23/2008

Unit	*Rate Type*	*Rate*
Session	Standard	$161.92
Month	Standard	$4,677.57

Service Eligibility

Eligibilit	*Description*
MR	MR/DD

Service Code

Other

General Description: The MRE code has metamorphosed into a service used by the Northern Region using a USU intern student/Ph.D. Graduate. Should the services be needed somewhere other than the Northern Region we could still use this framework for providing an internship through contract to other such institutions. We are removing the session payment and only using a monthly payment. The need for reducing the monthly amount and modifying the scope is due to the USU's new requirement that salaried employees cannot be paid more than 20% above their annual salary. Therefore, DSPD is removing the part of the contract that contained supervision, removing the unit
called "session", and reducing the monthly amount to account for the removal of the supervision by a icensed psychologist. The oversight of the intern by a licensed psychologistwill be purchased through a separate contract.

Population Served

Population to Be Served

DHS/DSPD eligible persons living within the Cache/Box Elder County area who have significant mental health needs and may be living in a residential setting.

Contractor's Qualifications

The Contractor shall be a government, quasi-government, entity and possess Regional Accreditation and be a college or institute of higher learning and have an active psychological program.

General Requirements

1. Persons and their families will be given access to clinics on campus.

2. Services performed by the Student Intern or, a Ph. D. candidate include face-to-face evaluations with the person referred by DHS/DSPD.

3. The Student Intern or, a Ph. D. candidate will perform other services included such as, but not limited to the following:
   a. report writing
   b. record reviews
   c. track person's evaluation information
   d. ensure evaluation documentation is accurate.
   e. evaluation appropriately receives professional review
   f. documentation is maintained in person's file

4. DHS/DSPD may, at any time, request a review of person's documentation and it shall be made available.

5. Student Intern or, a Ph. D. candidate is required to provide the services under this contract for both the DHS/DSPD Brigham and Logan office teams. Failure to comply with this requirement may result in termination of this contract.

6. DHS/DSPD Brigham City and Logan offices shall provide the Contractor with the referral. The Student Intern or, a Ph. D. candidate shall interact with DHS/DSPD regarding all DHS/DSPD referred persons, and work independent of DHS/DSPD staff.

7. Primary supervision of the Student Intern or, a Ph.D. Candidate shall be the responsibility of the Contractor.

8. Each new contract year, the outgoing student Intern or, a Ph.D. candidate shall be available to train and assist with transitioning the student Intern or a Ph.D. Candidate that is arriving for the new Contract year.

Staff Requirements

The Student Intern or, a Ph.D. Candidate will be selected by both the institution and DHS/DSPD. The Student Intern or, a Ph.D. Candidate selected will be a current student and in good standing to the psychological program.

Staff Training

The current Student Intern or, a Ph.D. Candidate shall be available to transition between the Student Intern or, Ph.D. Candidate that is leaving and the Student Intern or, a Ph.D. Candidate that is arriving for the new Contract year. This transition period will be used to train and coordinate responsibilities with the arriving Student Intern or, a Ph.D. Candidate.

Service Requirements

The Contractor will receive prior approval from the DHS/DSPD Support Coordinator to conduct assessments and testing services.

The term of internship shall not exceed fifty-two (52) weeks unless otherwise stipulated and agreed upon by the Contractor and DHS/DSPD by written amendment to this Contract.

A Graduate Student Intern or, a Ph.D. Candidate selected by the Contractor shall perform the following services.

1. Three initial psychological evaluations of 90-120 minutes each, monthly

2. Individual Counseling and Psychological Testing as needed

3. Group work with persons, families and providers

4. Collaborate with staff from Bear River Mental Health when providing services to the same persons in need of medication management

5. Provide and share case service information with DHS/DSPD staff as requested

6. Attend DHS/DSPD team/staff meetings for the purpose of presenting or contributing to DHS/DSPD specific needs, as requested. Graduate Student Intern or, the Ph.D. Candidate shall make available for DHS/DSPD review, all meeting notes as a record of the Graduate Student Intern or, the Ph.D. Candidate's contribution at the meetings. Meeting notes should include as a minimum, the topic(s) discussed, attendees names, and date and location of the meeting.

RATE

The rate represents the hourly rate for a student intern or a Ph.D. candidate for providing service hours (units) and the cost of transitioning at the end of each contract year. The Student Intern or, a Ph.D. Candidate services will be utilized on a

Service Code: **MRG** ***Creation Date:*** 1/24/2006

Service Name: **Division Case Management Services** ***Obsolete Date:***

Contract Type: Closed or fixed dollar amount contract required DSPD

Residential: No

Description:
MRG provides for maintaining the individual in the Home and Community-Based Services Waiver in accordance with program requirements and the person?s assessed service needs. The service also coordinates the delivery of quality waiver services.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Month	Standard	$238.11

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Rate

Service Code: MTP
Service Name: Motor Transportation Payment
Contract Type: Either a non-fixed or fixed amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
DSPD

Description:

MTP provides transportation from the person's home or living facility to community habilitation programs or facilities that provide day supports. The service may also arrange for transportation to other locations as needed to ensure the person?s health and

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Daily	Standard	$8.51

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Motor Transportation Payment (MTP) provides transportation from the person's home or living facility to community habilitation programs or facilities that provide day supports. Persons may not be "kicked off", expelled, or suspended from MTP without prior notification and approval by both the DHS/DSPD Support Coordinator and Region Director. The Contractor is responsible for the person, to ensure the person arrives safely at the scheduled time and arranged destination. This may include arranging for other transportation to ensure that services are delivered as well as rendering assistance to the person that would ensure the successful completion of transportation services so that the person arrives safely at the scheduled time and arranged destination. Failure to serve the person under these terms may be cause for termination of MTP services.

Limitations:
MTP is allowed only when no other transportation service is provided or available and when transportation is not otherwise available as an element of another service. MTP does not include payment for transportation to medical appointments. MTP may not be used for any person who receives a day support service that includes routine, non-medical transportation as part of the rate.

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and adults age 18 and older with acquired brain injury (ABI), as defined in Utah Administrative Code R539-1 (http://rules.utah.gov/publicat/code/r539/r539.htm).

Contractor?s Qualifications:
Contractor shall have all applicable licenses as prescribed in Utah Administrative Code R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

The Contractor shall ensure that Transportation and other support staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

The Contractor shall check driver?s driving record annually and shall assure that drivers with problematic records are not allowed to continue providing MTP services. Contractor shall check annually that drivers providing transportation in their personal vehicles have current/adequate auto insurance. Contractor shall keep documentation of this review and copies of the driver?s record and auto insurance in the driver?s file.

Contractor shall be under DHS, DSPD contract to provide MTP and certified by DSPD.

Staff Qualifications:
safety. All staff shall demonstrate competency in providing MTP services, as determined by the Contractor, in addition all applicable education, and training shall be completed before the delivery of any supports to persons and performing any work for persons without supervision.

Drivers shall be trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Professional drivers shall be licensed as applicable according to the Utah Department of Motor Vehicles Licensing. All staff rendering this service shall possess current and valid driver?s licenses appropriate for the rendering of this service as required by Utah Administrative Code R708. http://rules.utah.gov/publicat/code/r708/r708.htm

Drivers who provide MTP shall be at least 18 years old.

Direct Service Requirements:
Drivers make certain that:

1. Persons are not left unattended in the vehicle.
2. Persons remain seated while the vehicle is in motion.
3. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively operating a lift on vehicles that require the keys to be in the ignition to operate the lift.
4. All persons in wheelchairs use seat belts, or locking mechanisms to immobilize wheelchairs during travel.
5. Persons are transported in safety restraint seats when required by Utah State law.
6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving.
7. Persons arrive safely at the scheduled time and arranged destination, that no one is left alone along the way to or from day supports even in emergency situations or when the health and safety of others may be in question. If necessary during an emergency, the driver may wait until another driver arrives to complete the MTP service.
8. Failure to serve the person under these terms may be cause for termination of this service.

Staff Support:
Actual type, frequency and duration of support will be defined in the person's Individual Support Plan/Action Plan (ISP/AP) based on the person?s assessed needs. Hours of support are established in the person?s ISP/AP.

Record Keeping:
In addition to the General Requirements for record keeping, the Contractor shall maintain accurate records, such as transportation records, pick-up and delivery sheets and time sheets, recording the delivery of MTP services.

Rate:
MTP provides a daily payment for transportation to and from the day support location. The number of days billed for MTP should not exceed the number of days billed for day support. MTP is a flat rate paid on an individual basis for transportation

Service Code: PA1 **Creation Date:** 3/27/2006

Service Name: Personal Assistant - Self Administered - SAS **Obsolete Date:**

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:

PA1 provides supportive services that are specific to the needs of a medically stable individual who is capable of directing his/her own care or has a surrogate available to direct the care. This service is intended to reinforce an individual?s strengths, while substituting or compensating for the absence, loss, diminution, or impairment of physical or cognitive functions.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$2.80
Daily	Standard	$89.32

Service Eligibility

Eligibilit	Description
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Personal Assistance services (PA1) refer to the provision of hands on care on an hourly and daily basis of both a medical and non-medical supportive nature specific to the needs of a medically stable person who has a surrogate available to direct the care. This service is intended to reinforce an individual?s strengths, while substituting or compensating for the absence, loss, diminution, or impairment of physical or cognitive functions. Services will be outlined in the individual support plan and will not duplicate other covered waiver supports. This service may include skilled medical care and health maintenance to the extent permitted by State law and certified by the recipient?s physician or health-care professional. Housekeeping, chore services and other reasonable and necessary activities, which are incidental to the performance of the person-based care, may also be furnished as part of this service.

Personal Assistance services (PA1) allows families and other individuals to care for persons with disabilities in natural home settings through the provision of support, supervision and direct-self-care, as well as communications, mobility, social skills development and behavioral management along with other specialized interventions

Personal assistance services are generally provided on a regularly scheduled basis, though they may be offered on an intermittent or as-needed basis and are available to persons who live alone or with roommates or with spouse, children or other family. Services may be provided in the recipient?s place of residence or in settings in the community.

PA1 services are available to persons participating in the Self-Administered Services method, only.

Population Served:
The Employee will serve persons currently receiving services from DHS/DSPD with mental retardation and related conditions, and adults age 18 and older with acquired brain injury or physical disabilities, as defined in Utah Administrative Rule R539-1. (http://rules.utah.gov/publicat/code/r539/r539.htm).

Employer?s Qualifications:
Non-licensed Employers shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Sec. 62A-5-103, UCA.

Employers shall be enrolled as an approved Medicaid Provider with the Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Employee. Employees shall also agree to participate in any DHS/DSPD provided Medicaid training.

Employer shall demonstrate knowledge of emergency evacuation procedures for fire and other disasters as well as knowledge of proper nutrition and meal planning.

Employee Qualifications:
Employees shall demonstrate competency (in the services covered by the contract), as determined by the Employer. In addition all applicable education, and training shall be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Employer shall ensure that Personal Assistance employees are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract as well as service-specific training.

Employees must pass a BCI background check through the Department of Human Services, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

Employees providing this service must be at least 16 years of age when serving persons with mental retardation and related conditions and adults over the age of 18 with acquired brain injuries. However, employees providing personal assistance services during hours normally occupied by sleep must be at least 18 years of age. Employees providing PA1 services to adults with physical disabilities must be at least 18 years of age.

Service Specific Training Requirements:
The Employee:

A. Must be capable of physically completing all required tasks; and must,

B. Maintain a sanitary and safe living environment in the person?s home.

Direct Service Requirements:
A. Health and Safety Requirements

1. Employee shall immediately contact the appropriate medical professional to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, misadministration of medication, medication administered at the wrong time, or failure to follow laboratory survey schedule, etc.

a. Any medication errors that occur shall be documented in the person's file and reported to the Support Coordinator and Employee.

b. Employee shall notify the Support Coordinator and Representative within 24 hours of the development of any apparent medical need for the person.

Staff Support:
PA1 does not include 24-hour direct care staff support. Actual type, frequency and duration of direct care staff support will be defined in the client's ISP/Action Plan based on the client?s selected housing arrangement and assessed needs. PA1 is a one-to-one service with an hourly rate. Payments for PA1 services are not made for room and board, the cost of facility maintenance, routine upkeep or improvement. Personal needs costs are covered through personal income such as Social Security and other income (SSA, SSI, employment).

Rate:
PA1 services are available on an hourly and daily basis. PA1 day rate equals eight hours or more of Personal Assistance services For overnight stays in the person?s residence or approved residential setting, an Employee may bill for the day the Employee came and not the day the Employee left if the Employee is there less than 8 hours. The person must have a full eight hours stay to qualify for a daily rate, i.e. five hours = quarter hour rate, eight hours or more = daily rate, 24 hours overnight = one daily rate, 25 hours = one daily rate and four quarter hours, 32 hours = two days of daily rate.

Service Code: **PAC** ***Creation Date:*** 1/25/2001

Service Name: **Personal Assistance Services** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

PAC provides supportive services that are specific to the needs of a medically stable, individual who is capable of directing his/her own care or has a surrogate available to direct the care. This service is intended to reinforce an individual?s strengths, while substituting or compensating for the absence, loss, diminution, or impairment of physical or cognitive functions.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$3.58
Daily	Standard	$114.37

Service Eligibility

Eligibilit	Description
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description: Personal Assistance services (PAC) refer to the provision of personal assistance and supportive services on an hourly and daily basis, specific to the needs of a medically stable, individual who is capable of directing his/her own care or has a surrogate available to direct the care. This service is intended to reinforce an individual?s strengths, while substituting or compensating for the absence, loss, diminution, or impairment of physical or cognitive functions. Services will be outlined in the individual support plan (ISP) and will not duplicate other covered waiver supports.

Personal assistance services are provided on a regularly scheduled basis and are available to individuals who live alone or with roommates. Services may be provided in the recipient?s place of residence or in settings outside the place of residence.

Population Served: The Contractor will serve children and adults currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and adults age 18 and older with physical disabilities (PD), as defined in Utah Administrative Code R539-1. (http://rules.utah.gov/publicat/code/r539/r539.htm).

Contractor?s Qualifications:
Contractor shall have all applicable licenses as prescribed in Utah Administrative Code R501 to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed contractor shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103.

Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Administrative Requirements
Policies and Procedures: Contractor shall have established policies and procedures, a copy of which shall be maintained and readily accessible at each program site (person?s home). These policies and procedures shall:
1. Demonstrate the development and posting of an evacuation plan in each program site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills.
2. Govern the handling, storage, disposal and theft prevention of medication.

Staff Qualifications:
All staff shall demonstrate competency (in the services covered by the contract), as determined by the Contractor. In

addition all applicable education, and training shall be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Contractor shall ensure that Personal Assistance staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff providing this service must be at least 18 years of age.

Staff Training Requirements:
The contractor and staff must receive sufficient training in order to meet the following:
1. Employees providing personal assistance services must be capable of physically completing all required tasks.
2. Employees providing personal assistance services must be capable of maintaining a sanitary and safe living environment in the person?s home.
3. Contractor shall assure that staff receive training in ways to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the ISP.
4. Contractor shall assure all direct care staff receives training and assistance to:
   a. Safely follow physician orders;
   b. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the client's physician; and,
   c. Document the frequency, dosage, and type of medication taken.
5. Contractor staff shall assure clients receive training and assistance to:
   a. Identify primary health care practitioners; and Obtain dental and physical examinations.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing their applicable portion of the ISP?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.
2. Once the ISP/AP has been developed, the Contractor must orient the client to that portion of the plan that pertains to them and ensure the client is involved in its implementation.
3. The Contractor shall develop Support Strategies for the client. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.

4. In the case of services that are offered on a recurring basis, the Contractor, as a member of the client's Team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the client?s service/support requirements and to make adjustments as necessary based on the client?s needs. However, it may meet more often as determined by the client or other members of the team.

B. Health and Safety Requirements Contractor shall notify the Support Coordinator and Representative within 24 hours of the development of any apparent medical need for the person.

Rate: PAC services are available on an quarter hour and daily basis. PAC day rate equals eight hours or more of Personal Assistance services. Overnight stays of 8 to 24 hours in length rendered, as a single episode of service, shall be billed at the PAC daily rate. Single episodes of service rendered for longer than twenty-four hours shall be billed as one day of service plus whatever additional hours of service are rendered during this single episode using the PAC quarter-hour rate until those additional hours exceed eight in which case another unit of daily PAC shall be billed. The quarter hour rate may only be used during a single episode of service when that episode has exceeded 24 hours in length, but has not reached eight additional hours, which would justify a second unit of daily PAC. The person must receive at least eight hours of services in a single episode to qualify for billing PAC daily rate.

Staff Support: Actual type, frequency and duration of direct care staff support will be defined in the client's ISP/AP based on the client?s selected housing arrangement and assessed needs.

Service Code: **PAP** ***Creation Date:*** 1/25/2001

Service Name: **Consumer Preparation Services** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

PAP is designed to prepare the person to supervise and direct their Personal Assistance Services. The services include learning how to effectively identify and communicate their personal needs to the service provider.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$5.64
Personal Need	Standard	$20.00

Service Eligibility

Eligibilit	Description
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM

Service Code

Other

1) The PAP service is designed to ensure that individuals receiving supports through the Physical Disabilities program are prepared to supervise and direct their personal assistance services.The need for and type of service delivered will vary depending upon the nature of the client?s disability and the client?s experience in directing and supervising personal attendants. Services may include instruction in methods of problem solving, identifying personal needs, hiring and training personal attendants, training the client in preparing and maintaining required documents, and effectively communicating the above services and addressing problems to the clients.

2. Limitations: PAP does not include educational, vocational or prevocational components. Consumer Preparation services may be given up to 10 hours per year.

3. Population Served: The Contractor will serve only clients who have met the eligibility requirements for the Physical Disabilities Waiver and who have been authorized for services/supports by the Physical Disabilities Nurse Specialist (PDNS). These Physical Disabilities Waiver clients shall be 18 years of age or older and shall include people with physical disabilities as defined in Utah Administrative Code R539-1.

4. Contractor?s Qualifications:

a. The Contractor must be one of the six approved Utah Centers for Independent Living Centers (ILC). These centers are non-profit providers who are designated by the Utah Office of Rehabilitation, in the State?s Rehabilitation plan, to provide Independent Living services for individuals with physical disabilities across the State. The Utah Independent Living Centers are designated, by the Center of Medicaid/Medicare Services/Health Care Finance Association (CMS/HCFA) and the DHS/DSPD?s Physical Disabilities Home and Community Based Waiver, as the specific agencies approved to provide the PAP services for the State of Utah.

b. The Contractor must have all applicable licenses as prescribed in Utah AdministrativeCode R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed contractor must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

c. The Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. The Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

5. Contractor Staff Requirements: The Contractor?s PAP staff will be non-clinical staff, having a background in individual needs of clients with physical disabilities. Background Investigations: In accordance with Utah Code ÏÏ 62A-2-121,

62A-2-122, and 62A-4-116.2, any person providing PAP services shall pass an annual Bureau of Criminal Identification (BCI) background check conducted by the DHS, Office of Licensing. Any PAP worker who has lived outside the State of Utah for a period greater than 4 weeks during the preceding five (5) years, shall pass a Federal Bureau of Investigation Nationwide Criminal Background check consistent with current DHS, Office of Licensing requirements. Additionally, staff must annually pass a review of the abuse registries queried by the DHS Office of Licensing. http://rules.utah.gov/publicat/code/r501/r501-14.htm Staff must be 18 years of age.

6. Staff Training Requirements:
   1) PAP staff will be knowledgeable of information being presented.
   2) PAP staff will have the ability to train on the subject matters listed in the General Description above.

7. Staff Support: Actual type, frequency and duration of support will be defined in the client's Individual Support Plan Action Plan (ISP/AP) based on the client?s assessed needs.

Rate

8. Rate: PAP is an hourly, one-on-one service.

Service Code: **PAS**

Service Name: **OBRA Evaluation Payment**

Contract Type: Closed or fixed dollar amount contract required

Residential: No

Creation Date: 1/25/2001

Obsolete Date:

DSPD

Description:

The OBRA evaluation is used to pay for the OBRA specialist's initial PASSR nursing evaluation.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Session	Standard	$376.33
Hourly	Standard	$92.16

Service Eligibility

Eligibilit	Description
MR	MR/DD

Service Code: **PBA** ***Creation Date:*** 3/ 8/2006

Service Name: **Personal Budget Assistance** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

PBA provides support for financial matters, fiscal training, supervision of financial resources, savings, retirement, earnings and funds monitoring, monthly check writing, bank reconciliation, budget management, tax and fiscal record keeping and filing, and fiscal interaction on behalf of the individual.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$5.71
Daily	Standard	$11.43

Service Eligibility

Eligibilit	Description
SD	KIDS IN CUSTODY STATE FUNDS
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

Personal Budget Assistance (PBA) provides hourly and daily one-on-one support with financial matters, fiscal training, supervision of financial resources, savings, retirement, earnings, and funds monitoring, monthly check writing, bank reconciliation, budget management, tax and fiscal record keeping and filing and fiscal interaction on behalf of the individual. Generally, this service is provided along with another support like residential habilitation or supported living. A PBA contractor shall manage the personal finances on behalf of a person in services and may also act as the Social Security Administration, Representative Payee, conservator or the person?s voluntarily appointed personal funds manager.

PBA may be paid only to persons participating in the Provider-based services method.

PBA Contractor shall comply with the following additional requirements:

A. Representative Payee
1. As per R539-3-5(2), the Contractor shall follow all Social Security Administration requirements outlined in 20 CFR 416.601-665.

2. As per R539-3-5(1), persons shall have access to and control over personal funds unless the person/representative voluntarily signs a DHS/DSPD Voluntary Financial Support Agreement (Form 1-3). The Contractor's Human Rights Committee may recommend to the person?s team to restrict a person?s right to manage personal funds, if the person?s money, health or safety is placed in jeopardy by severe mishandling, unlimited access or exploitation of funds by the person or others. The Contractor?s staff shall give the person training, support and opportunities to manage finances to the maximum extent possible.

3. The Contractor?s staff shall review financial records with the person at least monthly.
a. Maintain documentation of this review in the person?s records and include reconciled financial statements.
b. Keep an accurate record of all funds deposited on behalf of the person with the Contractor for use by the person. This record shall contain a list of deposits and withdrawals by category of food, rent, clothing and leisure. This record shall be verifiable with receipts and/or monthly bank statements.
c. Substantiate purchases over $20.00 per item by receipts signed by the person and professional staff.
d. Verify multiple items purchased over $20.00 with receipts, cancelled checks or monthly bank statements.

4. The Contractor?s staff shall document the handling of personal funds in a way that is not harmful or embarrassing to the person and supports the intent of the income source. The team may determine how a person can be assisted with financial

matters, recommend the type of financial support a person may need and refer the person to a review by the Contractor?s Human Rights Committee. The Contractor?s staff should act as representative or protective payee only in a situation where no other knowledgeable, financially competent adult is willing to take on the representative or protective payee responsibilities. The Contractor may submit an alternative procedure for consideration by the Division Director. The Contractor shall only use the proposed alternative procedure if written approval of the variance is granted by the Division Director or designee.

5. Upon receipt of the person?s team approval or a DHS/DSPD Form 1-3, signed by the person/Representative, Contractor?s staff shall manage the major personal business affairs of a person. Major personal business affairs include management of personal funds, checking account, savings account, or other financial matters related to supplemental income. Any variance from procedures must be approved by the Contractor's Human Rights Committee or requested by the person/representative and documented in the Individual Support Plan?s Action Plan (ISP/AP).

6. A record shall be kept of the person?s petty cash funds. The amount of cash maintained in the person?s petty cash account shall not exceed $50.00 without Contractor?s administrative approval. Records shall be kept of all deposits and withdrawals to the petty cash account.

7. The Contractor?s staff shall assure accuracy of personal financial records through monthly review performed by someone other than the Contractor?s staff authorizing expenditures. This review shall include verifying receipts of purchases of single items exceeding $20.00 in value. A quarterly administrative review of monthly financial documentation, bank statement, receipts and purchases shall be conducted by each Contractor for a random sample of persons receiving support to ensure adequate control of finances for all persons served by the Contractor. The Contractor?s staff shall maintain documentation that approved reviews were conducted.

8. It is recommended that the Contractor protect the person?s funds by using methods such as:
a.not writing checks for more than $35.00 cash a week,
b.not using the Automatic Teller Machine for transactions,
c.making deposits with no cash back.
These actions help to protect the person?s funds by establishing a bank record of the total funds received by the person and requiring the person to sign all transactions. The Contractor?s Human Rights Committee may propose specific limits on a person?s access to money and allowable spending amounts for the person?s team review and approval.

9. Representative or protective payee?s monthly statement shall be forwarded monthly to the Support Coordinator.

10. Contractor shall comply with DHS/DSPD representative payee records reviews. DHS/DSPD shall review the Contractor?s representative payee records as described in Utah Code Ï 62A-5-103(2)(k).

B. Person?s Personal Funds
1. In the event of an emergency situation, a Contractor may write a check to the person or the person may borrow money from the Contractor. The person?s support team must be notified and grant approval of the Contractor?s actions. The Contractor?s staff must document the emergency and the person?s support team approval and maintain this documentation in the person?s record. The Contractor shall have policies and procedures in place to make sure a person does not continuously owe the Contractor money due to emergency situations.

2. A person shall not give cash to or make purchases from the Contractor or Contractor?s staff. A person shall not write checks to the Contractor?s staff. Only in cases of emergency, may a person write a check to repay a loan made by the Contractor. Contractor shall ensure the person has adequate access to personal finances in order to cover anticipated expenditures. The exceptions to persons making payments to the Contractor are as follows: a) reimbursement to the Contractor for destruction of property by the person, if approved by the team, and allowable by contract, and b) room and board charges, if allowable by contract.

3. The Contractor?s staff shall not loan or give money to a person. The Contractor shall not loan or give money to a person except in case of an emergency. A person shall not loan or give money to the Contractor?s staff or the Contractor itself.

4. Belongings with a purchase price or value of $50.00 or more shall be inventoried. The inventory shall also include other items of significance to the person, which may cost less than $50.00. The inventory shall be maintained on an ongoing basis and reviewed annually. Discarded items shall be deleted from the inventory list. Documentation of the reason for the deletion of an item shall be maintained and shall require the signature of the person/representative and one Contractor staff or two Contractor staff if the person/representative is not available. Personal possessions shall be released to the person/representative whenever the person moves.

PBA is only available to persons participating in the Provider-based method.

Limitations:
PBA shall be used instead of Residential Habilitation and Supported Living when the person needs support to manage his or her personal funds. PBA is used to supplement Residential Habilitation and Supported Living services and allows for a distinction of fiscal activities from programmatic activities.

PBA

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions as defined in Utah Administrative Code R539-1.

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501 to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits governing the type of service provided.

Contractor must be enrolled as an approved Individual Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

Staff Qualifications:
All staff must demonstrate competency, as determined by the Contractor, education, and training before the delivery of any supports to persons.

Professional staff must be licensed as applicable according to the Division of Occupational and Professional Licensing.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing the applicable portion of the ISP/AP. The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.

2. Once the ISP/AP has been developed, the Contractor must orient the person to the plan and ensure the person is involved in its implementation.

3. The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.

4. The Contractor, as a member of the person's team, is required to meet at least annually (within 12 months of the last Person-Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

All requirements listed in the applicable Residential Service Descriptions for the person (RHI, RHS, HHS or PPS apply to equally to PBA).

Staff Support:
Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person?s assessed needs. Up to fifty percent of the service may be delivered outside of the person?s presence.

Rate:
Personal Budget Assistance is provided on both a daily as well as a quarter hour basis. The daily rate is paid if the person is

Service Code: **PEI** ***Creation Date:*** 7/20/2005

Service Name: **Personal Emergency Response System Installation** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:
PEI is for the installation fee for a device whose purpose is to give 24-hour access to emergency personnel and provide artificial companionship during times of insecurity or crisis. The correct installation of this device is critical to the correct operation of the device. It is the contractors responsibility to ensure it is in working order prior to leaving the clients location.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Personal Need	Standard	$50.00

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Contractor Qualifications
Contractors must be certified to install the device.

Other
PEI is established established for the installation fee of a device whose purpose is to give 24 hour access to emergency personnel and provide artifical companionship during times of insecurity or crisis. The correct installation of this device is related to the operation of the device. It is the contractors responsibility to ensure it is in working order prior to leaving the

Population Served
Services are available to individuals who are found eligible by the division.

Service Code: **PEM** ***Creation Date:*** 7/20/2005

Service Name: **Emergency Response and Medication Dispensary Device Monthly Fee** ***Obsolete Date:***

Contract Type: Either a non-fixed or fixed amount contract required DSPD

Residential: No

Description:

PEM provides a two-way telecommunications system that offers a variety of security and emergency response services. The system is connected to the person's telephone and is programmed to signal a response center maintained by the contractor. Additional system features include a medication dispensary device, an alarm system, and two way voice communication.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Month	Standard	$91.00

Service Eligibility

Eligibilit	Description
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Contractor Qualifications

Contractor must posses a current business license and be able to provide the service to clients living in remote areas of the state of Utah. The contractor shall insure a response center is staffed by trained professionals, licensed by the state of Utah as a Home Health Agency or licensed by the FCC as an alarm system network. Contractor shall train clients at the time of instaliation on how to properly set up and test their ujnits and provide them with a users manual. Installed units shall be tested on a monthly basis including battery stsatus and monitored by the contractor.

Other

To provide a two way telecommunications system that offers a variety of security and emergency response services. The system shall be connected to the clients telephone and progrtamed to signal a response center maintained by the contracvtor. In addition, the contractor will provide a Medication Dispensary Device, which is an automated medication despenser that a client uses to dispenses the proper dosage of medication at a specified time. The device includes a timed alarm system and a two-way voice monitoring system to assist clients in taking their medications at the correct time as

Population Served

Clients with mental retardation or related conditions, and acquired brain injury in accordance with DHS>DSPD eligibility requirements as outlined in Admin Rule R539-1

Service Code: **PEP** ***Creation Date:*** 12/13/2003

Service Name: **Personal Emergency Response - Purchase Fee** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:
PEP is for an electronic device that enables individuals at high risk of institutionalization to obtain help in the event of an emergency. The device provides 24 hour access to emergency personnel as well as offers artificial companionship to the person during times of insecurity or crisis. The system is limited to those individuals who live alone or live with others who are unable to respond to an emergency, or who are alone with no regular caretaker for extended periods of time, and who would otherwise require extended routine supervision.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Month	Standard	$226.00
Personal Need	Standard	$226.00

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Contractor Qualifications
Contractors must be knowledgeable in the area of emergency response systems.

Other
PEP is established to pay the purchase fee of a device whose purpose is to give 24 hour access to emergency personnel and provide artifical companionship during times of insecurity or crisis.

Population Served
Services are provided to individuals who are found eligible by the division.

Tx/Serv Requirement
Personal Emergency Response System (PER) is an electronic device that enables individuals at high risk of institutionalization to secure help in the event of an emergency. The system is connected to the individuals phone and programmed to signal a response center once a "help" button is activated. the response center is staffed by trained professionals. The PER system is limited to those individuals who live alone or live with others who are unable to respond to an emergency, or who are alone with no regular caretaker for extended periods of time, and who would otherwise require

Rate
Need: Actual costs for a one time purchase of PER equipment when such purchase does not duplicate monthly rental fees. Lost or abused rescue alert unit replacements and rescue alert personal help buttons replacement will be invoiced directly to

PEP

Service Code: **PER** ***Creation Date:*** 1/25/2001

Service Name: **Personal Emergency Response System - Monthly Fee** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:
PER is for the rental an electronic device that enables individuals at high risk of institutionalization to obtain help in the event of an emergency. The PER system is limited to those individuals who live alone or live with others who are unable to respond to an emergency, or who are alone with no regular caretaker for extended periods of time, and who would otherwise require extended routine supervision.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Month	Standard	$39.00

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other
Personal Emergency Response System (PER) is an electronic device that enables individuals at high risk of institutionalization to secure help in the event of an emergency. The system is connected to the individuals phone and programmed to signal a response center once a "help" button is activated. the response center is staffed by trained professionals. The PER system is limited to those individuals who live alone or live with others who are unable to respond to an emergency, or who are alone with no regular caretaker for extended periods of time, and who would otherwise require

Service Code: **PM1** ***Creation Date:*** 3/ 9/2006

Service Name: **Professional Medication Monitoring by a Licensed Practical Nurse** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

PM1 offers hourly one-on-one medication monitoring, testing and nursing services necessary to provide medication management to assure the health and welfare of the person. The service includes regularly scheduled, periodic visits by a nurse who evaluates their health and safety, medication regime, completion of necessary laboratory testing, and personal training regarding the medication regimen. The Nurse also ensures that all pill-dispensing aids are suitably stocked and refilled; and may provide incidental training to staff on topical matters surrounding general patient care.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$5.20

Service Eligibility

Eligibilit	Description
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

Professional Medication Monitoring by a Licensed Practical Nurse (PM1) includes hourly one-on-one medication monitoring, testing and nurse services necessary to provide medication management to assure the health and welfare of the person. This service includes regularly scheduled, periodic visits by a nurse in order to conduct an assessment of the person with regard to their health and safety particularly as it is affected by the maintenance medication regimen that has been prescribed by their physician, to review and monitor for the presence and timely completion of necessary laboratory testing related to the medication regimen, and to offer patient instruction and education regarding this medication regimen.

Nurses shall also provide assistance to the person by ensuring that all pill-dispensing aids are suitably stocked and refilled, and may provide incidental training to staff on topical matters surrounding general patient care.

Population Served:
The Contractor shall serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC) as defined in Utah Administrative Code R539-1.

Contractor?s Qualifications:
Contractor shall have all applicable licenses as prescribed in Utah Administrative Code R501 to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed Contractor shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103.

Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Staff Qualifications:
All staff shall demonstrate competency (in the services covered by the contract), as determined by the Contractor, in addition all applicable education, and training shall be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Contractor shall ensure that professional medication monitoring staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Professional staff must be licensed as applicable according to the Division of Occupational Professional Licensing (DOPL). Specifically, staff providing services under this code must be licensed by DOPL pursuant to Utah Administrative Code R156 and Utah Code Annotated Ï 58. Licensed Practical Nurses may provide the services described under this code only upon the delegation of and under the supervision of a Registered Nurse, pursuant to Utah Administrative Code R156-31b-703.

Direct Service Requirements:
A. Psychotropic Medications
1. Psychotropic Medications include any drug prescribed to stabilize or improve mood, mental status, or behavior.

2. For persons on psychotropic medications, the Contractor shall review a specific type of Support Strategy referred to as a Psychotropic Medication Plan that contains the following information:
a. Identification of the specific medication by it generic or brand name; the date on which the medication was commenced or is to be commenced; and dosage as determined by a qualified medical professional.
b. Identification of side effects to monitor. When antipsychotic medications are used, monitoring procedures may utilize standardized assessments instruments such as the Abnormal Involuntary Movement Scale (AIMS).
c. A statement of specific behaviors or symptoms targeted to assess advantages and disadvantages of the prescribed psychotropic medications.
d. Identification of other support and services that are available and would be useful in the treatment of the targeted behavior or symptom and/or any related illness or condition of the person. Such supports or services may include Behavior Support Plans, psychotherapy or laboratory studies (for example, blood work to check lithium serum, CBC, liver function).

B. Non-psychotropic Medications
1. Non-psychotropic medications are those prescribed or dispensed for reasons other than to affect the way the person thinks, feels or behaves.
2. For persons on non-psychotropic medications, the Contractor shall review physician?s orders and medical data sheets maintained as part of each person?s personal record that contains the following information:
a. Identification of the specific medication by its generic or brand name; the date on which the medication was commenced or is to be commenced, and dosage as determined by a qualified medical professional.
b. Identification of side effects to monitor.
c. A statement of specific symptoms targeted to assess advantages and disadvantages of the prescribed medications.
d. Identification of other supports and services that are available and would be useful in the treatment of the targeted symptom and/or any related illness or condition of the person. Such supports or services may include laboratory studies (for example, blood work to check CBC, liver function).

C. General Service Requirements
1. Contractor shall establish a schedule of visitation with the person after consultation with the person?s physician as well as the staff and supports the person has available, and the person?s family/representative.
2. Services provided under this code shall always include a face-to-face assessment of the person, and particularly, the person?s health and welfare status. Assessments shall also focus on the safety and efficacy of any medication the person is prescribed by their physician. An assessment shall be conducted of any benefits that the person is demonstrating as a result of their medication regimen, or the lack thereof, as well as an assessment of any adversities or side-effects that the person is experiencing. Similarly, an assessment shall be conducted of the person?s compliance with his/her physician?s orders, or lack there of, as well as any barriers that the nurse identifies for compliance. Such assessments shall occur as a result of observation, discussion and review of records with the staff, and direct examination of the person.
3. The results of this assessment shall be recorded in a note by the nurse which contains: 1) a description of the person?s subjective presentation; 2) a description of the objective observations the nurse has made after the examination, review of records and consultation with the staff, supports and the person?s family/representative; 3) a description of the assessment made by the nurse of the person?s status; and, 4) a plan for the continuing care of the person surrounding his or her health status and medication regimen. A copy of this note shall be maintained by the Contractor and copies shall be furnished to the staff/supports of the setting where the person is receiving services as well as to the person?s physician.
4. The contractor shall ensure that all laboratory surveillance ordered by the person?s physician is performed as ordered, and shall either collect appropriate samples to complete such surveillance and convey them to the specified laboratory as ordered by the person?s physician, or else, the Contractor shall educate the staff/supports of the setting where the person is receiving services of the need for the laboratory surveillance and offer instructions regarding its completion. The contractor shall review the results of previously collected laboratory surveillance studies, and shall similarly ensure that the results of studies collected during a current assessment are distributed to the person?s physician and maintained in the record of the setting where the person is receiving services.
5. The Contractor shall ensure during each visit that medical equipment, as well as personal medical response devices, the person is provided with are functioning properly and shall arrange for maintenance and repairs as needed. The Contractor shall also ensure that medication dispensing devices and aides are functioning properly and are filled, and shall educate staff/supports of the setting where the person is receiving services of the status, operation and necessary maintenance of any such devices.
6. The Contractor shall educate staff/supports regarding the findings of the assessment, the person?s overall health status, as well as the plans for the person?s continued health care.

D. Contractor staff shall review medication errors and determine in consultation with the RN if additional medical professionals should be contacted to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, misadministration of medication, medication administered at the wrong time, or failure to follow

laboratory survey schedule, etc.
a. Any medication errors that occur shall be documented in the person's file and reported to the Support Coordinator and Contractor Director or designee.

E. Contractor shall notify the guardian within 24 hours of the development of a medical issue for any person, such as illness requiring medical appointments or an emergency room visit. This does not include medical appointments for general health check-ups.

F. Any allergies the person has shall be recorded by Contractor staff in the person's medical record and disclosed to the person's primary physician.

Staff Support:
Actual type, frequency and duration of direct care staff support, and other community living supports shall be defined in the person's Individual Support Plan?s Action Plan (ISP/AP) based on the person?s selected housing arrangement and assessed needs.

Rate:
Payments for professional medication monitoring are not made for room and board, the cost of facility maintenance, routine

Service Code: **PM2** ***Creation Date:*** 3/17/2006

Service Name: **Professional Medication Monitoring by a Registered Nurse** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

PM2 includes hourly one-on-one medication monitoring, testing and nurse services necessary to provide medication management to assure the health and welfare of the person. The service includes regularly scheduled, periodic visits by a nurse who evaluates their health and safety, medication regime, completion of necessary laboratory testing, and personal training regarding the medication regimen. The Nurse also ensures that all pill-dispensing aids are suitably stocked and refilled; and may provide incidental training to staff on topical matters surrounding general patient care

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$7.51

Service Eligibility

Eligibilit	Description
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description . . . . . .
Professional Medication Monitoring by a Registered Nurse (PM2) includes hourly one-on-one medication monitoring, testing and nurse services necessary to provide medication management to assure the health and welfare of the person. This service includes regularly scheduled, periodic visits by a nurse in order to conduct an assessment of the person with regard to their health and safety particularly as it is affected by the maintenance medication regimen that has been prescribed by their physician, to review and monitor for the presence and timely completion of necessary laboratory testing related to the medication regimen, and to offer patient instruction and education regarding this medication regimen. Nurses shall also provide assistance to the person by ensuring that all pill-dispensing aids are suitably stocked and refilled, and may provide incidental training to staff on topical matters surrounding general patient care.

Population Served . . . . . .
The Contractor shall serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC) as defined in Utah Administrative Code R539-1.

Contractor?s Qualifications . . . . . .
Contractor shall have all applicable licenses as prescribed in Utah Administrative Code R501 to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed contractor shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103.

Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Staff Qualifications . . . . . .
All staff shall demonstrate competency (in the services covered by the contract), as determined by the Contractor, in addition all applicable education, and training shall be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Contractor shall ensure that professional medication monitoring staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Professional staff shall be licensed as applicable according to the Division of Occupational Professional Licensing (DOPL). Specifically, staff providing services under this code shall be licensed by DOPL pursuant to Utah Administrative Code R156 and Utah Code Annotated Ï 58. Registered Nurses may provide all services specified under this service description pursuant to Utah Administrative Code R156-31b-704.

Direct Service Requirements . . . . . .

A. Psychotropic Medications

1. Psychotropic Medications include any drug prescribed to stabilize or improve mood, mental status, or behavior.
2. For persons on psychotropic medications, the Contractor shall contain the following information:

a. Identification of the specific medication by its generic or brand name; the date on which the medication was commenced or is to be commenced; and dosage as determined by a qualified medical professional.

b. Identification of side effects to monitor. When antipsychotic medications are used, monitoring procedures may utilize standardized assessments instruments such as the Abnormal Involuntary Movement Scale (AIMS).

c. A statement of specific behaviors or symptoms targeted to assess advantages and disadvantages of the prescribed psychotropic medications.

d. Identification of other support and services that are available and would be useful in the treatment of the targeted behavior or symptom and/or any related illness or condition of the person. Such supports or services may include Behavior Support Plans, psychotherapy or laboratory studies (for example, blood work to check lithium serum, CBC, liver function).

B. Non-psychotropic Medications

1. Non-psychotropic medications are those prescribed or dispensed for reasons other than to affect the way the person thinks, feels or behaves.
2. For persons on non-psychotropic medications, the Contractor shall review physician?s orders and medical data sheets maintained as part of each person?s personal record that contains the following information:

a. Identification of the specific medication by its generic or brand name; the date on which the medication was commenced or is to be commenced, and dosage as determined by a qualified medical professional.

b. Identification of side effects to monitor.

c. A statement of specific symptoms targeted to assess advantages and disadvantages of the prescribed medications.

d. Identification of other supports and services that are available and would be useful in the treatment of the targeted symptom and/or any related illness or condition of the person. Such supports or services may include laboratory studies (for example, blood work to check CBC, liver function).

C. General Service Requirements

1. Contractor shall establish a schedule of visitation with the person after consultation with the person?s physician as well as the staff and supports the person has available, and the person?s family/representative.
2. Services provided under this code shall always include a face-to-face assessment of the person, and particularly, the person?s health and welfare status. Assessments shall also focus on the safety and efficacy of any medication the person is prescribed by their physician. An assessment shall be conducted of any benefits that the person is demonstrating as a result of their medication regimen, or the lack thereof, as well as an assessment of any adversities or side-effects that the person is experiencing. Similarly, an assessment shall be conducted of the person?s compliance with his/her physician?s orders, or lack there of, as well as any barriers that the nurse identifies for compliance. Such assessments shall occur as a result of observation, discussion and review of records with the staff, and direct examination of the person.
3. he results of this assessment shall be recorded in a note by the nurse which contains: 1) a description of the person?s subjective presentation; 2) a description of the objective observations the nurse has made after the examination, review of records and consultation with the staff, supports and the person?s family/representative; 3) a description of the assessment made by the nurse of the person?s status; and, 4) a plan for the continuing care of the person surrounding his/her health status and medication regimen. A copy of this note shall be maintained by the Contractor and copies shall be furnished to the staff/supports of the setting where the person is receiving services as well as to the person?s physician.
4. The Contractor shall ensure that all laboratory surveillance ordered by the person?s physician is performed as ordered, and shall either collect appropriate samples to complete such surveillance and convey them to the specified laboratory as ordered by the person?s physician, or else, the Contractor shall educate the staff/supports of the setting where the person is receiving services of the need for the laboratory surveillance and offer instructions regarding its completion. The Contractor shall review the results of previously collected laboratory surveillance studies, and shall similarly ensure that the results of studies collected during a current assessment are distributed to the person?s physician and maintained in the record of the setting where the person is receiving services.
5. The Contractor shall ensure during each visit that medical equipment the person is provided with, as well as personal medical response devices, are functioning properly and shall arrange for maintenance and repairs as needed. The Contractor shall also ensure that medication dispensing devices and aides are functioning properly and are filled and shall educate staff/supports of the setting where the person is receiving services of the status, operation and necessary maintenance of any such devices.
6. The Contractor shall educate staff/supports regarding the findings of the assessment, the person?s overall health status, as well as the plans for the person?s continued health care.

D. Contractor staff shall review medication errors and determine in consultation with the RN if additional medical professionals should be contacted to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, misadministration of medication, medication administered at the wrong time, or failure to follow laboratory survey schedule, etc.

1. Any medication errors that occur shall be documented in the person's file and reported to the Support Coordinator and

Contractor Director or designee.

E. Contractor shall notify the guardian within 24 hours of the development of a medical issue for any person, such as illness requiring medical appointments or an emergency room visit. This does not include medical appointments for general health check-ups.

F. Any allergies the person has shall be recorded by Contractor staff in the person's medical record and disclosed to the person's primary physician.

Staff Support . . . . . .
Actual type, frequency and duration of direct care staff support, and other community living supports shall be defined in the person's Individual Support Plan?s Action Plan (ISP/AP) based on the person?s selected housing arrangement and assessed needs.

Rate . . . . . .
Payments for professional medication monitoring are not made for room and board, the cost of facility maintenance, routine

Service Code: **PPS** ***Creation Date:*** 1/25/2001

Service Name: **Professional Parent Supports** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

PPS offers a home-like setting for children and provides habilitation, supervision, training and assistance in a certified private home or other certified residential setting. The service gives children or youth with exceptional care needs an alternative to institutional settings in order to enhance their ability to live as independently as possible and fully participate in a community setting of their choosing, and to avoid isolation in their homes and communities.

USSDS Rates as of 12/23/2008

Unit	***Rate Type***	***Rate***
Daily	Standard	$232.93

Service Eligibility

Eligibilit	***Description***
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

PROFESSIONAL PARENT SUPPORTS (PPS) (7.11.06)

General Description: Professional Parent Supports (PPS) provides a home-like setting for children (persons). PPS provides habilitation, supervision, training and assistance in a certified private home or other certified residential setting. PPS may not be provided in a Nursing Facility (NF), or an Intermediate Care Facility for Individuals with Mental Retardation (ICF/MR). PPS services include daily supports to maintain individual health and safety, and assistance with activities of daily life. Services rendered under the PPS service code afford children or youth with exceptional care needs an alternative to institutional settings in order to enhance their ability to live as independently as possible and fully participate in a community setting of their choosing, and to avoid isolation in their homes and communities. The following services are included as part of the PPS code and shall not be reimbursed separately:

Chore Services (CH1, CH2)
Companion Services (COM)
Homemaker Services (HS1 & HSQ)
Personal Assistance (PAC)
Routine, Non-medical Transportation (DTP)

Persons are also excluded from receiving the following services for PPS:
(Cannot bill for PPS and the codes listed above and below.)
Adult Foster Care (AFC)
Community Service Broker (CSB)
Consumer Preparation (PAP)
Family Support (FS1)
Family Training and Preparation Services (TFA)
Family & Individual Training Preparation Services (TFB)
Host Home Support (HHS)
Residential Habilitation Supports (previous Community Living Support) (RHS)
Residential Habilitation Intensive Support (previous Community Living Intensive Support) (RHI)
Respite (RP1, RP2, RP3, RP4 & RP5)
Supported Living (SLA, SLH & SLN)

PPS and other support staff are retained and supervised by the Contractor and certified to provide professional parent services. The Contractor is responsible for recruitment, selection, training, and on-going supervision of PPS and other support staff (including identification of wages and work schedules), support and technical assistance to professional parents, documentation, the person?s support strategies, and meeting certification, waiver, Contract, rule, and statute

requirements.

PPS is available through provider-based services only.

Limitations: The Contractor or PPS parent shall not have custody or guardianship of the person. The Contractor shall assure that PPS parents only provide services for one or two persons per home operated by the Contractor, OR, that the region director in the region where the home operates has provided prior written approval allowing three persons to receive PPS together in the same home. No more than three person may receive PPS/HHS services together in the same home. PPS parents may not act as a conservator or representative payee with Social Security Administration for persons they support in PPS. PPS shall not be used to provide services to persons in the home of a relative or legal guardian.

Population Served: The Contractor shall serve children or youth under age 22 currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), as defined in Utah Administrative Code, Rule R539-1 (http://rules.utah.gov/publicat/code/r539/r539.htm).

Contractor?s Qualifications and Other Responsibilities: The Contractor shall have all applicable licenses as prescribed in Utah Administrative Code, Rule R501 (http://rules.utah.gov/publicat/code/r501/r501.htm) to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

The Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. The Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Prior to signing a Contract, the Contractor shall be a licensed child placement agency through the DHS/Office of Licensing as detailed in DHS, Office of Licensing Rule R501-7 .1 and 2. http://rules.utah.gov/publicat/code/r501/r501.htm

The Contractor shall be under a DHS/DPSD Contract to provide PPS and shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

The Contractor shall provide emergency procedures for fire and other disasters and training on evacuation procedures.

The Contractor shall disclose room and board charges and food stamps or other income not originating with DHS/DSPD.

Administrative Requirements: Policies and Procedures: The Contractor shall have established policies and procedures, a copy of which shall be maintained and readily accessible at each facility. These policies and procedures shall:

1. Disclose board and room charges and food stamps or other income not originating with DHS/DSPD.
2. For residential Contractor, include emergency procedures for fire and other disasters that require the development and posting of an evacuation plan in each residential site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills.
3. Govern the handling, storage, disposal and theft prevention of medication.
4. Provide procedures regarding the nutrition of the person.

Staff Qualifications: PPS and other support staff shall be trained in the Staff Training Requirements as outlined in General Requirements, Home and Community Based Waiver, rule, statute, and Contract. All staff shall demonstrate competency (in the services covered by the Contract), as determined by the Contractor. In addition, all applicable education, and training shall be completed before the delivery of any supports to persons and before performing any work for persons without supervision.

PPS and other support staff shall pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

PPS staff shall be at least 21 years old.

Specific Training Requirements: All direct care and direct care supervisory staff shall receive specific staff training that prepares them to complete the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, and related conditions.

PPS staff shall complete and achieve competency in specific training areas one through eight within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas nine through 12 within six months of employment.

1.1. Medication competency:
   a. Identification of common medications, their effects, purpose and side effects,
   b. Identification of medications and medication side effects specific to the person,
   c. Recording and documentation of self-administration of medications, and
   d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.

2.2. Recognition of illness or symptoms of health deterioration specific to the person.

3.3. Dietary issues specific to the person.
4.4. Critical health care issues specific to the person.
5.5. Swallowing and eating difficulties specific to the person.
6.6. Principles of age appropriate community inclusion and natural support development specific to the person.
7.7. Preferences and non-negotiable routines specific to the person.
8.8. Significant functional limitations and disabling conditions specific to the person.
9.9. Key elements of the Americans with Disabilities Act.
10.10.Person-centered assessment and plan development.
11.11. How to develop and support the person?s preferred recreational and leisure activities.
12.The Contractor and the Contractor?s staff providing acquired brain injury (ABI) services shall demonstrate competence or awareness in the following areas:
a. Effects of brain injuries on behavior;
b. Transitioning from hospitals to community support programs including available resources;
c. Functional impact of brain changing;
d. Health and medication;
e. Role of the direct care staff relating to the treatment and rehabilitation process;
f. Treatment plan and behavioral supports; and,
g. Awareness of the Family?s perspective on the brain injury.

Direct Service Requirements:
A. Person-Centered Planning: The Contractor?s staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.
1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). These may include a Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, and Data Collection and/or Task Analysis sheet for skill training or other support.
2. Once the ISP/AP has been developed, the Contractor shall orient the person to that part of the plan that pertains to the Contractor and ensure the person is involved in its implementation.
3. The Contractor shall develop and implement Support Strategies for the person. The Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
4. The Contractor, as a member of the person's team, is required to assist in assessments and meet at least annually (within 12 months of the last Person-Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.
B. Psychotropic Medications
1. Psychotropic Medications include any drug prescribed to stabilize or improve mood, mental status, or behavior.
2. For persons on psychotropic medications, the Contractor shall complete a specific type of Support Strategy referred to as a Psychotropic Medication Plan that contains the following information:
a. Identification of the specific medication by it generic or brand name; the date which the medication was commenced on or is to be commenced, and dosage as determined by a qualified medical professional.
b. Identification of side effects to monitor. When antipsychotic medications are used, monitoring procedures may utilize standardized assessments instruments such as the Abnormal Involuntary Movement Scale (AIMS).
c. A statement of specific behaviors or symptoms targeted to assess advantages and disadvantages of the prescribed psychotropic medications.
d. Identification of other support and services that are available and would be useful in the treatment of the targeted behavior or symptom and/or any related illness or condition of the person. Such supports or services may include Behavior Support Plans, psychotherapy or laboratory studies (for example, blood work to check lithium serum, CBC, liver function).
C. Person?s Personal Funds
1. In the event of an emergency situation, the Contractor may write a check to the person or the person may borrow money from the Contractor. The person?s support team shall be notified and grant approval of the Contractor?s actions. The Contractor?s staff shall document the emergency and the person?s support team approval and maintain this documentation in the person?s record. The Contractor shall have policies and procedures in place to make sure a person does not continuously owe the Contractor money due to emergency situations.
2. A person shall not give cash to or make purchases from the Contractor or the Contractor?s staff. A person shall not write checks to the Contractor?s staff. Only in cases of emergency, may a person write a check to repay a loan made by the Contractor. The Contractor shall ensure the person has adequate access to personal finances in order to cover anticipated expenditures. The exceptions to persons making payments to the Contractor are as follows: a) reimbursement to the Contractor for destruction of property by the person, if approved by the team, and allowable by contract, and b) room and board charges.
3. The Contractor?s staff shall not loan or give money to a person. The Contractor shall not loan or give money to a person except in case of an emergency. A person shall not loan or give money to the Contractor?s staff or the Contractor itself.
4. Belongings with a purchase price or value of $50.00 or more shall be inventoried. The inventory shall also include other items of significance to the person, which may cost less than $50.00. The inventory shall be maintained on an ongoing basis and reviewed annually. Discarded items shall be deleted from the inventory list. Documentation of the reason for the deletion of an item shall be maintained and shall require the signature of the person/representative and one of the Contractor?s staff or two of the Contractor?s staff if the person/representative is not available. Personal possessions shall be released to the person/representative whenever the person moves.
D. Health and Safety Requirements

1. The Contractor shall assure that persons receive training, opportunities to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the Individual Support Plan (IPS), as allowed by the person's Medicaid and insurance plans.

2.2. The Contractor?s staff shall assure persons receive training and assistance to:

a. Identify primary health care practitioners;

b. Obtain dental and physical examinations;

c. Safely follow physician orders;

d. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the person's physician; and

e. Document the frequency, dosage, and type of medication taken.

3. Person health information including the following:

a. A record of all medical and /or dental examinations performed, including assessments, treatments, and prescribed medication(s);

b. A record of all surgeries, immunizations, illnesses, chronic complaints, and significant changes in health;

c. Authorization for any emergency medical treatment needed;

d. A record of all medication(s) taken by the person;

e. A record of all incidents requiring first aid and/or a referral to medical personnel or a health care facility;

f. A record of all medication errors; and,

g. A record of all accidents or injuries.

4. Medications shall be properly stored according to the person's needs and capabilities, as determined by the team.

5. The Contractor?s staff shall immediately contact the appropriate medical professional to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, misadministration of medication, medication administered at the wrong time, or failure to follow laboratory survey schedule, etc.

a. Any medication errors that occur shall be documented in the person's file and reported to the Support Coordinator and the Contractor?s Director or designee.

6. The Contractor shall notify the Support Coordinator and person representative within 24 hours of the development of a medical issue for any person, such as illness requiring medical appointments or an emergency room visit. This does not include medical appointments for general health check-ups.

7. Any allergies the person has shall be recorded by the Contractor?s staff in the person's medical record and disclosed to the person's primary physician.

E.Health and Nutrition Requirements

1. Persons shall have kitchen privileges with access to food and ingredients. Kitchen privileges may be limited if approved by the Human Rights Committee, in the interest of the person?s health.

2. The Contractor?s staff shall assist persons in planning meals to meet basic nutritional standards, special diets, food preferences, customs, and appetites.

F. Transportation

The Contractor shall provide routine transportation to shopping and other community activities, based on the Contractor's and team's reasonable and professional judgment.

The Contractor shall check driver?s driving record annually and shall assure that driver?s with problematic records are not allowed to continue providing transportation as part of this service. The Contractor shall check annually that drivers providing transportation in their personal vehicles have current/adequate auto insurance. The Contractor shall keep documentation of this review and copies of the driver?s record and auto insurance in the employee?s file.

Drivers make certain that:

1. Persons are not left unattended in the vehicle.

2. Persons use seat belts and remain seated while the vehicle is in motion.

2. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively operating a lift on vehicles that require the keys to be in the ignition to operate the lift.

4. All persons in wheelchairs use seat belts, or locking mechanisms to immobilize wheelchairs during travel.

5. Persons are transported in safety restraint seats when required by Utah State law.

6.6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving.

7.7. Persons arrive safely at the scheduled time and arranged destination, that no one is left alone along the way to or from day supports even in emergency situations or when the health and safety of others may be in question. If necessary during an emergency, the driver may wait until another driver arrives to complete the transport.

G.Access to Community Services The Contractor shall assist the person in obtaining assistance from community and government organizations, including but not limited to finding housing, applying for food stamps and obtaining Social Security benefits, etc. The Contractor shall also collaborate with applicable school, child welfare, and other agencies/individuals involved in the person?s care.

Staff Support: Actual type, frequency and duration of direct care staff support, and other community living supports shall be defined in the person's ISP/AP based on the person?s selected housing arrangement and assessed needs. The support coordinator identifies the total hours of direct support needed by the person and the Contractor determines how to split the total hours between the professional parent and other direct support staff as well as other business related matters surrounding the performance of the contract provided that these decisions conform with DHS/DSPD policies and procedures pertaining to contracts.

Rate: PPS is paid as a daily rate. PPS can include up to 24-hour direct care staff support. Generally, however, PPS services are provided for 24-hours a day on holidays and weekends and for 18-hours per day on days when the person is in

Service Code: **PSY** ***Creation Date:*** 5/26/2006

Service Name: **Psychiatric Evaluation** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

PSY is a clinical evaluation that determines the person?s mental status and treatment needs employing standard psychiatric techniques. Services may include assessing the need for and prescribing psychotropic medications. This is a diagnostic service only and is not designed or intended to supplant therapy.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$31.33

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
SG	SELF DETERM NON-MEDICAID

Service Code

Other

General service description: A face-to-face clinical evaluation for purposes of evaluating the person?s mental status and treatment needs employing standard psychiatric techniques. Services may include assessing the need for and prescribing psychotropic medications. This service is specifically designed for persons with disabilities and/or co-occurring mental illness and behavior problems. This is a diagnostic service only and is not designed for therapy.

Specific service description: At a minimum, the evaluation shall include:

a. Date and actual clock time of the service;
b. Duration of the service;
c. Setting in which the service was rendered;
d. Specific service rendered (i.e., psychiatric evaluation);
e. Summary of psychiatric evaluation findings that includes:
  (1) diagnoses; and
  (2) summary of recommended mental health treatment services, and other recommended services as appropriate;
f. Signature and title of individual who rendered the service.
g. The Contractor shall retain a copy of the evaluation in the person file and upon request by DHS/DSPD provide a written copy of the evaluation to the DHS/DSPD caseworker within twenty (20) days of completion.

Staff Qualifications; Staff providing psychiatric evaluation services shall be one of the following:

a. Licensed physician.
b. Licensed Advanced Practice Registered Nurse with a controlled substance license and specializing in psychiatric mental health nursing.

Staff providing services under this code must be licensed by the Division of Professional and Occupational Licensing (DOPL) pursuant to Utah Administrative Code R156, UAC and Section 58 of the Utah Code Annotated. All staff must demonstrate competency, as determined by the Contractor before the delivery of any supports to clients.

Staff must pass a BCI background check through the Department of Human Services, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm
Staff performing service under this service definition must possess knowledge and experience working with persons with disabilities.

Client ratio: The client ratio shall be one provider to one person.

Service Code: **RHI** ***Creation Date:*** 3/13/2006

Service Name: **Residential Habilitation Intensive** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

RHI is a residential service designed to assist a person with the most dangerous and pervasive maladaptive behaviors. These are persons with exceptional care needs whose service, as a result, entails additional expenses such as increased staff wages, staff recruitment, increased staff injuries Workers' Compensation expenses, environmental modifications for increased safety for the person, additional administrative oversight due to the intensity of the person receiving services, and enhanced staff

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Daily	Standard	$380.97

Service Eligibility

Eligibilit	Description
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

Residential Habilitation Intensive (RHI) is a residential service designed to assist a person with the most dangerous and pervasive maladaptive behaviors. These are persons with exceptional care needs who's service, as a result, entails additional expenses such as increased staff wages, staff recruitment, increased staff injuries Workers' Compensation expenses, environmental modifications for increased safety for the person, additional administrative oversight due to the intensity of the person receiving services, and enhanced staff training.

RHI services support the person to gain and/or maintain skills to live as independently as possible and fully participate in a community setting of their choosing, based on the goal for community living contained in the person?s support plan, and to avoid isolation in their homes or communities. RHI provides support, supervision, training and assistance for people to live in licensed and/or certified residential settings. The person?s support plan identifies the type, frequency, and amount of support required by the person based on the person?s requirements. RHI may not be provided in a Nursing Facility (NF), or an Intermediate Care Facility for Individuals with Mental Retardation (ICF/MR). RHI services include daily supports to maintain individual health and safety, and assistance with activities. Services give persons with disabilities an alternative to institutional or other community living settings. The person?s support plan identifies the type, frequency, and amount of support required by the person based on their requirements. Supports can include up to 24 hours of supervision but the actual hours of direct care staff support will be indicated in the person?s budget worksheet. The RHI worksheet contains the authorized rates for each person. RHI is available to those who live alone or with roommates. RHI includes maintenance of a person?s health and safety; and assistance with activities of daily living, such as eating, bathing, and dressing. The following services are included as part of the RHI code and will not be reimbursed separately:

Chore Services (CH1, CH2)
Companion Services (COM)
Homemaker Services (HS1 & HSQ)
Personal Assistance (PAC)
Routine, Non-medical Transportation (DTP)

Persons are excluded from receiving the following services and RHI: (Cannot bill for RHI and the codes listed above and below in bold)

Adult Foster Care (AFC)
Community Service Broker (CSB)
Consumer Preparation (PAP)
Family Training and Preparation Services (TFA)
Family and Individual Training and Preparation Services (TFB)
Host Home Support (HHS)
Professional Parent Supports (PPS)

Residential Habilitation Support (previous Community Living Support) (RHS)
Respite (RP1, RP2, RP3, RP4 &RP5,)
Supported Living (SLA, SLH & SLN)

Family Training and Preparation Services (TFA) and Family and Individual Training and Preparation Services (TFB) may be made available to persons when an exceptional care need exists, after the review and approval of the Regional Director of the DHS/DSPD region where the person is residing.

Limitations:
training. RHI is available only to those persons approved by the region director or other division designee as the most difficult to serve across the region. A Contractor who wish to begin or continue RHI services must submit the DHS/DSPD form titled, RHI Request and Evaluation, to the region director annually by March 31st.

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), as defined in Utah Administrative Code R539-1. [http://rules.utah.gov/publicat/code/r539/r539.htm]

Contractor?s Qualifications:
Contractor must have all applicable licenses or certifications as prescribed in Utah Administrative Code R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits governing the type of service provided.

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor shall be under a DHS/DPSD contract to provide RHI and certified by DHS/DSPD.

Contractor must assure that staff providing services for people receiving RHI services receive some additional training, competency testing, salary, or other benefit above and beyond staff who provide Residential Habilitation Support (RHS). Such training or competency shall be related to best practices for working with a person who exhibits dangerous and/or pervasive maladaptive behaviors.

Contractor shall provide emergency procedures for fire and other disasters that require the development and posting of an evacuation plan for site based services and quarterly training on evacuation procedures and documentation of quarterly evacuation drills.

Contractor shall disclose room and board charges and food stamps or other income not originating with DHS/DSPD.

Contractor shall assure the presence of staff at each licensed site who is responsible for supervision of the day to day operations of the site and for operation of the program.

Administrative Requirements
A. Policies and Procedures: Contractor shall have established policies and procedures, a copy of which shall be maintained and readily accessible at each facility. These policies and procedures shall:
a. Establish the amount of time family or friends may stay as overnight guests
b. Disclose board and room charges and food stamps or other income not originating with DHS/DSPD
c. For residential Contractor, include emergency procedures for fire and other disasters that require the development and posting of an evacuation plan in each residential site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills.
d. Govern the handling, storage, disposal and theft prevention of medication
e. Provide procedures regarding the nutrition of the person.

Staff Qualifications:
Staff shall demonstrate competency in providing RHI services, as determined by the Contractor. In addition, all applicable education, and training shall be completed before performing any work for persons without supervision.

RHI staff shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Contractor?s staff shall pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

RHI staff shall be at least 18 years of age.

Specific Staff Training
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to perform the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental

retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas one through eight within 30 days of employment or before working alone with a person. Staff shall complete and achieve competency in training areas 9 through 12 within six months of employment. Staff competency may be validated through Center for Medicaid Services Waiver service reviews, Utah Department of Health reviews, and DHS/DSPD staff reviews.

1. Medication competency:
   a. Identification of common medications, their effects, purpose and side effects,
   b. Identification of medications and medication side effects specific to the person,
   c. Recording and documentation of self-administration of medications, and
   d.Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.
2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Principles of age appropriate community inclusion and natural support development specific to the person.
7. Preferences and non-negotiable routines specific to the person.
8. Significant functional limitations and disabling conditions specific to the person.
9. Key elements of the Americans with Disabilities Act.
10. Person centered assessment and plan development.
11. How to develop and support the person?s preferred recreation and leisure activities.
12. Basic concepts of good nutrition.

Staff providing services for people receiving RHI services shall receive additional training, competency testing, salary, or other benefit above and beyond staff who provide Residential Habilitation Support (RHS). Such training or competency shall be related to best practices for working with a person who exhibits dangerous and/or pervasive maladaptive behaviors.

RHI staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record (http://rules.utah.gov/publicat/code/r501/r501-14.htm).

RHI staff must be at least 18 years old.

Direct Service Requirements:

A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1.The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). These shall include a Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, and Data Collection and/or Task Analysis sheet for skill training or other support.

2. Once the ISP/AP has been developed, the Contractor must orient the person to that part of the plan that is applicable to the Contractor and ensure the person is involved in its implementation.

3. The Contractor shall develop and implement Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.

4. The Contractor, as a member of the person's team, is required to assist in assessments and meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Psychotropic Medications

1. Psychotropic Medications include any drug prescribed to stabilize or improve mood, mental status, or behavior.

2. For persons on psychotropic medications, the Contractor will complete a specific type of Support Strategy referred to as a Psychotropic Medication Plan that contains the following information:

   a. Identification of the specific medication by it generic or brand name; the date on which the medication was commenced or is to be commenced, and dosage as determined by a qualified medical professional.

   b. Identification of side effects to monitor. When antipsychotic medications are used, monitoring procedures may utilize standardized assessments instruments such as the Abnormal Involuntary Movement Scale (AIMS).

   c. A statement of specific behaviors or symptoms targeted to assess advantages and disadvantages of the prescribed psychotropic medications.

   d. Identification of other support and services that are available and would be useful in the reatment of the targeted behavior or symptom and/or any related illness or condition of the person. Such supports or services may include Behavior Support Plans, psychotherapy or laboratory studies (for example, blood work to check lithium serum, CBC, liver function).

C. Person?s Personal Funds

1. In the event of an emergency situation, a Contractor may write a check to the person or the person may borrow money from the Contractor. The person?s support team must be notified and grant approval of the Contractor?s actions. The Contractor?s staff must document the emergency and the person?s support team approval and maintain this documentation in the person?s record. The Contractor shall have policies and procedures in place to make sure a person does not continuously owe the Contractor money due to emergency situations.

2. A person shall not give cash to or make purchases from the Contractor or Contractor?s staff. A person shall not write checks to the Contractor?s staff. Only in cases of emergency, may a person write a check to repay a loan made by the Contractor. Contractor shall ensure the person has adequate access to personal finances in order to cover anticipated expenditures. The exceptions to persons making payments to the Contractor are as follows: a) reimbursement to the Contractor for destruction of property by the person, if approved by the team, and allowable by contract; and, b) room and board charges.
3. The Contractor?s staff shall not loan or give money to a person. The Contractor shall not loan or give money to a person except in case of an emergency. A person shall not loan or give money to the Contractor?s staff or the Contractor itself.
4. Belongings with a purchase price or value of $50.00 or more shall be inventoried. The inventory shall also include other items of significance to the person, which may cost less than $50.00. The inventory shall be maintained on an ongoing basis and reviewed annually. Discarded items shall be deleted from the inventory list. Documentation of the reason for the deletion of an item shall be maintained and shall require the signature of the person/representative and one Contractor staff or two Contractor staff if the person/representative is not available. Personal possessions shall be released to the person/representative whenever the person moves.

D. Health and Safety Requirements
1. Contractor shall assure that persons receive training, opportunities to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the Person Service Plan, as allowed by the person's Medicaid and insurance plans.
2. Contractor staff shall assure persons receive training and assistance to:
   a. Identify primary health care practitioners;
   b. Obtain dental and physical examinations;
   c. Safely follow physician orders;
   d. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the person's physician; and,
   e. Document the frequency, dosage, and type of medication taken.
3. Person health information including the following:
   a. A record of all medical and /or dental examinations performed, including assessments, treatments, and prescribed medication(s);
   b. A record of all surgeries, immunizations, illnesses, chronic complaints, and significant changes in health;
   c. Authorization for any emergency medical treatment needed;
   d. A record of all medication(s) taken by the person;
   e. A record of all incidents requiring first aid and/or a referral to medical personnel or a health care facility;
   f. A record of all medication errors; and,
   g. A record of all accidents or injuries.
4. Medications shall be properly stored according to the person's needs and capabilities, as determined by the team.
5. Contractor staff shall immediately contact the appropriate medical professional to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, misadministration of medication, medication administered at the wrong time, or failure to follow laboratory survey schedule, etc.
   a. Any medication errors that occur shall be documented in the person's file and reported to the Support Coordinator and Contractor Director or designee.
6. Contractor shall notify the Support Coordinator and person representative within 24 hours of the development of a medical issue for any person, such as illness requiring medical appointments or an emergency room visit. This does not include medical apppointments or check-ups.
7. Any allergies the person has shall be recorded by Contractor staff in the person's medical record and disclosed to the person's primary physician.

E. Health and Nutrition Requirements
1. Persons shall have kitchen privileges with access to food and ingredients. Kitchen privileges may be limited if approved by the Human Rights Committee, in the interest of the person?s health.
2. Contractor staff shall assist persons in planning meals to meet basic nutritional standards, special diets, food preferences, customs, and appetites.

F. Transportation
1. Contractor shall provide routine transportation to shopping and other community activities, based on the Contractor's and team's reasonable, professional judgment.
2. The Contractor shall check driver?s driving record annually and shall assure that drivers with problematic records are not allowed to continue providing transportation as part of this service. Contractor shall check annually that drivers providing transportation in their personal vehicles have current/adequate auto insurance. Contractor shall keep documentation of this review and copies of the driver?s record and auto insurance in the employee?s file.

Drivers make certain that:
1. Persons are not left unattended in the vehicle.
2. Persons use seat belts and remain seated while the vehicle is in motion.
3. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively operating a lift on vehicles that require the keys to be in the ignition to operate the lift.
4. All persons in wheelchairs use seat belts, or locking mechanisms to immobilize wheelchairs during travel.
5. Persons are transported in safety restraint seats when required by Utah State law.

6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving.
7. Persons arrive safely at the scheduled time and arranged destination, that no person is left alone along the way to or from day supports even in emergency situations or when the health and safety of others may be in question. If necessary during an emergency, the driver may wait until another driver arrives to complete the transport.

G. Access to Community Services
1. Contractor shall assist the person in accessing community services and resources, including but not limited to finding housing, applying for food stamps, obtaining Social Security benefits, etc.

Staff Support:
RHI can include 24-hour direct care staff support. Actual type, frequency and duration of direct care staff support, and other community living supports will be defined in the person's ISP/AP based on the person?s selected housing arrangement and assessed needs.

Rate: RHI is paid as a daily rate. RHI can include up to 24-hour direct care staff support. Generally, however, RHI is provided for up to 24-hours a day on holidays and weekends and for 18-hours per day on days when the person is in school,

Service Code: **RHS** ***Creation Date:*** 3/13/2006

Service Name: **Residential Habilitation Supports** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

RHS is a residential service designed to assist a person to gain and/or maintain the skills to live as independently as possible in a community setting by supervising, training and assisting them with activities of daily, such as eating, bathing, and dressing.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Daily	Standard	$369.95

Service Eligibility

Eligibilit	Description
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Residential Habilitation Supports (RHS) is a residential service designed to assist a person to gain and/or maintain skills to live as independently as possible and fully participate in a community setting of their choosing based on the goal for community living contained in the person?s support plan, and to avoid isolation in their homes or communities. RHS provides support, supervision, training and assistance for people to live in licensed and/or certified residential settings. RHS may not be provided in a Nursing Facility (NF), or an Intermediate Care Facility for Individuals with Mental Retardation (ICF/MR). RHS services include daily supports to maintain the person?s health and safety, and assistance with activities. Services give persons with disabilities an alternative to institutional or other community living settings. The person?s support plan identifies the type, frequency, and amount of support required by the person based on their requirements. Supports can include up to 24 hours of supervision, but the actual hours of direct care staff support shall be indicated in the person?s budget worksheet. The RHS worksheet contains the authorized rates for each person. RHS is available to those persons who live alone or with roommates. RHS includes maintenance of a person?s health and safety; and assistance with activities of daily living, such as eating, bathing, and dressing. The following services are included as part of the RHS code and shall not be reimbursed separately:
Chore Services (CH1, CH2)
Companion Services (COM)
Homemaker Services (HS1 & HSQ)
Personal Assistance (PAC)
Routine, Non-medical Transportation (DTP)

Persons are excluded from receiving the following services and RHS: (Cannot bill for RHS and the codes listed above and below in bold)
Adult Foster Care (AFC)
Community Service Broker (CSB)
Consumer Preparation (PAP)
Family Training and Preparation Services (TFA)
Family and Individual Training and Preparation Services (TFB)
Host Home Support (HHS)
Professional Parent Supports (PPS)
Residential Habilitation Intensive Support (previous Community Living Intensive Support) (RHI)
Respite (RP1, RP2, RP3, RP4 & RP5)
Supported Living (SLA, SLH & SLN)

Family Training and Preparation Services (TFA) and Family and Individual Training and Preparation Services (TFB) may be made available to persons when an exceptional care need exists, after the review and approval of the Regional Director of the DHS/DSPD region where the person is residing.

Population Served:
The Contractor shall serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and adults age 18 and older with acquired brain injury, as defined in Utah Administrative Rule R539-1 (http://rules.utah.gov/publicat/code/r539/r539.htm).

Contractor?s Qualifications:
Contractor shall have all applicable licenses or certifications as prescribed in Utah Administrative Rule R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor shall be under a DHS/DPSD contract to provide RHS and shall be certified by DHS/DSPD.

Contractor shall provide emergency procedures for fire and other disasters that require the development and posting of an evacuation plan for site based services and quarterly training on evacuation procedures and documentation of quarterly evacuation drills.

Contractor shall disclose room and board charges and food stamps or other income not originating with DHS/DSPD.

Contractor under license with DHS, Office of Licensing shall assure the presence of at least one (1) staff trained by a certified instructor, in first aid and CPR on duty with persons at all times.

Contractor shall assure the presence of staff at each licensed site that is responsible for supervision of the day-to-day operations of the site and for operation of the program.

Administrative Requirements
Policies and Procedures: Contractor shall have established policies and procedures, a copy of which shall be maintained and readily accessible at each facility. These policies and procedures shall:
a. Establish the amount of time family or friends may stay as overnight guests.
b. Disclose board and room charges and food stamps or other income not originating with DHS/DSPD.
c. For residential providers, include emergency procedures for fire and other disasters that require the development and posting of an evacuation plan in each residential site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills.
d. Govern the handling, storage, disposal and theft prevention of medication.
e. Provide procedures regarding the nutrition of the person.

Staff Qualifications:
Staff shall demonstrate competency in providing RHS services, as determined by the Contractor. In addition, all applicable education, and training shall be completed before performing any work for persons without supervision.

RHS staff shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff shall pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

RHS staff shall be at least 18 years of age.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to perform the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas one (1) through eight (8) within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 12 within six (6) months of employment.

1. Medication competency:
   a. Identification of common medications, their effects, purpose and side effects,
   b. Identification of medications and medication side effects specific to the person,
   c. Recording and documentation of self-administration of medications, and
   d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.
2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.

4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Principles of age appropriate community inclusion and natural support development specific to the person.
7. Preferences and non-negotiable routines specific to the person.
8. Significant functional limitations and disabling conditions specific to the person.
9. Key elements of the Americans with Disabilities Act.
10. Person centered assessment and plan development.
11. How to develop and support the person?s preferred recreational and leisure activities.
12. Contractor and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
    a. Effects of brain injuries on behavior,
    b. Transitioning from hospitals to community support programs including available resources,
    c. Functional impact of brain changing,
    d. Health and medication,
    e. Role of the direct care staff relating to the treatment and rehabilitation process,
    f. Treatment plan and behavioral supports, and
    g. Awareness of the family?s perspective on the brain injury.

RHS staff shall be at least 18 years old.

Direct Service Requirements:

A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). These may include a Behavior Support Plan, Action Plan, Psychotropic Med Plan, Staff Instruction sheet, and data collection and/or Task Analysis sheet for skill training or other support.
2. Once the ISP/AP has been developed, the Contractor shall orient the person to that part of the plan that is applicable to the Contractor and ensure the person is involved in its implementation.
3. The Contractor shall develop and implement Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
4. The Contractor, as a member of the person's team, is required to assist in assessments and meet at least annually (within 12 months of the last Person-Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Psychotropic Medications

1. Psychotropic Medications include any drug prescribed to stabilize or improve mood, mental status, or behavior.
2. For persons on psychotropic medications, the Contractor shall complete a specific type of Support Strategy referred to as a Psychotropic Medication Plan that contains the following information:
    a. Identification of the specific medication by its generic or brand name; the date which the medication was commenced on or is to be commenced, and dosage as determined by a qualified medical professional.
    b. Identification of side effects to monitor. When antipsychotic medications are used, monitoring procedures may utilize standardized assessments instruments such as the Abnormal Involuntary Movement Scale (AIMS).
    c. A statement of specific behaviors or symptoms targeted to assess advantages and disadvantages of the prescribed psychotropic medications.
    d. Identification of other support and services that are available and would be useful in the treatment of the targeted behavior or symptom and/or any related illness or condition of the person. Such supports or services may include Behavior Support Plans, psychotherapy or laboratory studies (for example, blood work to check lithium serum, CBC, liver function).

C. Person?s Personal Funds

1. In the event of an emergency situation, a Contractor may write a check to the person or the person may borrow money from the Contractor. The person?s support team shall be notified and grant approval of the Contractor?s actions. The Contractor?s staff shall document the emergency and the person?s support team approval and maintain this documentation in the person?s record. The Contractor shall have policies and procedures in place to make sure a person does not continuously owe the Contractor money due to emergency situations.
2. A person shall not give cash to or make purchases from the Contractor or Contractor?s staff. A person shall not write checks to the Contractor?s staff. Only in cases of emergency, may a person write a check to repay a loan made by the Contractor. Contractor shall ensure the person has adequate access to personal finances in order to cover anticipated expenditures. The exceptions to persons making payments to the Contractor are as follows: a) reimbursement to the Contractor for destruction of property by the person, if approved by the team, and allowable by contract, and b) room and board charges.
3. The Contractor?s staff shall not loan or give money to a person. The Contractor shall not loan or give money to a person except in case of an emergency. A person shall not loan or give money to the Contractor?s staff or the Contractor itself.
4. Belongings with a purchase price or value of $50.00 or more shall be inventoried. The inventory shall also include other items of significance to the person, which may cost less than $50.00. The inventory shall be maintained on an ongoing basis and reviewed annually. Discarded items shall be deleted from the inventory list. Documentation of the reason for the deletion of an item shall be maintained and shall require the signature of the person/representative and one (1) Contractor staff or two (2) Contractor staff if the person/representative is not available. Personal possessions shall be released to the

person/representative whenever the person moves.

D. Health and Safety Requirements
1. Contractor shall assure that persons receive training, opportunities to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the Person Service Plan, as allowed by the person's Medicaid and insurance plans.
2. Contractor staff shall assure persons receive training and assistance to:
   a. Identify primary health care practitioners; and
   b. Obtain dental and physical examinations;
   c. Safely follow physician orders;
   e. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the person's physician; and,
   d. Document the frequency, dosage, and type of medication taken.

3. Person health information including the following:
   a . A record of all medical and /or dental examinations performed, including assessments, treatments, and prescribed medication(s),
   b. A record of all surgeries, immunizations, illnesses, chronic complaints, and significant changes in health,
   c. Authorization for any emergency medical treatment needed,
   d. A record of all medication(s) taken by the person,
   e. A record of all incidents requiring first aid and/or a referral to medical personnel or a health care facility,
   f. A record of all medication errors,
   g. A record of all accidents or injuries,

4. Medications shall be properly stored according to the person's needs and capabilities, as determined by the Team.
5. Contractor?s staff shall immediately contact the appropriate medical professional to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, misadministration of medication, medication administered at the wrong time, or failure to follow laboratory survey schedule, etc.
   a. Any medication errors that occur shall be documented in the person's file and reported to the Support Coordinator and Contractor Director or designee.

6. Contractor shall notify the Support Coordinator and person representative within 24 hours of the development of a medical issue for any person, such as illness requiring medical appointments or an emergency room visit. This does not include medical appointments for general health check-ups.

7. Any allergies the person has shall be recorded by Contractor staff in the person's medical record and disclosed to the person's primary physician.

E. Health and Nutrition Requirements
1. Persons shall have kitchen privileges with access to food and ingredients. Kitchen privileges may be limited if approved by the Human Rights Committee, in the interest of the person?s health.
2. Contractor staff shall assist persons in planning meals to meet basic nutritional standards, special diets, food preferences, customs, and appetites.

F. Transportation
Contractor shall provide routine transportation to shopping and other community activities, based on the Contractor's and team's reasonable, professional judgment.

The Contractor shall check driver?s driving record annually and shall assure that drivers with problematic records are not allowed to continue providing transportation as part of this service. Contractor shall check annually that drivers providing transportation in their personal vehicles have current/adequate auto insurance. Contractor shall keep documentation of this review and copies of the driver?s record and auto insurance in the employee?s file.

Drivers make certain that:
1. Persons are not left unattended in the vehicle.
2. Persons use seat belts and remain seated while the vehicle is in motion.
3. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively operating a lift on vehicles that require the keys to be in the ignition to operate the lift.
4. All persons in wheelchairs use seat belts, or locking mechanisms to immobilize wheelchairs during travel.
5. Persons are transported in safety restraint seats when required by Utah State law.
6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving.
7. Persons arrive safely at the scheduled time and arranged destination, that no person is left alone along the way to or from day supports even in emergency situations or when the health and safety of others may be in question. If necessary during an emergency, the driver may wait until another driver arrives to complete the transport.

G. Access to Community Services
1. Contractor shall assist the person in accessing community services and resources, including but not limited to finding housing, applying for food stamps, obtaining Social Security benefits, etc.

Staff Support:
RHS can include 24-hour direct care staff support. Actual type, frequency and duration of direct care staff support, and other community living supports shall be defined in the person's ISP/AP based on the person?s selected housing arrangement and assessed needs.

Rate:
RHS is paid as a daily rate. RHS can include up to 24-hour direct care staff support. Generally, however, RHS is provided for up to 24-hours a day on holidays and weekends and for 18-hours per day on days when the person is in school, at work

Service Code: **RP1**

Service Name: **Routine Respite - Family Managed - Self Administered Services**

Creation Date: 1/26/2001

Obsolete Date:

Contract Type: No contract allowed for this service

DSPD

Residential: No

Description:
RP1 provides relief to, or during the absence of, the person?s normal caregiver.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$2.61
Daily	Standard	$61.70

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description: Routine Respite Family Managed (RP1) provides hourly and daily one-on-one and group routine respite care to give relief to, or during the absence of, the normal caregiver. RP1 does not include payment for room and board and is provided in the person's residence or other approved residential setting. This service may be provided in a facility-based program approved by DHS/DSPD or in the private residence of the RP1 provider, provided that it is rendered for a period of less than 6 hours per day.

Limitations: The provision of RP1 in terms of duration and location will be based on the annual amount allocated by the DHS/DSPD?s Region to the person/family and the person/family?s preference. This code does not include payments for room and board.

In no case will more than four persons in home settings be served by the Employee at any time, including the provider?s own minor children under the age of 14 in the case of services rendered in a provider?s home for less than 6 hours per day. If this service is rendered in a facility based setting for less than 6 hours per day, no more than 6 persons per staff member shall be served at any one time.

Routine Respite-Family Managed services are available only to those persons participating in the Self-Administered Services method.

Population Served: The Employee will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and acquired brain injury, as defined in Utah Administrative Rule R539-1. http://rules.utah.gov/publicat/code/r539/r539.htm

Employee?s Qualifications: Employee must have all applicable licenses as prescribed in Utah Administrative Rule R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. Non-licensed Employees must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Section 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

Employee must be enrolled as an approved Medicaid Provider with the Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Employee. Employees must also agree to participate in any DHS/DSPD provided Medicaid training.

Staff Qualifications: All staff must demonstrate competency (in the services covered by the contract), as determined by the Employer, in addition all applicable education, and training must be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Employer must ensure that Respite staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a BCI background check through the Department of Human Services, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff rendering services under this code must be at least 16 years of age.

Specific Training Requirements: All direct care and direct care supervisory staff shall receive specific staff training that prepares them to complete the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Competency for RP1 staff may include knowing where to find information or who to contact in case of a question or unusual event.

1. Medication competency:
   a. Identification of medications and medication side effects specific to the person, and
   b. Recording and documentation of self-administration of medications.
2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Preferences and non-negotiable routines specific to the person.
7. Significant functional limitations and disabling conditions specific to the person.
8. Employees and Employee?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
   a. Effects of brain injuries on behavior,
   b. Transitioning from hospitals to community support programs including available resources,
   c. Functional impact of brain changing,
   d. Health and medication ,
   e. Role of the direct care staff relating to the treatment and rehabilitation process,
   f. Treatment plan and behavioral supports, and
   g. Awareness of the Family?s perspective on the brain injury.

Direct Service Requirements:

A. Person-Centered Planning: Employee shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Employee is responsible for implementing the applicable portion of the ISP?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.
2. Once the ISP/AP has been developed, the Employee must orient the person to the portion of the plan that pertains to the Employee and ensure the person is involved in its implementation.
3. Employer shall submit Monthly Summaries to DHS/DSPD.
4. When RP1 services are delivered to a person on a continuing basis, the Employee, as a member of the person's Team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

Staff Support: Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person?s assessed needs. Employee shall serve no more than four persons per staff at any time for services rendered within the person?s home or other approved residential setting. For services rendered within a provider?s home for periods of less than six hours per day Employee shall serve no more than four persons at any one time including the provider?s own minor children under the age of 14. If services are rendered in a facility-based setting for periods of less than 6 hours, then the Employee shall serve no more than 6 persons per staff member at any one time..

Rate: RP1 includes a daily and hourly rate. RP1 does not include payment for room and board. RP1 does not include payment for exceptional needs care. RP1 day rate equals six hours or more of respite services. Services rendered in a facility based setting or in the private residence of the RP1 Employee for a period of 6 hours or more (including overnight services) should be billed using the Routine Respite with Room and Board included-family managed (RP6) service code.

For overnight stays in the person?s residence or approved residential setting, a Employee may bill for the day the Employee came and not the day the Employee left if the Employee is there less than 6 hours. The person must have a full six hours stay to qualify for a daily rate, i.e. five hours = quarter hour rate, six hours or more = daily rate, 24 hours

overnight = one daily rate, 25 hours = one daily rate and four quarter hours, 30 hours = two days of daily rate.

Personal belongings (clothing, personal hygiene products) and medicine must be provided for and accompany the person and the Employee is not responsible to provide these accommodations.

Service Code: **RP2** ***Creation Date:*** 1/26/2001

Service Name: **Provider Facility Based Routine Respite without Room and Board** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:
RP2 provides relief to, or during the absence of, the person?s normal caregiver.

USSDS Rates as of 12/23/2008

Unit	*Rate Type*	*Rate*
Quarter hour	Standard	$2.87
Daily	Standard	$68.97

Service Eligibility

Eligibilit	*Description*
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Routine Respite without room and board (RP2) provides hourly and daily one-on-one and group routine respite care to give relief to, or during the absence of, the normal caregiver. RP2 does not include payment for room and board and is provided in the person's residence or other approved residential setting. This service may be provided in a facility-based program approved by DHS/DSPD or in the private residence of the RP2 provider, provided that it is rendered for a period of less than 6 hours per day.

Limitations:
The provision of RP2 in terms of duration and location will be based on the annual amount allocated by the DHS/DSPD?s Region to the person/family and the person/family?s preference. This code does not include payments for room and board.

In no case will more than four persons in home settings be served by the Contractor at any time, including the provider?s own minor children under the age of 14 in the case of services rendered in a provider?s home for less than 6 hours per day. If this service is rendered in a facility based setting for less than 6 hours per day, no more than 6 persons per staff member shall be served at any one time.

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and acquired brain injury (ABI), as defined in Utah Administrative Code R539-1.
http://rules.utah.gov/publicat/code/r539/r539.htm

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501
http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed contractor must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103.
http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the

Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

Staff Qualifications:
All staff must demonstrate competency (in the services covered by the contract), as determined by the Contractor. In addition, all applicable education and training must be completed before the delivery of any supports to persons and before performing any work for persons without supervision.

The Contractor must ensure that Respite staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff rendering services under this code must be at least 18 years of age.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to perform the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Competency for RP2 staff may include knowing where to find information or who to contact in case of a question or unusual event.

1. Medication competency:
   a. Identification of medications and medication side effects specific to the person; and,
   b. Recording and documentation of self-administration of medications.
2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Preferences and non-negotiable routines specific to the person.
7. Significant functional limitations and disabling conditions specific to the person.
8. Contractor and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
   a. Effects of brain injuries on behavior;
   b. Transitioning from hospitals to community support programs including available resources;
   c. Functional impact of brain changing
   d. Health and medication;
   e. Role of the direct care staff relating to the treatment and rehabilitation process;
   f. Treatment plan and behavioral supports; and,
   g. Awareness of the Family?s perspective on the brain injury.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.
1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.
2. Once the ISP/AP has been developed, the Contractor must orient the person to the portion of the plan that pertains to the Contractor and ensure the person is involved in its implementation.
3. Contractor shall submit Monthly Summaries to DHS/DSPD.
4. When RP2 services are delivered to a person on a continuing basis, the Contractor, as a member of the person's Team, is required to meet at least annually (within 12 months of the last Person-Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

Staff Support:
Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person?s assessed needs. Contractor shall serve no more than four persons per staff at any time for services rendered within the person?s home or other approved residential setting. For services rendered within a provider?s home for periods of less than six hours per day, Contractor shall serve no more than four persons at any one time including the provider?s own minor children under the age of 14. If services are rendered in a facility-based setting for periods of less than 6 hours, then the Contractor shall serve no more than 6 persons per staff member at any one time.

Rate:
RP2 includes a daily and hourly rate. RP2 does not include payment for room and board. RP2 does not include payment for exceptional needs care. RP2 day rate equals six hours or more of respite services. Services rendered in a facility

based setting or in the private residence of the RP2 contractor for a period of 6 hours or more (including overnight services) should be billed using the Routine Respite with Room and Board included (RP4) service code.

For overnight stays in the person?s residence or approved residential setting, a Contractor may bill for the day the Contractor came and not the day the Contractor left if the Contractor is there less than 6 hours. The person must have a full six hours stay to qualify for a daily rate, i.e. five hours = quarter hour rate, six hours or more = daily rate, 24 hours overnight = one daily rate, 25 hours = one daily rate and four quarter hours, 30 hours = two days of daily rate.

Personal belongings (clothing, personal hygiene products) and medicine must be provided for and accompany the person

Service Code: **RP3** ***Creation Date:*** 1/26/2001

Service Name: **Exceptional Care Respite without Room and Board** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:
RP3 provides respite to, or during the absence of, the person?s normal caregiver when they have exceptional medical or behavioral needs.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$3.56
Daily	Standard	$85.62

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Exceptional Care Respite without room and board (RP3) provides respite for persons with exceptional medical or behavioral needs. Exceptional Care Respite without room and board provides one-on-one and group hourly, and daily care to give relief to, or during the absence of, the normal caregiver. RP3 provides services for persons who may require specialized equipment. Services may be provided in the person's residence or approved residential setting. Additionally, services provided under this service description may be rendered in a facility-based program approved by DHS/DSPD or in the private residence of the RP3 provider, provided that services are rendered for periods of less than six hours per day. However, services provided under this service description shall, in no case, include payment for room or board regardless of where the service is rendered.

Services are available through Provider-based services.

Limitations:
The provision of RP3 in terms of duration and location will be based on the annual amount allocated by the DHS/DSPD?s Region to the person/family and the person/family?s preference. This code does not include payments for room and board.

In no case will more than four persons in home settings be served by the Contractor at any time, including the provider?s own minor children under the age of 14 in the case of services rendered in a provider?s home for less than 6 hours per day. If this service is rendered in a facility based setting for less than 6 hours per day, no more than 6 persons per staff member shall be served at any one time.

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and acquired brain injury (ABI), as defined in Utah Administrative Code R539-1.
http://rules.utah.gov/publicat/code/r539/r539.htm

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501
http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and

comply with insurance requirements and any local ordinances or permits. A non-licensed contractor must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

Staff Qualifications:
All staff must demonstrate competency (in the services covered by the contract), as determined by the Contractor. In addition, all applicable education and training must be completed before the delivery of any supports to persons and before performing any work for persons without supervision.

The Contractor must ensure that Respite staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff rendering services under this service description shall be at least 18 years of age.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to perform the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Competency for RP3 staff may include knowing where to find information or who to contact in case of a question or unusual event.

1. Medication competency
   a. Identification of medications and medication side effects specific to the person; and,
   b. Recording and documentation of self-administration of medications
2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Preferences and non-negotiable routines specific to the person.
7. Significant functional limitations and disabling conditions specific to the person.
8. Contractor and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
   a. Effects of brain injuries on behavior;
   b. Transitioning from hospitals to community support programs including available resources;
   c. Functional impact of brain changing;
   d. Health and medication;
   e. Role of the direct care staff relating to the treatment and rehabilitation process;
   f. Treatment plan and behavioral supports; and,
   g. -Awareness of the family?s perspective on the brain injury.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.
1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.
2. Once the ISP/AP has been developed, the Contractor must orient the person to the portion of the plan that pertains to the Contractor and ensure the person is involved in its implementation.
3. Contractor shall submit Monthly Summaries to DHS/DSPD.
4. When RP3 services are delivered to a person on a continuing basis, the Contractor, as a member of the person's team, is required to meet at least annually (within 12 months of the last Person-Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.
1. The Contractor is responsible for implementing the applicable portion of the ISP/AP. The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan,

Staff Instruction sheet, data collection and/or Task Analysis sheet.

2. Once the ISP/AP has been developed, the Contractor must orient the person to the portion of the plan that pertains to the contractor and ensure that the person is involved in its implementation.

3. The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.

4. The Contractor, as a member of the person's team, is required to meet at least annually (within 12 months of the last Person-Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Certain medical services are limited as to the Contractor?s skill level and professional licensure. The specialized respite Contractor will be trained in DHS/DSPD approved behavior management techniques and crisis management services.

Staff Support:
Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person?s assessed needs. Contractor shall serve no more than four persons per staff at any time for services rendered within the person?s home or other approved residential setting. For services rendered within a provider?s home for periods of less than six hours per day Contractor shall serve no more than four persons at any one time including the provider?s own minor children under the age of 14. If services are rendered in a facility-based setting for periods of less than 6 hours, then the Contractor shall serve no more than 6 persons per staff member at any one time.

Rate:
RP3 does not include payment for room and board charges. RP3 includes payment for exceptional care needs. RP3 includes an hourly and daily rate. RP3 day rate is equal to six hours or more of respite services rendered in the person?s home. Services rendered in a facility based setting or in the private residence of the RP3 contractor for a period of 6 hours or more (including overnight services) should be billed using the Exceptional Care Respite with Room and Board included (RP5) service code.

For overnight stays in the person?s residence or approved residential setting, a Contractor may bill for the day the Contractor came and not the day the Contractor left if the Contractor is there less than 6 hours. The Contractor must have a full six hours stay to qualify for a daily rate, i.e. five hours = quarter hour rate, six hours or more = daily rate, 24 hours overnight = one daily rate, 25 hours = one daily rate and four quarter hours, 30 hours = two days of daily rate.

Service Code: **RP4** ***Creation Date:*** 3/ 8/2006

Service Name: **Routine Respite with Room and Board Included** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:
RP4 provides daily and overnight care to give relief to, or during the absence of, the person?s normal caregiver.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Daily	Standard	$77.41

Service Eligibility

Eligibilit	Description
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description: Routine Respite with Room and Board included (RP4) provides one-on-one and group daily and overnight care to give relief to, or during the absence of, the normal caregiver. RP4 is always provided in a facility-based program approved by DHS/DSPD or in the private residence of the RP4 provider and is never provided in the consumer?s home. RP4 includes payment for room and board. Services are available through Provider-based services.

Limitations:
The provision of RP4 in terms of duration and location will be based on the annual amount allocated by the DHS/DSPD?s Region to the person/family and the person/family?s preference. This code does include payments for room and board when provided as part of respite care in a facility approved by the State that is not the person?s private residence, though it is generally used to provide services in the home or private residence of the provider.

In no case will more than four persons be served in a provider?s home setting including the provider?s own minor children under the age of 14; nor will more than six persons per staff member be served in facility-based settings.

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and acquired brain injury, as defined in Utah Administrative Code R539-1. http://rules.utah.gov/publicat/code/r539/r539.htm

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed contractor must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

Staff Qualifications:
All staff must demonstrate competency (in the services covered by the contract), as determined by the Contractor. In addition, all applicable education and training must be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Contractor must ensure that the Respite staff are trained in the Staff Training Requirements as outlined in applicable

General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff rendering services under this service description shall be at least 18 years of age.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to perform the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Competency for RP4 staff may include knowing where to find information or who to contact in case of a question or unusual event.

1. Medication competency:
a.Identification of medications and medication side effects specific to the person; and,
b.Recording and documentation of self-administration of medications

2.Recognition of illness or symptoms of health deterioration specific to the person.

3.Dietary issues specific to the person.

4.Critical health care issues specific to the person.

5.Swallowing and eating difficulties specific to the person.

6.Preferences and non-negotiable routines specific to the person.

7.Significant functional limitations and disabling conditions specific to the person.

8.Contractor and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
a.Effects of brain injuries on behavior;
b.Transitioning from hospitals to community support programs including available resources;
c.Functional impact of brain changing;
d.Health and medication;
e.Role of the direct care staff relating to the treatment and rehabilitation process;
f.Treatment plan and behavioral supports; and,
g.Awareness of the family?s perspective on the brain injury.

Direct Service Requirements:
A.Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1.The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction Sheet, Data Collection and/or Task Analysis sheet.

2.Once the ISP/AP has been developed, the Contractor must orient the person to the portion of the plan that pertains to the Contractor and ensure the person is involved in its implementation.

3.Contractor shall submit Monthly Summaries to DHS/DSPD.

4.If RP4 services are rendered on a continuing basis to the person, the Contractor, as a member of the person's team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

Staff Support:
Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person?s assessed needs. Contractor providing this service within providers? homes shall serve no more than four persons per staff at any one time including the provider?s own minor children under the age of 14. Services provided in a facility based setting shall serve no more than 6 persons per staff member at any one time.

Rate:
RP4 includes payment for room and board charges. RP4 includes payment for routine respite services. RP4 does not

include payment for exceptional care needs. RP4 includes daily rate only.

RP4 day rate is equal to six hours or more of respite services. For overnight stays, a Contractor may bill for the day the person came and not the day the person left if the person is there less than 6 hours. The person must have a full six hours stay to qualify for a daily rate.

Personal belongings (clothing, personal hygiene products) and medicine must be provided for and accompany the person and the Contractor is not responsible to provide these accommodations.

Service Code: **RP5** ***Creation Date:*** 3/ 8/2006

Service Name: **Exceptional Care Respite with Room and Board included** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

RP5 provides overnight care to give relief to, or during the absence of, the person?s normal caregiver when they have exception medical and/or behavioral needs.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Daily	Standard	$94.06

Service Eligibility

Eligibilit	Description
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

Exceptional Care Respite with Room and Board included for persons with exceptional medical or behavioral needs (RP5) provides one-on-one and group daily and overnight care to give relief to, or during the absence of, the normal caregiver. RP5 is usually provided in a facility-based program approved by DHS/DSPD but may be provided in the private residence of the RP5 provider and is never provided in the person?s home. RP5 includes payment for room and board. RP5 provides services for persons with exceptional medical or behavioral care needs, or who may require specialized equipment.

Services are available through Provider-Based Services.

The provision of RP5 in terms of duration and location will be based on the annual amount allocated by the DHS/DSPD?s Region to the person/family and the person/family?s preference. This code does include payments for room and board when provided as part of respite care in a facility approved by the State that is not the person?s private residence.

In no case will more than four persons be served in a provider?s home setting including the provider?s own minor children under the age of 14; nor will more than six persons per staff member be served in facility-based settings.

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and acquired brain injury (ABI), as defined in Utah Administrative Code R539-1.
http://rules.utah.gov/publicat/code/r539/r539.htm

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits governing the type of service provided.

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

Staff Qualifications:
All staff must demonstrate competency (in the services covered by the contract), as determined by the Contractor, in addition all applicable education, and training must be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Contractor must ensure that Respite staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to perform the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in
providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Competency for RP4 staff may include
knowing where to find information or who to contact in case of a question or unusual event.

1. Medication competency:
a. Identification of medications and medication side effects specific to the person, and
b. Recording and documentation of self-administration of medications,

2. Recognition of illness or symptoms of health deterioration specific to the person.

3. Dietary issues specific to the person.

4. Critical health care issues specific to the person.

5. Swallowing and eating difficulties specific to the person.

6. Preferences and non-negotiable routines specific to the person.

7. Significant functional limitations and disabling conditions specific to the person.

8. Contractor and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
a. Effects of brain injuries on behavior,
b. Transitioning from hospitals to community support programs including available resources,
c.Functional impact of brain changing,
d. Health and medication,
e. Role of the direct care staff relating to the treatment and rehabilitation process,
f. Treatment plan and behavioral supports, and
g. Awareness of the Family?s perspective on the brain injury.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.

2. Once the ISP/AP has been developed, the Contractor must orient the person to the portion of the plan that pertains to the Contractor and ensure the person is involved in its implementation.

3. The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.

4. The Contractor, as a member of the person's Team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Certain medical services are limited as to the Contractor?s skill level and professional licensure. The specialized respite Contractor will be trained in DHS/DSPD approved behavior management techniques and crisis management services.

Staff Support:
RP5 staff shall have expertise in provision of care to persons with exceptional medical and/or behavior issues. Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person?s assessed needs. Contractor shall serve no more than four persons at any one time including the provider?s own minor children under the age of 14, in the case of services provided in the provider?s home setting, Services provided in a facility based setting shall serve no more than 6 persons per staff member at any one time.

Rate:

RP5

RP5 includes payment for room and board charges. RP5 includes payment for exceptional care needs. RP5 includes a daily rate only.

RP5 day rate is for 6 hours or more of respite services. For overnight stays, a Contractor may bill for the day the person came and not the day the person left if the person is there less than 6 hours. The person must have a full 6 hours stay to qualify for a daily rate.

Personal belongings (clothing, personal hygiene products) and medicine must be provided for and accompany the person

Service Code: **RP6** ***Creation Date:*** 3/27/2006

Service Name: **Routine Respite with Room and Board - Family Managed** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:
RP6 provides daily and overnight care to give relief to, or during the absence of, the person?s normal caregiver.

USSDS Rates as of 12/23/2008

Unit	*Rate Type*	*Rate*
Daily	Standard	$70.65

Service Eligibility

Eligibilit	*Description*
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description: Routine Respite with Room and Board included - Family managed (RP6) provides one-on-one and group daily and overnight care to give relief to, or during the absence of, the normal caregiver. RP6 is always provided in a facility-based program approved by DHS/DSPD or in the private residence of the RP6 provider, and is never provided in the consumer?s home. RP6 includes payment for room and board.

Services are available through Provider-Based Services.

Limitations: The provision of RP6 in terms of duration and location will be based on the annual amount allocated by the DHS/DSPD?s Region to the person/family and the person/family?s preference. This code does include payments for room and board when provided as part of respite care in a facility approved by the State that is not the person?s private residence, though it is generally used to provide services in the home or private residence of the provider.

In no case will more than four persons be served in a provider?s home setting including the provider?s own minor children under the age of 14; nor will more than six persons per staff member be served in facility-based settings.

Routine Respite with Room and Board included ?Family managed (RP6) services are available to those persons participating in the Self-Administered Services method, only.

Population Served:
The Employee will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and acquired brain injury, as defined in Utah Administrative Rule R539-1. http://rules.utah.gov/publicat/code/r539/r539.htm

Employee?s Qualifications:
Employee must have all applicable licenses as prescribed in Utah Administrative Rule R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. Non-licensed Employees must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Section 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

Employee must be enrolled as an approved Medicaid Provider with the Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Employee. Employees must also agree to participate in any DHS/DSPD provided Medicaid training.

Staff Qualifications:
All staff must demonstrate competency (in the services covered by the contract), as determined by the Employer, in addition all applicable education, and training must be completed before the delivery of any supports to persons and

performing any work for persons without supervision.

The Employer must ensure that the Respite staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a BCI background check through the Department of Human Services, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff rendering services under this service description shall be at least 16 years of age.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to complete the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Competency for RP6 staff may include knowing where to find information or who to contact in case of a question or unusual event.

1. Medication competency:
a. Identification of medications and medication side effects specific to the person, and
b. Recording and documentation of self-administration of medications

2. Recognition of illness or symptoms of health deterioration specific to the person.

3. Dietary issues specific to the person.

4. Critical health care issues specific to the person.

5. Swallowing and eating difficulties specific to the person.

6. Preferences and non-negotiable routines specific to the person.

7. Significant functional limitations and disabling conditions specific to the person.

8. Employees and Employee?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
a. Effects of brain injuries on behavior,
b. Transitioning from hospitals to community support programs including available resources,
c. Functional impact of brain changing,
d. Health and medication,
e. Role of the direct care staff relating to the treatment and rehabilitation process,
f. Treatment plan and behavioral supports, and
g. Awareness of the Family?s perspective on the brain injury.

Direct Service Requirements:
A. Person-Centered Planning: Employee shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Employee is responsible for implementing the applicable portion of the ISP?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.

2. Once the ISP/AP has been developed, the Employee must orient the person to the portion of the plan that pertains to the Employee and ensure the person is involved in its implementation.

3. Employer shall submit Monthly Summaries to DHS/DSPD.

4. If RP6 services are rendered on a continuing basis to the person, the Employee, as a member of the person's Team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

Staff Support:
Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person?s assessed needs. Employee providing this service within providers? homes shall serve no more than four persons per staff at any one time including the provider?s own minor children under the age of 14. Services provided in a facility based setting shall serve no more than 6 persons per staff member at any one time.

RP6

Rate:
RP6 includes payment for room and board charges. RP6 includes payment for routine respite services. RP6 does not include payment for exceptional care needs. RP6 includes daily rate only.

RP6 day rate is equal to six hours or more of respite services. For overnight stays, a Employee may bill for the day the person came and not the day the person left if the person is there less than 6 hours. The person must have a full six hours stay to qualify for a daily rate.
Personal belongings (clothing, personal hygiene products) and medicine must be provided for and accompany the person and the Employee is not responsible to provide these accommodations.

Service Code: RP7 **Creation Date:** 12/ 8/2006

Service Name: Routine Respite - Family Managed Group **Obsolete Date:**

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:
RP7 provides respite care for up to three individuals to give relief to, or during the absence of, the person?s normal caregiver.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$1.74
Daily	Standard	$42.05

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

Routine Respite - Family Managed-Group: provides a quarter hour and daily group respite care to up to three individuals to give relief to, or during the absence of, the normal caregiver. This service is only offered to Self-Administered Service clients.RP7 does not include payment for exceptional needs care. RP7 does not include payment for room and board. The RP7 service is only available as a Self-Administered Service.

Population Served: RP7 is for people who have mental retardation and related conditions (MR.RC), and adults age 18 and older with acquired brain injury (ABI), as defined in Utah Administrative Code, Rule R539-1 (http://rules.utah.gov/publicat/code/r539/r539.htm).

Limitations: The provision of RP7 in terms of duration and location will be based on the annual amount allocated by the DHS/DSPD?s Region to the person or the person's family and pursuant to the person's or the person's family?s preference. The Employee will serve up to three persons at a time.

Employee Qualifications: Non-licensed Employees must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Section 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm RP7 Employees shall demonstrate competency in providing RP7 services, as determined by the Employer, in addition, all applicable education, and training shall be completed before performing any work for persons without supervision. RP7 Employees shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and Contract and service specific training areas. RP7 Employees shall pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the employee's record. http://rules.utah.gov/publicat/code/r501/r501-14.htm. RP7 employees shall be at least 16 years of age. However, employees providing transportation or those providing respite services during over-night hours, or during hours characteristically occupied by sleep shall be at least 18 years of age.

Specific Training Requirements: RP7 Employees shall receive training from the Employer that prepares them to complete the critical job functions for this service and orients them to the person being supported by this service. Employees shall complete and achieve competency in specific training areas one through eight within 30 days of employment or before working unsupervised with a person and nine through ten within six months of employment.
1. Medication competency:
   a. Identification of common medications, their effects, purpose and side effects,
   b. Identification of medications and medication side effects specific to the person,

c. Recording and documentation of self-administration of medications, and
d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.
2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Principles of age appropriate community inclusion and natural support development specific to the person.
7. Preferences and non-negotiable routines specific to the person.
8. Significant functional limitations and disabling conditions specific to the person.
9. How to develop and support the person?s preferred recreational and leisure activities.
10. Employees providing this service to persons with ABI shall demonstrate competence or awareness in the following areas:
a. Effects of brain injuries on behavior,
b.Transitioning from hospitals to community support programs including available resources,
c. Functional impact of brain changing,
d. Health and medication,
e. Role of the direct care staff relating to the treatment and rehabilitation process,
f. Treatment plan and behavioral supports, and
g. Awareness of the Family?s perspective on the brain Injury.

Direct Service Requirements: Plan and Service Implementation. The Employer shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services. The Employer implements the Individual Support Plan Action Plan (ISP/AP) and submits Monthly Summaries to DHS/DSPD.
As a member of the person's Team, the Employer is required to meet once a year to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs.

Person's Funds: The Employee shall not loan or give money to a person they support. A person shall not loan or give money to an Employee.

Health and Safety Requirements: Employees shall immediately contact the Employer to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, misadministration of medication, medication administered at the wrong time, or failure to follow laboratory survey schedule, and shall document the error on an incident report. The person shall have kitchen privileges and shall have access to food and ingredients. Employees assist persons in planning meals to meet basic nutritional standards, special diets, food preferences, customs, and appetites so the person may lead self-determined lives.

Transportation: IF RP7 Employees provide transportation, they must make certain that:
1. The person is not left unattended in the vehicle;
2. The person uses a seat belt and remains seated while the vehicle is in motion;
3. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively operating a lift on vehicles that require the keys to be in the ignition to operate the lift;
4. Any person in a wheelchair uses a seat belt, or locking mechanism to immobilize the wheelchair during travel;
5. The persons is transported in a safety restraint seat when required by Utah State law;
6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving; and,
7. The person arrives safely at the scheduled time and arranged destination and that no one is left alone along the way to or from supports even in emergency situations.

Rate: RP7 includes a quarter hour and daily rate, and is provided based on a ratio of one employee to groups of up to three individuals. The rate reflects the amount paid to the Employee for each person served in the group. RP7 does not include payment for room and board. RP7 does not include payment for exceptional needs care. RP7 day rate equals six hours or more of respite services. For overnight stays in the person?s residence or an approved residential setting, a Employee may bill for the day the Employee came and not the day the Employee left if the Employee is there less than 6 hours on the day that they left. Hours less than six on the day of departure shall be billed using the quarter hour rate. The person must have a full six hours stay to qualify for a daily rate, i.e. five hours = quarter hour rate, six hours or more = daily rate, 24 hours overnight = one daily rate, 25 hours = one daily rate and four quarter hours, 30 hours = two days of daily rate. Services rendered in the private residence of the RP7 Employee for a period of 6 hours or more (including

Service Code: **RP8** ***Creation Date:*** 12/ 8/2006

Service Name: **Routine Respite with Room and Board - Family Managed Group** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:
RP8 provides routine respite care for up to three individuals as well as overnight care for the group in order to give relief to, or during the absence of, the person?s normal caregiver.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$1.97
Daily	Standard	$47.34

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description: (07/09/2007) Routine Respite with Room and Board included-Family managed Group (RP8) provides routine respite services to groups of up to three persons and overnight care of these groups in order to give relief to, or during the absence of, the normal caregiver. RP8 is always provided in the private residence of the RP8 provider, and is never provided in the consumer?s home. RP8 provides for a daily and quarter hour rate and includes payment for room and board.

Limitations: The provision of RP8 in terms of duration and location will be based on the annual amount allocated by the DHS/DSPD?s Region to the person/family and the person/family?s preference. This code includes payment for room and board when provided as part of respite care in a setting approved by the State that is not the person?s private residence, though it is generally used to provide services in the home or private residence of the provider.

Routine Respite with Room and Board included Family managed-Group (RP8) services are available to those persons participating in the Self-Administered Services method, only.

Population Served:
The Employee will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and acquired brain injury, as defined in Utah Administrative Rule R539-1. http://rules.utah.gov/publicat/code/r539/r539.htm

Employer?s Qualifications:
Non-licensed Employers must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Section 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

Employee?s Qualifications
Employees must demonstrate competency (in the services covered by the contract), as determined by the Employer, in addition all applicable education, and training must be completed before performing any work for persons without supervision.

RP8 Employees shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home

and Community Based Waiver, rule, statute, and contract and service specific training areas.

RP8 Employees must pass a BCI background check through the Department of Human Services, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

RP8 Employees rendering services under this service description shall be at least 16 years of age. However, employees providing transportation or those providing respite services during over-night hours, or during hours characteristically occupied by sleep shall be at least 18 years of age.

Specific Training Requirements
Employees shall receive specific training that prepares them to complete the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Employees shall complete and achieve competency in specific training areas 1 through 10 within 30 days of employment or before working unsupervised with a person. Competency for RP8 staff shall include knowing where to find information or who to contact in case of a question or unusual event.

1. Medication competency:
a. Identification of common medications, their effects, purpose and side effects,
b. Identification of medications and medication side effects specific to the person,
c. Recording and documentation of self-administration of medications, and
d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.

2. Recognition of illness or symptoms of health deterioration specific to the person.

3. Dietary issues specific to the person.

4. Critical health care issues specific to the person.

5. Swallowing and eating difficulties specific to the person.

6. Principles of age appropriate community inclusion and natural support development specific to the person.

7. Preferences and non-negotiable routines specific to the person.

8. Significant functional limitations and disabling conditions specific to the person.

9. How to develop and support the person?s preferred recreational and leisure activities.

10. Employees and Employees staff providing ABI services shall demonstrate competence or awareness in the following areas:
a. Effects of brain injuries on behavior,
b. Transitioning from hospitals to community support programs including available resources,
c. Functional impact of brain changing,
d. Health and medication,
e. Role of the direct care staff relating to the treatment and rehabilitation process,
f. Treatment plan and behavioral supports, and
g. Awareness of the Family?s perspective on the brain injury.

Direct Service Requirements:
A. Person-Centered Planning: Employees shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Employee is responsible for implementing the applicable portion of the ISP?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.

2. Once the ISP/AP has been developed, the Employee must orient the person to the portion of the plan that pertains to the Employee and ensure the person is involved in its implementation.

3. Employer shall submit Monthly Summaries to DHS/DSPD.

4. If RP8 services are rendered on a continuing basis to the person or group, the Employee, as a member of the person's Team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Transportation

If RP8 Employees provide transportation, they must make certain that:

1. The person is not left unattended in the vehicle;

2. The person uses a seat belt and remains seated while the vehicle is in motion;

3. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively operating a lift on vehicles that require the keys to be in the ignition to operate the lift;

4. Any person in a wheelchair uses a seat belt, or locking mechanism to immobilize the wheelchair during travel;

5. The person is transported in a safety restraint seat when required by Utah State law;

6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving; and,

7. The person arrives safely at the scheduled time and arranged destination and that no one is left alone along the way to or from supports even in emergency situations.

C. Person's Funds
The Employee shall not loan or give money to a person they support. A person shall not loan or give money to an Employee.

D. Health and Safety Requirements
Employees shall immediately contact the Employer to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, improper administration of medication, medication administered at the wrong time, or failure to follow laboratory survey schedule, and shall document the error on their timesheet.

The person shall have kitchen privileges and shall have access to food and ingredients. Employees assist persons in planning meals to meet basic nutritional standards, special diets, food preferences, customs, and appetites so the person may lead self-determined lives.

Staff Support:
Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person?s assessed needs. Employee providing this service within providers? homes shall serve no more than four persons per staff at any one time including the provider?s own minor children under the age of 14.

Rate:
RP8 includes a quarter hour and daily rate, and is provided based on a ratio of one employee to groups of up to three individuals. The rate reflects the amount paid to the employee for each person served in the group. RP8 includes payment for room and board. RP8 does not include payment for exceptional needs care. RP8 day rate equals six hours or more of respite services.

Overnight stays of 6 to 24 hours in length rendered, as a single episode of service, shall be billed at the RP8 daily rate. Single episodes of service rendered for longer than twenty-four hours shall be billed as one day of service plus whatever additional hours of service are rendered during this single episode using the RP8 quarter-hour rate until those additional hours

Service Code: RPS
Service Name: Respite Session
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/26/2001
Obsolete Date:
DSPD

Description:

RPS provides care rendered as a session to relieve, or during the absence of, the person?s normal caregiver. The service is furnished the person on a short term basis in a facility or other approved community based program that is not the person's or immediate family's normal place of residence.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Session	Standard	$406.28

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
RPS provides care rendered as a session to relieve, or during the absence of, the normal caregiver. The service is furnished to a covered individual on a short term basis in a facility or other approved community based program and is not the person's or immediate family's normal place of residence. RPS is intended for care offered through an approved facility, temporary care facility, overnight camp, summer programs, or a facility providing group respite other than the private residence of the Contractor or the person. RPS is available through Provider-based services.

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and acquired brain injury (ABI), as defined in Utah Administrative Code R539-1.

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501 to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits governing the type of service provided. Contractor must be enrolled as an approved Individual Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

Staff Qualifications:
All staff must demonstrate competency (in the services covered by the contract), as determined by the Contractor, in addition all applicable education, and training must be completed before the delivery of any supports to persons and performing any work for persons without supervision. The Contractor must ensure that Respite staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Staff Support:
Actual type, frequency and duration of support will be defined in the person's Individual Support Plan?s Action Plan (ISP/AP) based on the person?s assessed needs.

Limitations:
In no case will services provided and billed under this service description be provided in the private home or residence of either the Contractor or the person.

RPS

Rate: RPS is provided as a session, up to one week, or as defined in the person's ISP/AP.

Service Code: **SCE** ***Creation Date:*** 3/13/2006

Service Name: **Support Coordiantion External** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

SCE coordinates the delivery of services to persons with mental retardation and related conditions who receive services from DHS/DSPD, including persons enrolled in the DHS/DSPD Medicaid Mental Retardation and Related Conditions (MR.RC) Home and Community Based Services Waiver (Waiver), and monitors the health and safety of those persons to determine and report to DHS/DSPD whether services are provided in accordance with program requirements and the person?s assessed service

USSDS Rates as of 12/23/2008

Unit	***Rate Type***	***Rate***
Month	Standard	$238.11

Service Eligibility

Eligibilit	***Description***
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

A. General Description

The Support Coordination-External (SCE) Contractor coordinates the delivery of services to persons with mental retardation and related conditions receiving services from DHS/DSPD, including persons enrolled in the DHS/DSPD Medicaid Mental Retardation and Related Conditions (MR.RC) Home and Community Based Services Waiver (Waiver), and monitors the health and safety of those persons to determine and report to DHS/DSPD whether services are provided in accordance with program requirements and the person?s assessed service needs.

In so doing, the SCE Contractor:

1. Validates the comprehensive assessments of persons with mental retardation and related conditions, including persons enrolled in the Waiver, and consults with DHS/DSPD as well as the State Medicaid Agency to recertify eligibility and/or modify existing comprehensive assessments and service plans;
2. Informs persons of available services and how to select from among the service providers offering those services;
3. Helps persons obtain the services they select and assert their rights to a hearing if their choice of service providers or services is denied or reduced by DHS/DSPD or the State Medicaid Agency;
4. Regularly reassesses the status and needs of persons, including their health and safety needs, and suggests modifications to their Individual Support Plans (ISPs) based on these reassessments;
5. Helps persons gain access to services provided under the State of Utah Medicaid Plan (Medicaid State Plan) as well as other non-Medicaid based resources that have been assessed as being of benefit to them;
6. Determines and reports to DHS/DSPD the quality of the services being delivered to persons and takes the steps necessary to remedy any shortcomings, including notifying DHS/DSPD and any other authorities with appropriate jurisdiction as necessary to ensure such quality; and
7. Provides discharge-planning services for persons disenrolling from the Waiver to ensure a safe and orderly disenrollment and transition to other available resources.

B. Population To Be Served

The SCE Contractor will serve DHS/DSPD enrollees with mental retardation and related conditions as defined in Utah Administrative Code, Rule R539-1, including those receiving services in the Waiver.

C. Contractor Qualifications

1. The SCE Contractor shall have all applicable licenses as prescribed in Utah Administrative Code, Rule R501, http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits governing the type of service provided.
2. The SCE Contractor shall be certified by DHS/DSPD to provide any services not covered by applicable licensure as prescribed by Utah Administrative Code, Rule R501 http://rules.utah.gov/publicat/code/r501/r501.htm
2. The SCE Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to

allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the SCE Contractor. The SCE Contractor must also agree to participate in any Utah Department of Health or DHS/DSPD required training.

3. The SCE Contractor shall be under contract with DHS/DSPD.

D. Administrative Requirements

1. Personnel Policies and Procedures: The SCE Contractor shall have established personnel policies and procedures, a copy of which shall be maintained and readily accessible at each facility. These policies and procedures shall:

a. Include written job descriptions for all positions including volunteer positions with ongoing involvement (each job needs. description shall include the specific knowledge, skills, abilities and educational requirements necessary to qualify for the position).

b. Provide for the documented evaluation of staff performance on at least an annual basis.

c. Prohibit from providing SCE services and supports, any staff member who has a physical, emotional, or mental condition that could interfere with the staff member?s ability to perform the essential functions of his/her assigned duties, including any condition that could jeopardize the well-being of persons receiving services, until the SCE Contractor is provided with documentation that the condition is resolved to the satisfaction of a licensed physician or other appropriate professional.

2. Operating Policies and Procedures: The SCE Contractor shall have established operating policies and procedures, a copy of which shall be maintained and readily accessible at each facility. These policies and procedures shall:

a. Include a mission statement and objectives, as defined by the SCE Contractor.

b. Identify the specific population being served.

c. Describe each of the services offered by the SCE Contractor and how they will be delivered.

d. Clearly define staff and supervisory responsibilities during all hours of operation.

e. Provide for necessary staff training on a regular basis.

g. Provide for the receipt and resolution of persons? grievances.

H. Include emergency procedures for handling the injury, illness, or death of a person and instructions about when and how to notify the DHS/DSPD Region Office.

3. Quality Monitoring Process: The SCE Contractor shall have a quality monitoring process that may be externally validated by DHS/DSPD and shall include the following:

a. An agency self-assessment or accreditation process for DHS/DSPD funded services.

b. An established method for responding to concerns identified in the SCE Contractor's quality monitoring and feedback processes.

c. An established method for responding to and/or correcting within specified timeframes, any areas needing improvement or any areas of non-compliance noted by DHS/DSPD.

4. Human Rights Plan: The SCE Contractor shall develop a Human Rights Plan and establish an MR.RC Human Rights Committee. The SCE Contractor?s Human Rights Plan shall identify:

a. Procedures for training persons and staff on persons? rights;

b. Procedures for prevention of abuse and rights violations;

c. A process for restricting persons? rights when necessary;

d. A process for reviewing supports that are at high risk for human rights violations;

e. The responsibilities of the SCE Contractor?s Human Rights Committee. These responsibilities shall include reviewing violation of rights issues related to the supports the SCE Contractor is providing and giving recommendations to the person and his/her Support Team. All persons and staff shall have access to the SCE Contractor?s Human Rights Committee.

5. Protective Service Investigations: The SCE Contractor shall cooperate in all DHS Protective Service Investigations. Unless superseded by a recommendation from DHS Adult or Child Protective Services, if an allegation is made against a staff person, the staff person involved shall not be allowed any unsupervised contact with persons until the investigation is completed and a determination is made with regard to the allegations.

6. Fatality Notifications: The SCE Contractor shall in the absence of other service provider(s) notify the person's family, the DHS/DSPD Administrative Supervisor and Region Director within 24 hours of first knowledge of the death of a person who was receiving support services.

7. Fatality Reviews: The death of a DHS/DSPD person who meets one or more of the criteria below is subject to a DHS fatality review. The SCE Contractor shall follow the DHS fatality review process upon the death of a person who meets any of the following criteria:

a. The person lived outside the family home and received support services within 12 months prior to the date of death.

b. Any person whose death the DHS/DSPD Director requests be reviewed.

8. DHS Provider Code of Conduct: The SCE Contractor and staff are required to annually review and sign the DHS Provider Code of Conduct prohibiting the abuse or neglect of persons with disabilities. Copies of the Provider Code of Conduct shall be maintained at each program site and annually each employee shall sign a statement acknowledging that they have read it. The DHS Provider Code of Conduct may be found at www.hspolicy.utah.gov/pdf/5-3.pdf/

E. Contractor Board

An SCE Contractor acting as a non-profit organization shall have a Board to assure a high quality of program standards, effective program administration, and continuing program development as required by Utah Code Ï 16-6a, Nonprofit Corporations. http://www.le.state.ut.us/~code/TITLE16/16_02.htm

1. It is recommended that the SCE Contractor appoint as board members, several persons and/or advocates of persons who receive supports.

2. As allowed by the Internal Revenue Service and Utah Code, SCE Contractor staff and/or relatives of Contractor staff may serve on the Board, but shall not makeup a majority of the membership or Board quorum; however, under no circumstances may any parties, including related parties, who maintain interests in any other organization under contract with

DHS/DSPD, serve on the Board.

F. Background Investigations
In accordance with Utah Code ÏÏ 62A-2-121, 62A-2-122, and 62A-4-116.2, any person providing SCE services shall pass an annual Bureau of Criminal Identification (BCI) background check conducted by the DHS, Office of Licensing. Any SCE worker who has lived outside the State of Utah for a period greater than 4 weeks during the preceding five (5) years, shall pass a Federal Bureau of Investigation Nationwide Criminal Background check consistent with current DHS, Office of Licensing requirements. Additionally, staff must annually pass a review of the abuse registries queried by the DHS Office of Licensing. http://rules.utah.gov/publicat/code/r501/r501-14.htm

G. Contractor and Staff Prohibited from Acting as Guardians
The SCE Contractor, its staff, and related parties are prohibited from becoming the legal guardian of any person receiving services under the SCE Contractor?s contract.

H. Incident Reporting Requirements
1. Incident Reports: Within 24 hours of any incident requiring a report, the SCE Contractor shall notify both the DHS/DSPD Administrative Coordinator and the person?s Guardian by phone, email, or fax.
Within five (5) business days of the occurrence of an incident, the SCE Contractor shall complete a DHS/DSPD Form 1-8 Incident Report and file it with the DHS/DSPD Support Coordinator at the DHS/DSPD Region Office. However, the mandatory reporting requirements of the Utah Code always take precedence. See Utah Code ÏÏ 62-A-3-301 through 321 for adults and, Utah Code ÏÏ 62-4a-401 through 412 for children. Therefore, in cases of actual or suspected incidents of abuse, neglect, exploitation, or maltreatment of an adult, the SCE Contractor shall immediately notify Adult Protective Services intake or the nearest law enforcement agency, and in a case involving a child, the SCE Contractor shall immediately notify the Division of Children and Family Services Child Protective Services intake or the nearest peace officer or law enforcement agency.

The following situations are incidents that require the filing of a report:
a. Actual or suspected incidents of abuse, neglect, exploitation, or maltreatment per the DHS/DSPD Code of Conduct and Utah Code ÏÏ 62-A-3-301 through 321, which can be found at http://www.le.state.ut.us/~code/TITLE62A/62A03.htm for adults, and Utah Code ÏÏ 62-4a-401 through 412 for children, which can be found at http://www.le.state.ut.us/~code/TITLE62A/62A04.htm;
b. Drug or alcohol abuse, medication overdoses or errors reasonably requiring medical intervention;
c. Missing person;
d. Evidence of seizure in a person with no existing seizure diagnosis;
e. Significant property destruction (damage totaling $500.00 or more);
f. Physical injury reasonably requiring a medical intervention;
g. Law enforcement involvement;
h. Any use of manual restraint, mechanical restraints, exclusionary time-out or time-out rooms as defined in Utah Administrative Code, Rule R539-4, (http://rules.utah.gov/publicat/code/r539/r539.htm) or level II emergency interventions not outlined in the person?s behavioral plan (e.g., response cost, overcorrection); and,
i. Any other instances the SCE Contractor determines should be reported.

The SCE Contractor shall ensure that service provider(s) send within 24 hours a copy of any incident report directly to the DHS/DSPD Administrative Coordinator within the DHS/DSPD regional office where it will be reviewed and submitted to DHS/DSPD leadership for further administrative review and oversight.

I. Record Keeping
1. Personnel Records: The SCE Contractor shall maintain personnel files for all officers and employees associated with the SCE Contractor. The files shall include the officers? and employees?:
a. Application (including name, address, and telephone number),
b. References (including documentation that at least 2 references were checked),
c. Background check clearance from DHS, Office of Licensing and the BCI release form,
d. Signed DHS Provider Code of Conduct, and signed conflict of interest disclosure statement,
e. Record of training and competency test methods and results,
f. Copies of educational transcripts and degrees (if transcripts and degrees are used by the SCE Contractor to prove competency),
g. Copies of W-4(s),
h. Copy of I-9,
i. Copy of valid driver?s license, or state identification card, and Social Security Card, and
j. Evidence of a negative result on a tuberculosis (TB) test or negative chest X-ray results if a previous TB test is positive, conducted within one month of employment.
2. Person?s Records: The SCE Contractor shall maintain separate records for each person served. All records are the property of DHS/DSPD and the State of Utah and shall be furnished to DHS/DSPD upon request. A person?s records shall include the following information as applicable:
a. The person's name, address, phone number, birth date, identification number and Medicaid number; name and address of sponsor or owner of facility providing services; the name, address and phone number of the person?s Support Coordinator,
b. A photograph of the person,
c. The name, address, and phone number of the person's representative;

d. The names of emergency contacts and instructions on how to contact them,
e. The name and phone number of the person?s primary care physician, medical specialist and medical insurance, if any;

f. A copy of the person?s social history and psychological evaluation (when provided by DHS/DSPD);
g. Documentation of behavioral or other incidents such as property damage;
h. The person?s current Individual Support Plan/Action Plan (ISP/AP), including the service providers? support strategies and monthly summaries of attendance records, and service records identifying the service rendered, the name of the person providing the service, the location where services were rendered and the date and number of hours rendered;
i. The person?s admission and termination dates, sponsorship (DHS/DSPD or private), paybacks related to the person, and reimbursement requests (Forms 520, and 1032). These records shall be maintained for five years from the date of discharge;
j. Human Rights Committee and Behavior Peer Committee documentation, guardianship and other pertinent legal documents;
k. A record of all incidents and protective service investigations documented in accordance with DHS requirements; and,

l. A statement signed by the person and/or the person?s representative verifying that the SCE Contractor both explained to the person and provided him/her with a copy of its grievance policy and procedures.
3. Medicaid Records: If the SCE Contractor is providing Medicaid reimbursed Waiver services, it shall document (using the DHS/DSPD Form 870 log or such other format as prescribed by DHS/DSPD) all SCE services provided as identified below:
a. The name of the person served,
b. The name of the person who delivered the service,
c. The specific service provided,
d. The date the service was rendered, and
e. Progress notes describing the person?s response to the services (e.g., progress or the lack of progress as documented in the monthly summaries and/or progress notes of the service provider).

All Medicaid service records shall be made available for State or Federal audit or review purposes within 24 hours of request.

J. Reports
The SCE Contractor shall determine whether service providers submit to DHS/DSPD the reports listed below by the specified due date and shall notify DHS/DSPD. If required reports and billings are not submitted by the required due date as specified in the table below. If SCE Contractors service providers fail to provide notice to DSPD of missing or late submissions from providers or fail to submit 870 logs as back up with the billing form by the due date(s) specified in the table below, DHS/DSPD payment for services may be withheld or denied.

DOCUMENT DUE DATE
Incident Report Form 1-8 Five business days after the event.
Support Strategies 30 days after the Action Plan is received.
Monthly Summary 15 days after the end of the month.
520 Billings and 870 logs 30 days after the receipt of the DHS/DSPD generated 520 billings.
Reconciled Representative Payee Report 45 days after the end of the month.
Response to DHS/DSPD Corrective Action Major deficiency: within 24 hours of notification.Significant deficiency: within 10 days of notification.Minor deficiency: within 30 days of notification.

K. Person Discharge Procedure
1. An SCE Contractor-initiated request for discharge may require up to 30-days prior notification to the person. The DHS/DSPD Region Director may require the SCE Contractor to continue supports for 90-days to maintain the person?s health and safety. The SCE Contractor may appeal this extension to the DHS/DSPD Director.
2. The SCE Contractor shall submit a discharge summary to the DHS/DSPD Administrative Coordinator at the time of the person?s discharge. The summary shall include:
a. Reason for termination;
b. Summary of services provided;
c. Evaluation of the person's strengths, interests, needs, achievement of goals, and objectives; and,
d. The signature and title of the SCE staff preparing the summary.

L. Staff Qualifications
All SCE staff must demonstrate competency, as determined by the SCE Contractor, in the services covered by the SCE Contractor?s contract. In addition, all applicable education and training must be completed before SCE staff may deliver any supports to or perform any work for persons without any supervision. In order to be considered competent to deliver support coordination services without supervision, SCE staff must: 1) qualify for and possess the credential of Qualified Mental Retardation Professional (QMRP) as defined in Interpretive Guidelines for ICF for Persons with Mental Retardation (W159-W180); Code of Federal Regulations, Centers for Medicare and Medicaid Services, State Operations Manual-Appendix J, pages 77-87 (or provide a statement that qualifications will be met before providing services); and 2) successfully complete a course offered and prescribed by DHS/DSPD certifying competency in support coordination. SCE Staff possessing the above-stated QMRP credential and DHS/DSPD certification shall, for purposes of this section, hereinafter be referred to as a certified SCE support coordinator?.

Non-certified SCE staff actively pursuing training leading to certification may provide support coordination services under the direct supervision of a certified SCE support coordinator. Direct supervision means that non-certified support coordinators will consult with and obtain the approval of a certified SCE support coordinator regarding any material decisions affecting the person. However, in no case shall a single certified SCE support coordinator supervise more than three non-certified SCE staff. The caseload of a certified SCE support coordinator who is supervising non-certified SCE staff shall be reduced by ten persons for each non-certified SCE staff supervised.

Unless previously approved by the DHS/DSPD Director in writing, a single SCE support coordinator (whether certified or non-certified) may not provide services to more than FORTY persons receiving DHS/DSPD services at any one time.

The SCE Contractor must ensure that SCE support coordinators are trained in the Staff Training Requirements outlined in the Waiver, the SCE Contractor?s contract, and applicable rule and statute. In addition, all SCE support coordinators must complete 30 hours of continuing education each year that is both relevant to the conduct of their duties and approved by a DHS/DSPD regional director.

M. SCE Specific Service Requirements
SCE services shall include, at a minimum, the following:
1. Validating the person?s comprehensive assessment and the identification of services and supports necessary to ensure the person?s health and safety;
2. Affording the person a choice of services and service providers from which the person can elect to receive needed Waiver services. The SCE Contractor is responsible for ensuring that the person and his/her family and legal representative have sufficient information to make an informed choice regarding the formulation of the Individual Support Plan (ISP);
3. Developing the ISP, including:
   a. ensuring that appropriate support strategies for implementing all ISP elements are included; and,
   b. developing a budget necessary and appropriate for implementing all elements of the ISP;
4. Consulting the appropriate DHS/DSPD Eligibility Determination and Enrollment unit to modify comprehensive assessments and resulting identified service needs, and consulting with the appropriate DHS/DSPD Service Review unit in order to verify the appropriateness of the person?s plan and budget;
5. Providing information and advocacy services, including assisting the person in requesting Fair Hearings when services or service providers have been denied or reduced;
6. Assisting the person to gain access to the supports and services specified in his/her ISP from qualified service providers or from other sources, including but not limited to, the Medicaid State Plan, community entitlements, and other informal and natural supports. This assistance may include offering instruction to the person, his/her family or legal representative about how they can independently access services when established funding sources become unavailable;
7. Monitoring the provision and quality of the person?s services and supports to determine and report to DHS/DSPD whether they are being delivered as intended. Such monitoring shall include:
   a. Interviews with the person;
   b. Direct observation of the delivery of supports and services to the person;
   c. Assessing the knowledge and understanding of the service provider regarding:
   I. The use and application of behavioral supports,
   ii. Any pertinent medical conditions of the person, and
   iii.he person?s support strategies;
   d. Reviewing (on a monthly basis) the service provider?s documentation of services provided to the person; and,
   e. Periodically reassessing the person?s progress and the continuing need for services.

Any person receiving residential or day support services shall be monitored at least monthly via a face-to-face visit and direct observation. Any person receiving only supported living services in the family?s home shall be monitored at least quarterly via a face-to-face visit.

8. Monitoring the person?s health, welfare and safety status on an ongoing basis, including:
   a. Initiating appropriate modifications to the person?s ISP to reflect changes in assessed needs and prescribed services, including support coordination; and,
   b. Reporting changes to DHS/DSPD in a timely fashion (within 20 business days) in order to secure approval from DHS/DSPD Administrative Supervisor regarding any resulting budget changes.
9. Reassessing the person?s prescribed needs (including updating social histories) in conformity with the intervals specified in the Waiver, and reviewing and modifying the person?s ISP as needed based on the reassessment. All prescribed services contained in the person?s ISP, including support coordination services, shall be based on the person?s assessed needs and shall specify the amount, frequency and duration of the services required to meet those needs, regardless of the person?s place of residence within the State of Utah;
10. Maintaining accurate individual case records and documentation in conformity with the documentation requirements and standards set by DHS/DSPD as indicated in Paragraph I. 2 and 3. (Record Keeping) above, and using formats prescribed by DHS/DSPD, including the documentation of all support coordination activities rendered to, or on behalf of, the person;
11. Monitoring the service providers? actual provision of supports specified in the ISP, as well as reviewing payment requests or other submitted invoices to determine and report to DHS/DSPD whether they are accurate and that they reflect legitimate expenses (payment requests shall be submitted to DHS/DSPD within 30 days of receipt of the DHS Form 520, billing form);
12. Providing discharge planning and transition services to persons disenrolling from DHS/DSPD services to ensure a safe and orderly transition to other community supports and services; and,
13. Providing support coordination services as needed during times of crisis or sentinel events.

N. Person-Centered Planning
The SCE Contractor shall direct and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services. This process is outlined below:
1. The SCE Contractor is responsible for developing the ISP/AP. These plans may include review and approval of submitted Behavior Support Plans, Psychotropic Medication Plans, Staff Instruction sheets, and data collection and/or Task Analysis sheets used for skill training or other support.
2. Once the ISP/AP has been developed, the SCE Contractor determines and reports to DHS/DSPD that the service provider orients the person to that portion of the plan that pertains to that provider and determines and reports to DHS/DSPD that the person is involved in its implementation.
3. The SCE Contractor shall gather and approve Support Strategies developed by the person?s service providers. The SCE Contractor shall also review the Monthly Summaries submitted by the person?s service providers to determine and report to DHS/DSPD that services being provided to the person conform to the person?s needs as specified in the person?s ISP.
4. The SCE Contractor, as a member of the person's team, is required to:
a. assist in assessments; and,
b. meet with the team at least annually (within 12 months of the last Person-Centered Process meeting) to review the person?s service/support requirements and make necessary adjustments based on the person?s needs. However, the team or the SCE Contractor may meet more often as determined by the person or other members of the team.

O. Psychotropic Medications
1. Psychotropic Medications include any drug prescribed to stabilize or improve mood, mental status, or behavior.
2. For persons on psychotropic medications, the SCE Contractor shall determine and report to DHS/DSPD whether the service provider has reviewed and approved, in consultation with the person?s physician or nurse with prescriptive privileges, a Psychotropic Medication Plan support strategy that contains the following information:
a. The identity (generic or brand) of all prescribed medications including:
1. Name of all prescribed medications;
2. The date on which each medication was commenced or is to be commenced, and the prescribed dosage for each; and,
3. The specific side effects to monitor (when antipsychotic medications are used, monitoring procedures shall use standardized assessment instruments such as the Abnormal Involuntary Movement Scale (AIMS));
b. The specific behaviors or symptoms targeted so that the advantages and disadvantages of any prescribed psychotropic medications can be assessed; and,
c. The identity of any other supports or services that are available and would be useful in treating the targeted behavior or symptom as well as any related illness or condition of the person. Such supports or services may include Behavior Support Plans, psychotherapy or laboratory surveillance (for example, blood work to check lithium serum, CBC, liver function, etc.).

P. Representative Payee Monitoring
1. As per Utah Administrative Code, Rule R539-3-5(2), the SCE Contractor shall monitor Personal Budget Assistance (PBA or PB1) service providers to determine and report to DHS/DSPD whether services rendered under the PBA or PB1 service codes comply with all Social Security Administration requirements outlined in 20 CFR 416.601-665.
2. As per Utah Administrative Code, Rule R539-3-5(1), the SCE Contractor shall monitor service providers to determine and report to DHS/DSPD whether the person has access to and control over his/her personal funds unless the person or his/her representative voluntarily signs a DHS/DSPD Voluntary Financial Support Agreement (Form 1-3). The SCE Contractor's Human Rights Committee may recommend to the person?s team that the person?s right to manage his/her personal funds be restricted if the person?s money, health, or safety is placed in jeopardy by severe mishandling, unlimited access, or exploitation of funds by the person or others. The SCE Contractor shall offer the person training and, support regarding the management of finances whenever possible.
3. The SCE Contractor shall determine and report to DHS/DSPD whether the PBA or PB1 service provider reviews the person?s financial records with the person at least monthly and:
a. Maintains documentation of financial reviews and reconciled financial statements in the person?s record;
b. Keeps an accurate record of all funds deposited by the PBA or PB1 service provider on behalf and for the use of the person. This record shall contain a list of deposits and withdrawals by category of food, rent, clothing and leisure. This record shall be verifiable with receipts and/or monthly bank statements;
c. Substantiates purchases over $20.00 per item by maintaining receipts signed by the person and staff;
d. Verifies purchases over $20.00 with receipts, cancelled checks or monthly bank statements; and,
e. Assures the accuracy of personal financial records through a separate monthly review performed by someone other than the PBA or PB1 service provider staff member authorizing expenditures.
4. The SCE Contractor shall determine and report to DHS/DSPD whether the PBA or PB1 service provider conducts and maintains documentation of quarterly administrative reviews of monthly financial documentation, bank statements, receipts and purchases for a random sample of persons receiving support to determine and report to DHS/DSPD whether there are adequate financial controls for all persons served by the PBA or PB1 service provider.
5. The SCE Contractor shall determine and report to DHS/DSPD whether the PBA or PB1 service provider documents the handling of personal funds in a way that is not harmful or embarrassing to the person and whether the funds are used only for the intended purpose. The SCE Contractor may recommend the type of financial support a person may need and refer the person to a review by the service provider?s Human Rights Committee. The SCE Contractor may act as representative or protective payee only in a situation where no other knowledgeable, financially competent adult is willing to take on the representative or protective payee responsibilities. The SCE Contractor may submit an alternative procedure for

consideration by the DHS/DSPD Director. The SCE Contractor shall only use the proposed alternative procedure if written approval of the variance is granted by the DHS/DSPD Director or designee.

6. The SCE Contractor shall determine and report to DHS/DSPD that, upon receipt of the person?s team approval or a DHS/DSPD Form 1-3 signed by the person or his/her representative, the PBA or PB1 service provider manages the major personal business affairs of the person. Major personal business affairs include management of personal funds, checking account, savings account, or other financial matters related to supplemental income. Any variance from DHS/DSPD required procedures must be approved by the service provider?s Human Rights Committee or requested by the person or his/her representative and documented in the ISP/AP.

7. The SCE Contractor shall determine and report to DHS/DSPD whether service providers maintain a record of the person?s petty cash funds. The amount of cash maintained in the person?s petty cash account shall not exceed $50.00 without the service provider?s written administrative approval. Records shall be kept of all deposits and withdrawals to the person?s petty cash account.

8. The SCE Contractor will encourage PBA and PB1 service providers to protect the person?s funds by using methods such as:

a. not writing checks for more than $50.00 cash a week;
b. not using Automatic Teller Machines for transactions; and,
c. not making deposits that include a return of cash.

The above actions will help to protect the person?s funds by establishing a bank record of the total funds received by the person and requiring the person to sign all transactions. The PBA or PB1 service provider?s Human Rights Committee may propose specific limits on a person?s access to money and allowable spending amounts for the person?s team review and approval.

9. The SCE Contractor shall determine and report to DHS/DSPD whether the PBA or PB1 service provider forwards to the SCE Contractor a monthly accounting of the personal funds of each person served by the PBA or PB1 service provider. The SCE Contractor shall review these monthly accountings and recommend corrective action to DHS/DSPD if discrepancies or errors are discovered. Any necessary corrective action plans shall be developed in consultation with the contract analyst in the appropriate DHS/DSPD region.

Q. Person?s Personal Funds

1. The SCE Contractor shall determine and report to DHS/DSPD whether the service provider has made any emergency loans to the person. If so, the SCE Contractor shall:

a. Review the documentation supporting any loans outstanding for three months or longer;
b. Notify the person?s team to obtain approval of the service provider?s actions; and,
c. Determine and report to DHS/DSPD whether the service provider documents both the emergency and the person?s team approval and maintains the documentation in the person?s record.

2. The SCE Contractor shall advise persons not to write checks to, give cash to or make purchases from either the service provider or the SCE Contractor. The SCE Contractor shall also determine and report to DHS/DSPD whether the service provider has policies in place addressing these prohibitions and the only allowable exceptions. The only allowable exceptions are:

a. Reimbursing the service provider for destruction of property by the person, when approved by the person?s team. (Property damage shall be covered by the service provider?s insurance unless it is agreed upon by the person?s team that the person shall pay for the damages); and
b. Paying room and board charges.

3. The SCE Contractor shall determine and report to DHS/DSPD whether the service provider affords the person adequate access to personal finances in order to cover anticipated expenditures.

R. Health and Safety Requirements

1. The SCE Contractor shall determine and report to DHS/DSPD whether the service provider ensures that the person receives training, and opportunities, to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the ISP and as allowed by the person's Medicaid and insurance plans.

2. The SCE Contractor shall determine and report to DHS/DSPD whether the service provider ensures that the person receives training and assistance to:

a. Identify primary health care practitioners;
b. Obtain dental and physical examinations;
c. Safely follow physician orders;
d. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the person's physician; and,
f. Document the frequency, dosage, and type of medication taken.

3. The SCE Contractor shall determine and report to DHS/DSPD whether the service provider immediately contacts the appropriate medical professional to report the discovery of any prescribed medication error, including any actual missed or suspected missed dosage, misadministration of medication, medication administered at the wrong time, or failure to follow laboratory survey schedule, etc. Any medication errors that occur shall be documented in the person's file and reported to the SCE Contractor?s Director or designee.

4. The SCE Contractor shall determine and report to DHS/DSPD whether the service provider notifies the person?s representative within 24 hours of development of a medical issue for any person, such as illness requiring medical appointments or an emergency room visit. This does not include medical appointments for general health check-ups.

5. The SCE Contractor shall determine and report to DHS/DSPD whether the service provider records any allergies the person has in the person's medical record and whether it discloses such allergies to the person's primary physician.

S. Health and Nutrition Requirements
The SCE Contractor shall determine and report to DHS/DSPD whether the service provider ensures that the person receives assistance in planning meals that meet basic nutritional standards, special diets, food preferences, customs, and appetites.

T. Transportation
The SCE Contractor shall determine and report to DHS/DSPD whether the service provider provides routine transportation to shopping and other community activities, based on the team's reasonable, professional judgment, as indicated in the person?s ISP.

U. Access to Community Services
The SCE Contractor shall help the person obtain assistance from community and government organizations, including but not limited to housing, food stamps, and Social Security benefits, etc.

V. Rate
SCE services shall be paid based on a per person per month (PMPM) rate. The current rate is reflected in the table below. The SCE rate may be renegotiated annually by DHS/DSPD with the Utah Department of Health. The SCE Contractor shall be advised of any change in the rate and the effective date of the same within 30 days after the rate is finalized.

Service Title	Service Code	Unit of Service	Rate($)	Population to be Served
Support Coordination, External	SCE	Monthly	216.18	MR.RC

W. Limitations -- Staff Support
1. The actual type, amount, frequency and duration of SCE services provided by the SCE Contractor will depend on the program, habilitation, and health and safety needs of the person being served. However, it is expected, based on a caseload of 40 persons, that SCE services will average no less than 2.5 hours per person per month.
2. Non-certified SCE staff may provide support coordination services under the direct supervision of a certified SCE support coordinator so long as the non-certified SCE staff are actively pursuing training leading to SCE certification. However, in no case shall a single certified SCE support coordinator supervise more than three non-certified SCE support coordinators. Furthermore, the caseload of certified SCE support coordinators who are supervising non-certified SCE staff shall be reduced by ten persons for each non-certified SCE support coordinators they supervise.
3. Unless previously approved by the DHS/DSPD Director in writing, support coordinators may not provide services to more than FORTY persons receiving services from DHS/DSPD at any one time.
4. Any certified SCE support coordinator who is separated from employment with the SCE Contractor for cause shall be

Service Code: **SCL** ***Creation Date:*** 5/10/2001

Service Name: **Support Coordination Liaison** ***Obsolete Date:***

Contract Type: Either a non-fixed or fixed amount contract required DSPD

Residential: No

Description:

SCL is a cooperative effort between the Division of Services for People with Disabilities and the network of Centers for Independent Living in Utah. It provides Support Coordination Liaison service needs that are properly identified, a realistic, achievable, the support plan is developed, and successful implementation of the support plan occurs utilizing available local

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$15.65

Service Eligibility

Eligibilit	Description
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM

Service Code

Other

A. General Description
The Support Coordinator Liaison (SCL) Contractor coordinates the delivery of services to persons enrolled in the DHS/DSPD Physical Disabilities (PD) Program and reports to DHS/DSPD whether services are provided in accordance with program requirements and the person?s assessed service needs. In so doing, the SCL Contractor:
1. Develops an Action Plan and support strategies to assist a person to achieve person goals;
2. Informs persons of available services and assists in obtaining the services they select;
3. Helps persons gain access to services provided under the State of Utah Medicaid Plan (Medicaid State Plan) as well as other non-Medicaid based resources that have been assessed as being of benefit to them;
4. Consults with DHS/DSPD about needs of persons, and suggests modifications to their Individual Support Plans (ISPs) based on these needs;
5. Consults with DSPD concerning discharge-planning services for persons leaving nursing homes to ensure a safe and orderly transition to DSPD services and for persons leaving DSPD services to other available resources.

B. Population To Be Served
The SCL Contractor will serve DHS/DSPD enrollees with physical disabilities as defined in Utah Administrative Code, Rule R539-1, including those receiving services in the Waiver.

C. Contractor Qualifications
1. The SCL Contractor shall have all applicable licenses as prescribed in Utah Administrative Code, Rule R501, http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits governing the type of service provided.
2. The SCL Contractor shall be certified by DHS/DSPD to provide any services not covered by applicable licensure as prescribed by Utah Administrative Code, Rule R501 http://rules.utah.gov/publicat/code/r501/r501.htm
3. The SCL Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the SCL Contractor. The SCL Contractor must also agree to participate in any Utah Department of Health or DHS/DSPD required training.
4. The SCL Contractor shall be under contract with DHS/DSPD.
5. Contractors shall be a qualified, non-profit provider designated by the Utah Office of Rehabilitation, as described in the State?s Rehabilitation plan to provide Independent Living Services for persons with physical disabilities across the State.
6. Quality Monitoring Process: The SCL Contractor shall have a quality monitoring process that may be externally validated by DHS/DSPD and shall include an established method for responding to and /or correcting within specified timeframes, any areas needing improvement or any areas of non-compliance noted by DHS/DSPD.
7. DHS Provider Code of Conduct: The SCL Contractor and staff are required to annually review and sign the DHS

Provider Code of Conduct prohibiting the abuse or neglect of persons with disabilities. Copies of the Provider Code of Conduct shall be maintained at each program site and annually each employee shall sign a statement acknowledging that they have read it. The DHS Provider Code of Conduct may be found at www.hspolicy.utah.gov/pdf/5-3.pdf/

E. Contractor Board
An SCL Contractor acting as a non-profit organization shall have a Board to assure a high quality of program standards, effective program administration, and continuing program development as required by Utah Code Ï 16-6a, Nonprofit Corporations. http://www.le.state.ut.us/~code/TITLE16/16_02.htm

resources. F. Background Investigations
In accordance with Utah Code ÏÏ 62A-2-121, 62A-2-122, and 62A-4-116.2, any person providing SCL services shall pass an annual Bureau of Criminal Identification (BCI) background check conducted by the DHS, Office of Licensing. Any SCL worker who has lived outside the State of Utah for a period greater than 4 weeks during the preceding five (5) years, shall pass a Federal Bureau of Investigation Nationwide Criminal Background check consistent with current DHS, Office of Licensing requirements.
Additionally, staff must annually pass a review of the abuse registries queried by the DHS Office of Licensing.
http://rules.utah.gov/publicat/code/r501/r501-14.htm

G. Contractor and Staff Prohibited from Acting as Guardians
The SCL Contractor, its staff, and related parties are prohibited from becoming the legal guardian of any person receiving services under the SCL Contractor?s contract.

H. Incident Reporting Requirements
1. Incident Reports: Within 24 hours of any incident requiring a report, the SCL Contractor shall notify the DHS/DSPD Administrative Coordinator by phone, email, or fax.
However, the mandatory reporting requirements of the Utah Code always take precedence. See Utah Code ÏÏ 62-A-3-301 through 321 for adults. Therefore, in cases of actual or suspected incidents of abuse, neglect, exploitation, or maltreatment of an adult, the SCL Contractor shall immediately notify Adult Protective Services intake or the nearest law enforcement agency.
2. The following situations are incidents that require the filing of a report:
a. Actual or suspected incidents of abuse, neglect, exploitation, or maltreatment per the DHS/DSPD Code of Conduct and Utah Code ÏÏ 62-A-3-301 through 321, which can be found at http://www.le.state.ut.us/~code/TITLE62A/62A03.htm for adults, and Utah Code ÏÏ 62-4a-401 through 412 for children, which can be found at http://www.le.state.ut.us/~code/TITLE62A/62A04.htm;
b. Drug or alcohol abuse, medication overdoses or errors reasonably requiring medical intervention;
c. Missing person;
d. Evidence of seizure in a person with no existing seizure diagnosis;
e. Physical injury reasonably requiring a medical intervention;
f. Law enforcement involvement;
g. The death of a person receiving services;
h. Any other instances the SCL Contractor determines should be reported.
3. Protective Service Investigations: The SCL Contractor shall cooperate in all DHS Protective Service Investigations involving individuals currently being served by the Contractor. Unless superseded by a recommendation from DHS Adult or Child Protective Services, if an allegation is made against a staff person, the staff person involved shall not be allowed any unsupervised contact with persons until the investigation is completed and a determination is made with regard to the allegations.

I. Record Keeping
1. Personnel Records: The SCL Contractor shall maintain personnel files for all employees providing SCL services. The files shall include:
a. Background check clearance from DHS, Office of Licensing and the BCI release form,
b. Signed DHS Provider Code of Conduct, and signed conflict of interest disclosure statement,
c. Record of training and competency test methods and results,
d. Copies of educational transcripts and degrees (if transcripts and degrees are used by the SCL Contractor to prove competency),
e. Copy of I-9,
f. Evidence of a negative result on a tuberculosis (TB) test or negative chest X-ray results if a previous TB test is positive, conducted within one month of employment.
2. Person?s Records: The SCL Contractor shall maintain separate records for each person served. All records are the property of DHS/DSPD and the State of Utah and shall be furnished to DHS/DSPD upon request. A person?s records shall include the following information as applicable:
a. The person's name, address, phone number, birth date, and identification number;
b. Name, address and phone number of the person?s Nurse Coordinator;
c. The names of emergency contacts and instructions on how to contact them,
e. The name and phone number of the person?s primary care physician, medical specialist and medical insurance, if any;
f. The person?s current Action Plan (AP), including the service providers?
support strategies and service records identifying
1)The name of the person served,
2)The name of the person who delivered the service,

3)The date the service was rendered
4)The specific service provided,
5)The number of hours delivered, and
6)Progress notes describing the person?s response to the services (e.g., progress or the lack of progress as documented in the monthly summaries and/or progress notes of the service provider).

g. A record of all incidents and protective service investigations;

h. A statement signed by the person and/or the person?s representative verifying that the SCL Contractor both explained to the person and provided him/her with a copy of its grievance policy and procedures.

i. The person?s admission and termination dates, and reimbursement requests Forms 520. These records shall be maintained for five years from the date of discharge.

All service records shall be made available for State or Federal audit or review purposes within 24 hours of request.

J. Reports

If required reports and billings are not submitted by the required due date as specified in the table below. DHS/DSPD payment for services may be withheld or denied.

DOCUMENT	DUE DATE
Support Strategies	30 days after the Action Plan is received.
Monthly Summary	30 days after the end of the month.
520 Billings and 870 logs	30 days after the receipt of the DHS/DSPD generated 520 billings.
Response to DHS/DSPD Corrective Action	Major deficiency: within 24 hours of notification.Significant deficiency: within 10 days of notification.Minor deficiency: within 30 days of notification.

K. Person Discharge Procedure

1. An SCL Contractor-initiated request for discharge may require up to 30-days prior notification to the person. The DHS/DSPD Associate Director for Service Administration may require the SCL Contractor to continue supports for 90-days to maintain the person?s health and safety. The SCL Contractor may appeal this extension to the DHS/DSPD Director.

2. The SCL Contractor shall submit a discharge summary to the person?s DHS/DSPD Nurse Coordinator at the time of the person?s discharge. The summary shall include:

a. Reason for termination;
b. Summary of services provided;
c. The signature and title of the SCL staff preparing the summary.

L. Staff Qualifications

All SCL staff must demonstrate competency, as determined by the SCL Contractor, in the services covered by the SCL Contractor?s contract. In addition, all applicable education and training must be completed before SCL staff may deliver any supports to or perform any work for persons without any supervision. In order to be considered competent to deliver support coordinator liasion services without supervision, SCL staff must:

1) Have a specialized knowledge of persons with physical disabilities concerning their physical needs, barriers to independence, and community support networks.

2) Education and Experience:

a. Possess a Bachelors degree or have comparable experience in the field.

b. SCL Staff actively pursuing education or experience leading to meeting qualification standards may provide SCL services under the direct supervision of a qualified SCL.

c. Direct supervision means that staff working toward the qualified standard, will consult with and obtain the approval of a qualified SCL regarding any material decisions affecting the person.

The SCL Contractor will determine training needs. The SCLs will be required to complete training as required by the SCL Contractor. In addition, all SCLs must complete 10 hours of continuing education each year that is both relevant to the conduct of their duties and approved by a DHS/DSPD Nurse Coordinator.

M. SCL Specific Service Requirements

SCL services shall include, at a minimum, the following:

1. When available, affording the person a choice of services and service providers from which the person can elect to receive needed services.

2. Developing an Action Plan and the appropriate support strategies to achieve desired goals.

3. Consulting the appropriate DHS/DSPD Nurse Coordinator to modify comprehensive assessments and resulting identified service needs, and consulting with the appropriate DHS/DSPD Nurse Coordinator in order to verify the appropriateness of the person?s plan.

4. Provide information and advocacy services,

5. Assisting the person to gain access to the supports and services specified in his/her ISP from service providers or from other sources, including but not limited to, the Medicaid State Plan, community entitlements, and other informal and natural supports. This assistance may include offering instruction to the person, his/her family or legal representative about how they can independently access services when established funding sources become unavailable;

6 Monitoring the provision and quality of the person?s services and supports to determine and report to DHS/DSPD whether they are being delivered as intended. Such monitoring shall include:

a. Interviews with the person;

b. Direct observation of the delivery of supports and services to the person;

c. Periodically reassessing the person?s progress and the continuing need for services;

d. Monitoring the person?s health, welfare and safety status on an ongoing basis, including consulting with a Nurse Coordinator concerning appropriate modifications to the person?s ISP to reflect changes in assessed needs and prescribed services.
7 Maintaining accurate individual case records and documentation in conformity with the documentation requirements and standards set by DHS/DSPD as indicated in Paragraph I. 2 and 3. (Record Keeping) above, including the documentation of all support coordination activities rendered to, or on behalf of, the person;
8. Providing consulting with the DSPD Nurse Coordinators on discharge planning and transition services to persons leaving DHS/DSPD services or disenrolling from DHS/DSPD services to ensure a safe and orderly transition to other community supports and services; and,
10. Providing support coordination services as needed during times of crisis or sentinel events.

N. Limitations -- Staff Support
1. The actual type, amount, frequency and duration of SCL services provided by the SCL Contractor will depend on the program, habilitation, and health and safety needs of the person being served.
2. SCL staff not yet qualified through education or experience may provide SCL services only under the direct supervision of a qualified SCL.
3. Unless previously approved by the DHS/DSPD Director in writing, SCLs may not provide services to more than FORTY persons receiving services from DHS/DSPD at any one time.

Service Code: **SEC** ***Creation Date:*** 1/25/2001

Service Name: **Supported Employment with a Co-Worker** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

SEC helps the person obtain, maintain, and advance in competitive employment in integrated work settings. SEI contractors arrange with the business to provide a co-worker as an additional support to the person under the direction of a SEI job coach and as a natural extension of the workday.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$1.15

Service Eligibility

Eligibilit	Description
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Supported Employment Co-Worker (SEC) services support persons in their efforts to obtain, maintain, and advance in competitive employment in integrated work settings. Only SEI contractors can access SEC funding. SEI contractors arrange with business to provide a co-worker as an additional support to the person under the direction of a SEI job coach and as a natural extension of the workday. Employment that occurs as a part of SEC services can be on a full or part-time basis, during traditional or non-traditional workdays, and in settings where the person is afforded the opportunity to work with others the majority of whom are without disabilities. Supports may occur anytime during a 24-hour day.

Limitations:
Payments will only be made for adaptations, supervision, and training required by a person as a result of the person's disability and will not include payment for the supervisory activities rendered as a normal part of the business setting. Documentation will be maintained that SEC services rendered un the waiver are not available under a program funded by either the Rehabilitation Act of 1973, as amended http://www.access-board.gov/enforcement/Rehab-Act-text/intro.htm or the Individuals with Disabilities Education Act
http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=108_cong_public_laws&docid=f:publ446.108.

Federal Financial Participation will not be claimed for incentive payments, subsidies, or unrelated vocational training expenses, such as incentive payments made to an employer or beneficiaries to encourage or subsidize an employer's participation in a supported employment program.

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and acquired brain injury, as defined in Utah Administrative Code R539-1.
[http://rules.utah.gov/publicat/code/r539/r539.htm]

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501
http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed contractor must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103.
http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the

Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

All of the requirements that apply under SEI shall apply to the job coach and contractor administering SEC.

Record Keeping:
Contractor of SEC shall keep a record that documents the pass through of funds and co-worker supports received by the person.

Service Code: **SED** ***Creation Date:*** 1/25/2001

Service Name: **Supported Employment in a Group** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

SED helps the person obtain, maintain, and advance in competitive employment in integrated work settings. Work groups are trained and supervised amongst employees who are not disabled at the host company or at self-contained business locations. The service is provided under the direction of a job coach. SED can be arranged on a full or part time basis, during traditional or non-traditional workdays, and in settings where the person is afforded the opportunity to work with others the majority of whom

USSDS Rates as of 12/23/2008

Unit	***Rate Type***	***Rate***
Daily	Standard	$34.76

Service Eligibility

Eligibilit	***Description***
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Supported Employment in a Group (SED) supports work groups made up of between two to eight people in their efforts to obtain, maintain, and advance in competitive employment in integrated work settings. Work groups are trained and supervised amongst employees who are not disabled at the host company or at self-contained business locations. SED is provided under the direction of a job coach. SED employment can be on a full or part time basis, during traditional or non-traditional workdays, and in settings where the person is afforded the opportunity to work with others the majority of whom are without disabilities. SED may occur anytime during a 24-hour day.

Limitations:
Payments will only be made for adaptations, supervision, and training required by an person as a result of the person's disability and will not include payment for the supervisory activities rendered as a normal part of the business setting. Documentation will be maintained that SED services rendered un the waiver are not available under a program funded by either the Rehabilitation Act of 1973, as amended, http://www.access-board.gov/enforcement/Rehab-Act-text/intro.htm or the Individuals with Disabilities Education Act.
http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=108_cong_public_laws&docid=f:publ446.108

Federal Financial Participation will not be claimed for incentive payments, subsidies, or unrelated vocational training expenses, such as incentive payments made to an employer or beneficiaries to encourage or subsidize an employer's participation in a supported employment program.

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and acquired brain injury, as defined in Utah Administrative Code R539-1.
[http://rules.utah.gov/publicat/code/r539/r539.htm]

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed contractor must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103.

http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

The Contractor must ensure that the Supported Employment staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

are without disabilities. Wages paid to persons receiving Supported Employment services shall be commensurate for other employees performing similar labor. If the Contractor pays a person less than the minimum wage, the contractor must have a Certificate pursuant to Section 14(C) of the Fair Labor Standards Act from the Federal Department of Labor permitting payment of a sub-minimum wage. [http://www.dol.gov/esa/whd/flsa/index.htm]

Contractor shall be under DHS, DSPD contract to provide Supported Employment services..

Staff Qualifications:
Staff must demonstrate competency (in the services covered by the contract), as determined by the Contractor, in addition, all applicable education, and training must be completed before performing any work for persons without supervision.

The Contractor must ensure that the Supported Employment and other support staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff rendering services under this code must be at least 18 years of age.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to perform the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions (MR.RC) and acquired brain injury (ABI).

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 13 within 6 months of employment.

1. Medication competency:
   a. Identification of common medications, their effects, purpose and side effects,
   b. Identification of medications and medication side effects specific to the person,
   c. Recording and documentation of self-administration of medications, and
   d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.

2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Principles of age appropriate community inclusion and natural support development specific to the person.
7. Preferences and non-negotiable routines specific to the person.
8. Significant functional limitations and disabling conditions specific to the person.
9. Key elements of the Americans with Disabilities Act.
10. Person centered assessment and plan development.
11. How to develop and support the person?s preferred work activities.
12. Contractor and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
   a. Effects of brain injuries on behavior,
   b. Transitioning from hospitals to community support programs including available resources,
   c. Functional impact of brain changing,
   d. Health and medication,
   e. Role of the direct care staff relating to the treatment and rehabilitation process,
   f. Treatment plan and behavioral supports, and
   g. Awareness of the Family?s perspective on the brain injury.
13. Demonstrated competency in the SLCC Employment Specialist Training or other DHS/DSPD approved Supported Employment Training Program.

SED

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.

2. Once the ISP/AP has been developed, Contractor must orient the person to that part of the plan that pertains to this service and ensure the person is involved in its implementation.

3. The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.

4. If the service is continuous, the Contractor, as a member of the person's team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Vocational Assessments: Contractor shall determine skills, interests, or behavior of persons before employment or for the re-placement of employment. Services may be provided at an approved facility or an employment site.

C. Job Development: Contractor shall conduct job development activities, including locating potential employers in the community; introducing the person to specific employers; conducting job analysis; arranging for certification; and other such activities that will enhance job development and placement opportunities. All activities must be on behalf of the person.

D. Pre-placement: Contractor may bill for time spent with, or on behalf of a person in an effort to effect enclave/mobile work crew employment for the person. If an activity on the part of the Contractor cannot be directly related to efforts to secure enclave/mobile work crew employment for a specific person, that activity will be ineligible for reimbursement under the SED service code.

Staff Support:
Actual type, frequency and duration of direct care staff support, and other community living supports will be defined in the person's ISP/AP based on the person?s selected housing arrangement and assessed needs.

Record Keeping:
SED services must be documented by attendance records and time sheets.

Service Code: SEE
Service Name: Supported Employment - Self employment
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 3/ 9/2006
Obsolete Date:
DSPD

Description:

SEE provides hourly and daily one-on-one support for persons who are working competitively to establish, maintain, and advance their self-employment in a business enterprise of their creation. The service can be full or part-time and may occur in a variety of settings but is not intended to occur in a facility setting. Staff can assist the person to create a business plan, conduct a market analysis, obtain business financing, implement the business, and manage the business finances.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$8.46

Service Eligibility

Eligibilit	Description
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

Supported Employment Enterprise (SEE) provides hourly and daily one-on-one support for persons who are working in competitively to establish, maintain, and advance their self-employment in a business enterprise of their creation. SEE can be full or part-time and may occur in a variety of settings but is not intended to occur in a facility setting. SEE staff assist the person to create a business plan, conduct a market analysis, obtain business financing, implement the business and manage the business finances. Supports may occur anytime during a 24-hour day and include training, instruction and coaching. The following is the essence of customized employment service.

Limitations:
Payments will only be made for adaptations, supervision, and training required by an person as a result of the person's disability and will not include payment for the supervisory activities rendered as a normal part of the business setting. Documentation will be maintained that SEE services rendered under the waiver are not available under a program funded by either the Rehabilitation Act of 1973 as amended [http://www.access-board.gov/enforcement/Rehab-Act-text/intro.htm]or the Persons with Disabilities Education Act.

Federal Financial Participation will not be claimed for incentive payments, subsidies, or unrelated vocational training expenses, such as incentive payments made to an employer or beneficiaries to encourage or subsidize an employer's participation in a supported employment program.

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and acquired brain injury, as defined in Utah Administrative Code R539-1.
[http://rules.utah.gov/publicat/code/r539/r539.htm]

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed contractor must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Section 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

Contractor must be enrolled as an approved Medicaid Provider with the Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

The Contractor must ensure that the Supported Employment staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Wages paid to persons receiving Supported Employment services shall be commensurate for other employees performing similar labor. If the Contractor pays a person less than the minimum wage, the contractor must have a Certificate pursuant to Section 14 (C) of the Fair Labor Standards Act from the Federal Department of Labor permitting payment of a sub-minimum wage. [http://www.dol.gov/esa/whd/flsa/index.htm]

Contractor shall be under DHS, DSPD contract to provide Supported Employment services.

Staff Qualifications:
Staff must demonstrate competency (in the services covered by the contract), as determined by the Contractor, in addition, all applicable education, and training must be completed before performing any work for persons without supervision.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff rendering services under this code must be at least 18 years of age.

Professional Staff must be licensed to provide specific services, as applicable, according to the Division of Occupational and Professional Licensing. http://www.le.state.ut.us/~code/TITLE58/TITLE58.htm

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.

2. Once the ISP/AP has been developed, the person and the Support Coordinator must orient the Contractor to that part of the plan that pertains to this service and ensure the person is involved in its implementation.

3. The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.

4. If the service is continuous, the Contractor, as a member of the person's team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Vocational Assessments: Contractor shall determine skills, interests, or behavior of persons before self-employment or for the re-placement of self-employment. Services may be provided at an approved facility or an employment site.

C. Business Enterprise Development: Contractor shall assist the person to conduct business enterprise development activities, including locating potential customers in the community; introducing the person to specific customers; conducting business development and market analyses; arranging for certification and other such activities that will enhance business enterprise development and creation opportunities, and assisting the person with the creation of a business plan. Contractor will also work with the person surrounding obtaining financing for the business and the creation of financial management and accounting systems. All activities must be on behalf of the person. It is expected that the person will normally be directly involved with each of these activities.

D. Pre-placement: Contractor may bill for time spent with, or on behalf of a person in an effort to effect self-employment for the person. If an activity on the part of the Contractor cannot be directly related to efforts to secure self-employment for a specific person, that activity will be ineligible for reimbursement under the SEE service code.

Staff Support:
Actual type, frequency and duration of direct care staff support will be defined in the person's ISP/AP based on the person?s selected housing arrangement and assessed needs.

Rate:
SEE has an hourly and daily rate. The hourly rate is determined by the person?s individual needs as specified in the

Service Code: **SEI** ***Creation Date:*** 3/ 9/2006

Service Name: **Supported Employment for an Individual** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

SEI provides supports for people who desire to obtain, maintain, and advance in competitive employment in integrated work settings. Employment that results from the service can be on a full or part time basis, during traditional or non-traditional workdays, and in settings where the person is can work with others who do not have disabilities. The person is compensated at a wage commensurate with their level of training and development as well as with the Federal vocational rehabilitation policies and regulations contained within the Fair Labor Standards Act.

USSDS Rates as of 12/23/2008

Unit	***Rate Type***	***Rate***
Quarter hour	Standard	$8.46

Service Eligibility

Eligibilit	***Description***
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

Supported Employment for an Individual (SEI) (combines SEA and SEB) provides ongoing one-on-one hourly and daily supports to persons in their efforts to obtain, maintain, and advance in competitive employment in integrated work settings. Employment that occurs as a part of SEI services can be on a full or part time basis, during traditional or non-traditional workdays, and in settings where the person is afforded the opportunity to work with others, the majority of who are without disabilities. Supports may occur anytime during a 24-hour day. Persons are compensated at a wage commensurate with their level of training and development, and are always compensated at rates consistent with Federal vocational rehabilitation policies and regulations contained within the Fair Labor Standards Act. http://www.dol.gov/esa/whd/flsa/index.htm. The nature of the person?s employment and services rendered under this code are always consistent with the strengths, weaknesses and goals indicated in his/her Individual Support Plan (ISP).

SEI is available through Provider-based services.

Limitations:
Payments will only be made for adaptations, supervision, and training required by a person as a result of the person?s disability and will not include payment for the supervisory activities rendered as a normal part of the business setting. Documentation will be maintained that SEI services rendered in the waiver are not available under a program funded by either the Rehabilitation Act of 1973, as amended, http://www.access-board.gov/enforcement/Rehab-Act-text/intro.htm; or the Individuals with Disabilities Education Act. Please refer to http://frwebgate.access.gpo.gov/cgi bin/getdoc.cgi?dbname=108_cong_public_laws&docid=f:publ446.108

Federal Financial Participation will not be claimed for incentive payments, subsidies, or unrelated vocational training expenses, such as incentive payments made to an employer or beneficiaries to encourage or subsidize an employer's participation in a supported employment program.

Population Served:
The Contractor will serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and acquired brain injury (ABI), as defined in Utah Administrative Code R539-1. http://rules.utah.gov/publicat/code/r539/r539.htm

Contractor?s Qualifications:
Contractor must have all applicable licenses as prescribed in Utah Administrative Code R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed contractor must be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm

Contractor must be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor must also agree to participate in any DHS/DSPD provided Medicaid training.

The Contractor must ensure that the Supported Employment staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.
Wages paid by employers or the Contractor to persons receiving Supported Employment services shall be commensurate to that paid to other employees performing similar labor. If the employer or the Contractor pays a person less than minimum wage, the employer or the Contractor (depending on which entity actually pays the person) must have a Certificate pursuant to Section 14 (C) of the Fair Labor Standards Act from the Federal Department of Labor permitting payment of a sub-minimum wage. [http://www.dol.gov/esa/whd/flsa/index.htm].

Contractor shall be under DHS/DSPD contract to provide Supported Employment services.

Staff Qualifications:
Staff must demonstrate competency (in the services covered by the contract), as determined by the Contractor. In addition, all applicable education and training must be completed before performing any work for persons without supervision.

The Contractor must ensure that the Supported Employment and other support staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff rendering services under this code must be at least 18 years of age.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to perform the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 13 within 6 months of employment.

1.Medication competency:
a.Identification of common medications, their effects, purpose and side effects;
b.Identification of medications and medication side effects specific to the person;
c.Recording and documentation of self-administration of medications; and,
d.Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.

2.Recognition of illness or symptoms of health deterioration specific to the person.
3.Dietary issues specific to the person.
4.Critical health care issues specific to the person.
5.Swallowing and eating difficulties specific to the person.
6.Principles of age appropriate community inclusion and natural support development specific to the person.
7.Preferences and non-negotiable routines specific to the person.
8.Significant functional limitations and disabling conditions specific to the person.
9.Key elements of the Americans with Disabilities Act.
10.Person centered assessment and plan development.
11.How to develop and support the person?s preferred work activities.
12.Contractor and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
a.Effects of brain injuries on behavior;
b.Transitioning from hospitals to community support programs including available resources;
c.Functional impact of brain changing;
d.Health and medication;
e.Role of the direct care staff relating to the treatment and rehabilitation process,
f.Treatment plan and behavioral supports; and,

g.Awareness of the Family?s perspective on the brain injury.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing the applicable portion of the ISP?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.

2. Once the ISP/AP has been developed, the Contractor must orient the person to that part of the plan that pertains to this service and ensure the person is involved in its implementation.

3. The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.

4. If the service is continuous, the Contractor, as a member of the person's team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Pre-placement: Contractor may bill for time spent with, or on behalf of a person. If the activity cannot be related to a specific person, it cannot be billed. Contractor shall bill for no more than 60 hours per person for pre-placement and re-placement activities per year. Additional hours may be added only with the prior approval of the DHS/DSPD Region Director.

1. Intake: Contractor shall meet with the person, Support Coordinator, or others in an effort to gain sufficient information on the person in order to initiate services.

2. Vocational Assessments: Contractor shall determine skills, interests, or behavior of persons before employment or for the re-placement of employment. Services may be provided at an approved facility or an employment site.

3. Job Development and Placement: Contractor shall conduct job development activities, including locating potential employers in the community; introducing the person to specific employers; conducting job analysis; arranging for certification and other such activities that will enhance job development and placement opportunities. All such activities must be on behalf of the person.

C. On-going support services: Contractor shall provide ongoing support to the person in obtaining and maintaining employment, including the following:

1. Job Skills Training: These services include on-site monitoring and training, or retraining, as needed for specific job tasks with the primary goal of reducing the need for support and promoting independence. Contractor will maintain records of the person's progress. Job skill training must be provided at a rate of at least twice monthly in order to continue billing for SEI services.

2. Job Advisement: These services include advising or discussing with the person or others any aspect of the processes of obtaining and maintaining work; developing and implementing guidelines for worker conduct in line with employer expectations; and resolving any problems in the work place. SEI services will also include development and facilitation of natural supports and teaching persons to effectively use and maintain those supports. Contractor may also advise person on the relationship between earned income and benefits (SSI, Medicaid, insurance, etc.).

3. Transportation: Contractor shall provide additional transportation (other than driving the person to the work facility which is billed using the MTP service code) that is approved in the person's ISP. Contractor may bill for their own transportation to the person's worksite for training or monitoring purposes.

D. If the person loses his or her job, the Contractor shall bill no more than 60 hours per year in investigating and effecting new job placement. Contractor shall refer the person back to the Division of Vocational Rehabilitation if the process of securing re-employment takes longer to effect than one year from the date of closure of the case by the Division of Vocation Rehabilitation.

Staff Support:
Actual type, frequency and duration of job coaching will be defined in the person's ISP/AP based on the person?s assessed needs.

Record Keeping
All services must be documented by attendance records or time sheets.

Service Code: **SL1** ***Creation Date:*** 3/28/2006

Service Name: **Supported Living Hourly - Family managed SAS** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:

SL1 provides support, supervision, training and assistance for people to live as independently as possible. This service is available to those who live alone in their own homes, with roommates, or a spouse or for adults who live with their parents or other related caregivers when the Contractor is identified as the party with the primary responsibility for maintaining the person?s health and safety. The service?s activities include maintenance of the person?s health and safety, personal care services, homemaker, chore attendant care, medication observation and recording, advocacy, communication, assistance with activities of daily living and instrumental activities of daily living, transportation to access community activities and shopping, keeping track of money and bills and using the telephone; and indirect services such as socialization, self-help and adaptive/compensatory skills development necessary to reside successfully in the community.

USSDS Rates as of 12/23/2008

Unit	***Rate Type***	***Rate***
Quarter hour	Standard	$3.67

Service Eligibility

Eligibilit	***Description***
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description: Supported Living Hourly-Family managed (SL1) provides one-on-one hourly support, supervision, training and assistance for people to live as independently as possible. This service is available to those who live alone in their own homes, with roommates, or a spouse or for adults who live with their parents or other related caregivers when the Employer (the Family) is identified as the party with the primary responsibility for maintaining the person?s health and safety. SL1 activities are prioritized based upon the person's assessed needs but always include maintenance of person health and safety, personal care services, homemaker, chore attendant care, medication observation and recording, advocacy, communication, assistance with activities of daily living and instrumental activities of daily living, transportation to access community activities and shopping, keeping track of money and bills and using the telephone; and indirect services such as socialization, self-help and adaptive/compensatory skills development necessary to reside successfully in the community. Therefore, the following codes are not available to those receiving SL1 services since these services are included in the service description for SL1:

Chore Services (CH1, CHA)
Homemaker Services (HS1 & HSQ)
Personal Assistance (PAC, PA1)
Routine, Non-medical Transportation (DTP)

Persons are excluded from receiving the following services and SL1: (Cannot bill for SL1 and the codes listed above and below)

Adult Foster Care (AFC)
Community Service Broker (CSB)
Consumer Preparation (PAP)
Family Training and Preparation Services (TFA, TF1)
Family and Individual Training and Preparation Services (TFB, TF2)
Host Home Support (HHS)
Professional Parent Supports (PPS)
Residential Habilitation Routine Support (previous Community Living Routine Support) (RHS)

Residential Habilitation Intensive Support (previous Community Living Intensive Support) (RHI)
Respite (RP1, RP2, RP3, RP4 & RP5)
Supported Living with Natural Supports (SLN)
Supported Living-Hourly (SLH)

Persons who receive SL1 may not bill for Day Support or Supported Employment services that occur during the same hours of the day.

Family Training and Preparation Services (TF1) and Family and Individual Training and Preparation Services (TF2) may be made available to persons when an exceptional care need exists, after the review and approval of the Regional Director of the DHS/DSPD region where the person is residing.

Supported Living Hourly-Family Managed (SL1) services are available only to those participating in the Self-Administered Services method.

Population Served: The Employee shall serve people currently receiving services from DHS/DSPD with mental retardation and related conditions, and adults age 18 and older with acquired brain injury, as defined in Utah Administrative Rule R539-1 (http://rules.utah.gov/publicat/code/r539/r539.htm).

Employee?s Qualifications: Employee shall provide emergency procedures for fire and other disasters.

Staff Qualifications: Staff shall demonstrate competency in providing SL1 services, as determined by the employer, in addition, all applicable education, and training shall be completed before performing any work for persons without supervision.

SL1 staff shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff shall pass a BCI background check through the Department of Human Services, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

SL1 staff shall be at least 18 years of age.

Specific Training Requirements: All direct care and direct care supervisory staff shall receive specific staff training that prepares them to complete the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 12 within 6 months of employment.

1. Medication competency:
   a. Identification of common medications, their effects, purpose and side effects,
   b. Identification of medications and medication side effects specific to the person,
   c. Recording and documentation of self-administration of medications, and
   d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.
2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Principles of age appropriate community inclusion and natural support development specific to the person.
7. Preferences and non-negotiable routines specific to the person.
8. Significant functional limitations and disabling conditions specific to the person.
9. Key elements of the American with Disabilities Act.
10. Person centered assessment and plan development.
11. How to develop and support the person?s preferred recreational and leisure activities.
12. Employers and employees providing ABI services shall demonstrate competence or awareness in the following areas:

    a. Effects of brain injuries on behavior,
    b. Transitioning from hospitals to community support programs including available resources,
    c. Functional impact of brain changing,
    d. Health and medication ,
    e. Role of the direct care staff relating to the treatment and rehabilitation process,
    f. Treatment plan and behavioral supports, and
    g. Awareness of the Family?s perspective on the brain Injury .

Direct Service Requirements:

A. Person-Centered Planning: Employees shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Employee is responsible for implementing the applicable portion of the ISP?s Action Plan (ISP/AP) These may include a Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, and data collection and/or Task Analysis sheet for skill training or other support.
2. Once the ISP/AP has been developed, the Employee shall orient the person to that part of the plan that is applicable to the Employee and ensure the person is involved in its implementation.
3. The Employee shall develop and implement Support Strategies for the person. Employee shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
4. The Employee, as a member of the person's Team, is required to assist in assessments and meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Psychotropic Medications

1. Psychotropic Medications include any drug prescribed to stabilize or improve mood, mental status, or behavior.
2. If part of the persons plan requests, and the person is taking psychotropic medications, the Employee shall complete a specific type of Support Strategy referred to as a Psychotropic Medication Plan that contains the following information:
   a. Identification of the specific medication by it generic or brand name; the date which the medication was commenced on or is to be commenced, and dosage as determined by a qualified medical professional.
   b. Identification of side effects to monitor. When antipsychotic medications are used, monitoring procedures may utilize standardized assessments instruments such as the Abnormal Involuntary Movement Scale (AIMS), which should be performed at least quarterly.
   c. A statement of specific behaviors or symptoms targeted to assess advantages and disadvantages of the prescribed psychotropic medications.
   d. Identification of other support and services that are available and would be useful in the treatment of the targeted behavior or symptom and/or any related illness or condition of the person. Such supports or services may include Behavior Support Plans, psychotherapy or laboratory studies (for example, blood work to check lithium serum, CBC, liver function).

C. Persons' Personal Funds

1. In the event of an emergency situation, a Employee may write a check to the person or the person may borrow money from the Employee. The person?s support team shall be notified and grant approval of the Employee?s actions. The Employee shall document the emergency and the person?s support team approval and maintain this documentation in the persons record. The Employee shall have policies and procedures in place to make sure a person does not continuously owe the Employee money due to emergency situations.
2. A person shall not give cash to or make purchases from the Employee . A person shall not write checks to the Employee. Only in cases of emergency, may a person write a check to repay a loan made by the Employee. Employee shall ensure the person has adequate access to personal finances in order to cover anticipated expenditures. The exceptions to persons making payments to the Employee are as follows: a) reimbursement to the Employee for destruction of property by the person, if approved by the team, and allowable by contract, and b) room and board charges.
3. The Employee staff shall not loan or give money to a person. The Employee shall not loan or give money to a person except in case of an emergency. A person shall not loan or give money to theEmployee.
4. Belongings with a purchase price or value of $50.00 or more shall be inventoried. The inventory shall also include other items of significance to the person, which may cost less than $50.00. The inventory shall be maintained on an ongoing basis and reviewed annually. Discarded items shall be deleted from the inventory list. Documentation of the reason for the deletion of an item shall be maintained and shall require the signature of the person/representative and one Employee. Personal possessions shall be released to the person/representative whenever the person moves.

D. Health and Safety Requirements

1. Employee shall assure that persons receive training, opportunities to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the Person Service Plan, as allowed by the person's Medicaid and insurance plans.
2. Employee shall assure persons receive training and assistance to:
   a. Identify primary health care practitioners and the means to contact them; and
   b. Obtain dental and physical examinations.
   c. Safely follow physician orders;
   d. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the person's physician;
   e. Document the frequency, dosage, and type of medication taken.
3. Person health information including the following:
   a. A record of all medical and /or dental examinations performed, including assessments, treatments, and prescribed medication(s),
   b. A record of all surgeries, immunizations, illnesses, chronic complaints, and significant changes in health,
   c. Authorization for any emergency medical treatment needed,
   d. A record of all medication(s) taken by the person,
   e. A record of all incidents requiring first aid and/or a referral to medical personnel or a health care facility,
   f. A record of all medication errors,
   g. A record of all accidents or injuries,
   h. A record of the reports of psychological evaluations, if any;
   i. A record of any allergies the person suffers from;
   j. A record detailing the person?s guardianship/legal status; and,

k. A record of any advance directives.

4. Medications shall be properly stored according to the person's needs and capabilities, as determined by the Team.

5. Employee shall immediately contact the appropriate medical professional to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, incorrect self-administration of medication, medication self-administered at the wrong time, or failure to follow laboratory survey schedule, etc.

a. Any medication errors that occur shall be documented in the person's file and reported to the Support Coordinator and Employee.

6. Employee shall notify the Support Coordinator and person representative within 24 hours of the development of a medical issue for any person, such as illness requiring medical appointments or an emergency room visit or confinement in an inpatient setting. This does not include medical appointments for general health check- ups.

7. Any allergies the person has shall be recorded by Employee in the person's medical record and medication self-administration records and disclosed to the person's primary physician.

E. Health and Nutrition Requirements

1. Persons shall have kitchen privileges with access to food and ingredients. Kitchen privileges may be limited if approved by the Human Rights Committee, in the interest of the person?s health.

2. Employee shall assist persons in planning meals to meet basic nutritional standards, special diets, food preferences, customs, and appetites.

F. Transportation: Employee shall provide routine transportation to shopping and other community activities, based on the Employee's and Team's reasonable, professional judgment. The Employer shall check Employee?s driver?s driving record annually and shall assure that driver?s with problematic records are not allowed to continue providing transportation as part of this service. Employers shall check annually that drivers providing transportation in their personal vehicles have current/adequate auto insurance. Employers shall keep documentation of this review and copies of the driver?s record and auto insurance in the employee?s file.

Driver?s make certain that:

1. Persons are not left unattended in the vehicle.
2. Persons use seat belts and remain seated while the vehicle is in motion.
3. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively operating a lift on vehicles that require the keys to be in the ignition to operate the lift.
4. All persons in wheelchairs use seat belts, or locking mechanisms to immobilize wheelchairs during travel.
5. Persons are transported in safety restraint seats when required by Utah State law.
6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving.
7. Persons arrive safely at the scheduled time and arranged destination, that no one is left alone along the way to or from day supports even in emergency situations or when the health and safety of others may be in question. If necessary during an emergency, the driver may wait until another driver arrives to complete the transport.

G. Access to Community Services : Employee shall assist the person in accessing community services and resources, including but not limited to finding housing, applying for food stamps, obtaining Social Security benefits, etc.

Staff Support:

SL1 is a one-to-one service for persons who require hourly support. Generally, if a person requires more than 8 hours a day HHS or RHS may be more cost effective and should be investigated. Actual type, frequency and duration of direct care staff support, and other community living supports shall be defined in the person's ISP/AP based on the person?s selected housing arrangement and assessed needs.

Service Code: **SLH** ***Creation Date:*** 1/25/2001

Service Name: **Supported Living Hourly** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

SLH provides support, supervision, training and assistance for people to live as independently as possible. This service is available to those who live alone in their own homes, with roommates, or a spouse or for adults who live with their parents or other related caregivers when the Contractor is identified as the party with the primary responsibility for maintaining the person?s health and safety. The service?s activities include maintenance of the person?s health and safety, personal care services, homemaker, chore attendant care, medication observation and recording, advocacy, communication, assistance with activities of daily living and instrumental activities of daily living, transportation to access community activities and shopping, keeping track of money and bills and using the telephone; and indirect services such as socialization, self-help and adaptive/compensatory skills development necessary to reside successfully in the community.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$5.71

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:

Supported Living Hourly (SLH) provides one-on-one hourly support, supervision, training and assistance for people to live as independently as possible. This service is available to those who live alone in their own homes, with roommates, or a spouse or for adults who live with their parents or other related caregivers when the Contractor is identified as the party with the primary responsibility for maintaining the person?s health and safety. SLH activities are prioritized based upon the person's assessed needs but always include maintenance of the person?s health and safety, personal care services, homemaker, chore attendant care, medication observation and recording, advocacy, communication, assistance with activities of daily living and instrumental activities of daily living, transportation to access community activities and shopping, keeping track of money and bills and using the telephone; and indirect services such as socialization, self-help and adaptive/compensatory skills development necessary to reside successfully in the community. Therefore, the following codes are not available to those receiving SLH services since these services are included in the service description for SLH:

Chore Services (CH1, CHA)
Homemaker Services (HS1 & HSQ)
Personal Assistance (PAC, PA1)
Routine, Non-medical Transportation (DTP)

Persons are excluded from receiving the following services and SLH: (Cannot bill for SLH and the codes listed above and below .)

Adult Foster Care (AFC)
Community Service Broker (CSB)
Consumer Preparation (PAP)
Family Training and Preparation Services (TFA)
Family and Individual Training and Preparation Services (TFB)
Host Home Support (HHS)
Professional Parent Supports (PPS)
Residential Habilitation Routine Support (previous Community Living Routine Support) (RHS)
Residential Habilitation Intensive Support (previous Community Living Intensive Support) (RHI)

Respite (RP1, RP2, RP3, RP4 & RP5)
Supported Living with Natural Supports (SLN)
Supported Living-Hourly-Family managed (SL1)

Persons who receive SLH may not bill for Day Support or Supported Employment services that occur during the same hours of the day.

Family Training and Preparation Services (TFA) and Family and Individual Training and Preparation Services (TFB) may be made available to persons when an exceptional care need exists, after the review and approval of the Regional Director of the DHS/DSPD region where the person is residing.

Population Served:
The Contractor shall serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and adults age 18 and older with acquired brain injury (ABI), as defined in Utah Administrative Code R539-1 (http://rules.utah.gov/publicat/code/r539/r539.htm).

Contractor?s Qualifications:
Contractor shall have all applicable licenses or certifications as prescribed in Utah Administrative Code R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor shall be under DHS/DPSD contract to provide SLH and certified by DHS/DSPD.

Contractor shall provide emergency procedures for fire and other disasters.

Contractor shall disclose room and board charges and food stamps or other income not originating with DHS/DSPD

A Contractor under license with DHS, Office of Licensing shall assure the presence of at least one staff trained by a certified instructor, in first aid and CPR on duty with persons at all times.

Contractor shall assure the presence of staff at each licensed site that is responsible for supervision of the day-to-day operations of the site and for operation of the program.

Administrative Requirements
Policies and Procedures: Contractor shall have established policies and procedures, a copy of which shall be maintained and readily accessible at each facility. These policies and procedures shall:
a. Establish the amount of time family or friends may stay as overnight guests;
b. Disclose board and room charges and food stamps or other income not originating with DHS/DSPD;
c. For residential providers, include emergency procedures for fire and other disasters that require the development and posting of an evacuation plan in each residential site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills;
d. Govern the handling, storage, disposal and theft prevention of medication; and,
e. Provide procedures regarding the nutrition of the person.

Staff Qualifications:
Staff shall demonstrate competency in providing SLH services, as determined by the Contractor, in addition, all applicable education, and training shall be completed before performing any work for persons without supervision.

SLH staff shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff shall pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

SLH staff shall be at least 18 years of age.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to complete the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 12 within 6 months of employment.

1. Medication competency:
a. Identification of common medications, their effects, purpose and side effects;
b. Identification of medications and medication side effects specific to the person;
c. Recording and documentation of self-administration of medications; and,
d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.

2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Principles of age appropriate community inclusion and natural support development specific to the person.
7. Preferences and non-negotiable routines specific to the person.
8. Significant functional limitations and disabling conditions specific to the person.
9. Key elements of the Americans with Disabilities Act.
10. Person centered assessment and plan development.
11. How to develop and support the person?s preferred recreational and leisure activities.
12. Contractor and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:
a. Effects of brain injuries on behavior,
b. Transitioning from hospitals to community support programs including available resources,
c. Functional impact of brain changing,
d. Health and medication,
e. Role of the direct care staff relating to the treatment and rehabilitation process,
f. Treatment plan and behavioral supports, and
g. Awareness of the family?s perspective on the brain injury.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.
1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). These may include a Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, and data collection and/or Task Analysis sheet for skill training or other support.
2. Once the ISP/AP has been developed, the Contractor shall orient the person to that part of the plan that is applicable to the Contractor and ensure the person is involved in its implementation.
3. The Contractor shall develop and implement Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
4. The Contractor, as a member of the person's team, is required to assist in assessments and meet at least annually (within 12 months of the last Person-Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.
B. Psychotropic Medications
1. Psychotropic Medications include any drug prescribed to stabilize or improve mood, mental status, or behavior.
2. If part of the persons plan requests, and the person is taking psychotropic medications, the Contractor shall complete a specific type of Support Strategy referred to as a Psychotropic Medication Plan that contains the following information:
a. Identification of the specific medication by it generic or brand name; the date on which the medication was commenced or is to be commenced, and dosage as determined by a qualified medical professional.
b. Identification of side effects to monitor. When antipsychotic medications are used, monitoring procedures may utilize standardized assessments instruments such as the Abnormal Involuntary Movement Scale (AIMS), which should be performed at least quarterly.
c. A statement of specific behaviors or symptoms targeted to assess advantages and disadvantages of the prescribed psychotropic medications.
d. Identification of other support and services that are available and would be useful in the treatment of the targeted behavior or symptom and/or any related illness or condition of the person. Such supports or services may include Behavior Support Plans, psychotherapy or laboratory studies (for example, blood work to check lithium serum, CBC, liver function).
C. Person?s Personal Funds
1. In the event of an emergency situation, a Contractor may write a check to the person or the person may borrow money from the Contractor. The person?s support team shall be notified and grant approval of the Contractor?s actions. The Contractor?s staff shall document the emergency and the person?s support team approval and maintain this documentation in the persons record. The Contractor shall have policies and procedures in place to make sure a person does not continuously owe the Contractor money due to emergency situations.
2. A person shall not give cash to or make purchases from the Contractor or Contractor?s staff. A person shall not write checks to the Contractor?s staff. Only in cases of emergency, may a person write a check to repay a loan made by the Contractor. Contractor shall ensure the person has adequate access to personal finances in order to cover anticipated expenditures. The exceptions to persons making payments to the Contractor are as follows: a) reimbursement to the Contractor for destruction of property by the person, if approved by the team, and allowable by contract; and, b) room and board charges.
3. The Contractor?s staff shall not loan or give money to a person. The Contractor shall not loan or give money to a person except in case of an emergency. A person shall not loan or give money to the Contractor?s staff or the Contractor itself.

4. Belongings with a purchase price or value of $50.00 or more shall be inventoried. The inventory shall also include other items of significance to the person, which may cost less than $50.00. The inventory shall be maintained on an ongoing basis and reviewed annually. Discarded items shall be deleted from the inventory list. Documentation of the reason for the deletion of an item shall be maintained and shall require the signature of the person/representative and one Contractor staff or two Contractor staff if the person/representative is not available. Personal possessions shall be released to the person/representative whenever the person moves.

D. Health and Safety Requirements

1. Contractor shall assure that persons receive training, opportunities to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the person?s ISP, as allowed by the person's Medicaid and insurance plans.

2. Contractor staff shall assure persons receive training and assistance to:

a. Identify primary health care practitioners and the means to contact them;
b. Obtain dental and physical examinations;
c. Safely follow physician orders;
d. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the person's physician; and,
e. Document the frequency, dosage, and type of medication taken.

3. Person?s health information including the following:

a. A record of all medical and /or dental examinations performed, including assessments, treatments, and prescribed medication(s);
b. A record of all surgeries, immunizations, illnesses, chronic complaints, and significant changes in health;
c. Authorization for any emergency medical treatment needed;
d. A record of all medication(s) taken by the person;
e. A record of all incidents requiring first aid and/or a referral to medical personnel or a health care facility;
f. A record of all medication errors.
g. A record of all accidents or injuries,
h. A record of the reports of psychological evaluations, if any;
i. A record of any allergies the person suffers from;
j. A record detailing the person?s guardianship/legal status; and,
k. A record of any advance directives.

4. Medications shall be properly stored according to the person's needs and capabilities, as determined by the team.

5. Contractor staff shall immediately contact the appropriate medical professional to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, incorrect self-administration of medication, medication self-administered at the wrong time, or failure to follow laboratory survey schedule, etc.

a. Any medication errors that occur shall be documented in the person's file and reported to the Support Coordinator and Contractor?s Director or designee.

6. Contractor shall notify the Support Coordinator and person representative within 24 hours of the development of a medical issue for any person, such as illness requiring medical appointments or an emergency room visit or confinement in an inpatient setting. This does not include medical appointments for general health check-ups.

7. Any allergies the person has shall be recorded by Contractor staff in the person's medical record and medication self-administration records and disclosed to the person's primary physician.

E. Health and Nutrition Requirements

1. Persons shall have kitchen privileges with access to food and ingredients. Kitchen privileges may be limited if approved by the Human Rights Committee, in the interest of the person?s health.

2. Contractor staff shall assist persons in planning meals to meet basic nutritional standards, special diets, food preferences, customs, and appetites.

F. Transportation

Contractor shall provide routine transportation to shopping and other community activities, based on the Contractor's and Team's reasonable, professional judgment.

The Contractor shall check driver?s driving record annually and shall assure that drivers with problematic records are not allowed to continue providing transportation as part of this service. Contractor shall check annually that drivers providing transportation in their personal vehicles have current/adequate auto insurance. Contractor shall keep documentation of this review and copies of the driver?s record and auto insurance in the employee?s file.

Drivers make certain that:

1. Persons are not left unattended in the vehicle.

2. Persons use seat belts and remain seated while the vehicle is in motion.
3. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively

operating a lift on vehicles that require the keys to be in the ignition to operate the lift.

4. All persons in wheelchairs use seat belts, or locking mechanisms to immobilize wheelchairs during travel.
5. Persons are transported in safety restraint seats when required by Utah State law.
6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving.
7. Persons arrive safely at the scheduled time and arranged destination, that no one is left alone along the way to or from day supports even in emergency situations or when the health and safety of others may be in question. If necessary during an emergency, the driver may wait until another driver arrives to complete the transport.

G. Access to Community Services

Contractor shall assist the person in accessing community services and resources, including but not limited to finding housing, applying for food stamps, obtaining Social Security benefits, etc.

Staff Support:

SLH is a one-to-one service for persons who require hourly support. Generally, if a person requires more than 8 hours of SLH services a day, HHS or RHS may be more cost effective and should be investigated. Actual type, frequency and duration of direct care staff support, and other community living supports shall be defined in the person's ISP/AP based on the person?s selected housing arrangement and assessed needs.

Population Served

Service Code: SLN
Service Name: Supported Living with Natural Supports
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
DSPD

Description:

SLN provides support, supervision, training and assistance to children and adults who live with their parents or other relatives. SLN is a reduced version of SLH and should be used when the parents or other relatives take the primary responsibility for the person?s health and safety, management of benefits, medication observation and recording, and activities of daily life. This service is available to those who live in the home of their parents or other relatives and who need intermittent support to access community, avoid isolation and to complete instrumental activities of daily living. The service may include personal care services, homemaker, chore attendant care, advocacy, communication, assistance with activities of daily living and instrumental activities of daily living, transportation to access community activities and shopping, keeping track of money and bills and using the telephone; and indirect services such as socialization, self-help and adaptive/compensatory skills development necessary to

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$5.16

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
FP	
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Supported Living with Natural Supports (SLN) provides one-on-one hourly support, supervision, training and assistance to children and adults who live with their parents or other relatives. SLN is a reduced version of SLH and should be used when the parents or other relatives take the primary responsibility for the person?s health and safety, management of benefits, medication observation and recording, and activities of daily life. This service is available to those who live in the home of their parents or other relatives and who need intermittent support to access community, avoid isolation and to complete instrumental activities of daily living. SLN may include personal care services, homemaker, chore attendant care, advocacy, communication, assistance with activities of daily living and instrumental activities of daily living, transportation to access community activities and shopping, keeping track of money and bills and using the telephone; and indirect services such as socialization, self-help and adaptive/compensatory skills development necessary to reside successfully in the community. Therefore, the following codes are not available to those receiving SLN services since these services are included in the service description for SLN:

- Chore Services (CH1, CHA)
- Homemaker Services (HS1 & HSQ)
- Personal Assistance (PAC, PA1)
- Routine, Non-medical Transportation (DTP)

Persons are excluded from receiving the following services and SLN: (Cannot bill for SLN and the codes listed above and below)

- Adult Foster Care (AFC)
- Community Service Broker (CSB)
- Consumer Preparation (PAP)
- Family Training and Preparation Services (TFA)
- Family and Individual Training and Preparation Services (TFB)
- Host Home Support (HHS)
- Professional Parent Supports (PPS)

Residential Habilitation Routine Support (previous Community Living Routine Support) (RHS)
Residential Habilitation Intensive Support (previous Community Living Intensive Support) (RHI)
Respite (RP1, RP2, RP3, RP4 & RP5)
Supported Living Hourly (SLH)
Supported Living-Hourly-Family managed (SL1)

Persons who receive SLN may not bill for Day Support or Supported Employment services that occur during the same hours of the day.

reside successfully in the community. Family Training and Preparation Services (TFA) and Family and Individual Training and Preparation Services (TFB) may be
made available to persons when an exceptional care need exists, after the review and approval of the Regional Director of the DHS/DSPD region where the person is residing.

Population Served:
The Contractor shall serve people currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and adults age 18 and older with acquired brain injury (ABI), as defined in Utah Administrative Code R539-1 (http://rules.utah.gov/publicat/code/r539/r539.htm).

Contractor?s Qualifications:
Contractor shall have all applicable licenses or certifications as prescribed in Utah Administrative Code R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor shall be under DHS, DPSD contract to provide SLN and certified by DSPD.

Contractor shall provide emergency procedures for fire and other disasters.

Staff Qualifications:
SLN staff shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute,and contract.

SLN staff shall demonstrate competency (in the services covered by the contract), as determined by the Contractor, in addition all applicable education, and training shall be completed before the delivery of any supports to persons and performing any work for persons without supervision.

Staff Qualifications:
Staff shall demonstrate competency in providing SLN services, as determined by the Contractor, in addition, all applicable education, and training shall be completed before performing any work for persons without supervision.

Staff shall pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

SLN staff shall be at least 18 years of age.

Specific Training Requirements
All direct care and direct care supervisory staff shall receive specific staff training that prepares them to perform the critical job functions for this service and orients them to the person being supported by this service. Training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas 1 through 8 within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 12 within 6 months of employment.

1. Medication competency:
a. Identification of common medications, their effects, purpose and side effects;
b. Identification of medications and medication side effects specific to the person;
c. Recording and documentation of self-administration of medications; and,
d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.

2. Recognition of illness or symptoms of health deterioration specific to the person.
3. Dietary issues specific to the person.
4. Critical health care issues specific to the person.
5. Swallowing and eating difficulties specific to the person.
6. Principles of age appropriate community inclusion and natural support development specific to the person.
7. Preferences and non-negotiable routines specific to the person.

8. Significant functional limitations and disabling conditions specific to the person.
9. Key elements of the Americans with Disabilities Act.
10. Person centered assessment and plan development.
11. How to develop and support the person?s preferred recreational and leisure activities.
12. Contractor and Contractor?s staff providing ABI services shall demonstrate competence or awareness in the following areas:

a. Effects of brain injuries on behavior;
b. Transitioning from hospitals to community support programs including available resources;
c. Functional impact of brain changing;
d. Health and medication;
e. Role of the direct care staff relating to the treatment and rehabilitation process;
f. Treatment plan and behavioral supports; and,
g. Awareness of the family?s perspective on the brain injury.

Direct Service Requirements:

A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing the applicable portion of the Individual Support Plan?s Action Plan (ISP/AP). These may include a Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, and data collection and/or Task Analysis sheet for skill training or other support.
2. Once the ISP/AP has been developed, the Contractor shall orient the person to that part of the plan that is applicable to the Contractor and ensure the person is involved in its implementation.
3. The Contractor shall develop and implement Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
4. The Contractor, as a member of the person's team, is required to assist in assessments and meet at least annually (within 12 months of the last Person-Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Person?s Personal Funds

1. In the event of an emergency situation, a Contractor may write a check to the person or the person may borrow money from the Contractor. The person?s support team shall be notified and grant approval of the Contractor?s actions. The Contractor?s staff shall document the emergency and the person?s support team approval and maintain this documentation in the persons record. The Contractor shall have policies and procedures in place to make sure a person does not continuously owe the Contractor money due to emergency situations.
2. A person shall not give cash to or make purchases from the Contractor or Contractor?s staff. A person shall not write checks to the Contractor?s staff. Only in cases of emergency, may a person write a check to repay a loan made by the Contractor. Contractor shall ensure the person has adequate access to personal finances in order to cover anticipated expenditures. The exceptions to persons making payments to the Contractor are as follows: a) reimbursement to the Contractor for destruction of property by the person, if approved by the team, and allowable by contract, and b) room and board charges.
3. The Contractor?s staff shall not loan or give money to a person. The Contractor shall not loan or give money to a person except in case of an emergency. A person shall not loan or give money to the Contractor?s staff or the Contractor itself.

Personal possessions shall be released to the person/representative whenever the person moves.

C. Health and Safety Requirements

1. Contractor staff or the person?s parent/relative shall immediately contact the appropriate medical professional to report the discovery of any prescribed medication error, including actual missed or suspected missed dosage, misadministration of medication, medication administered at the wrong time, or failure to follow laboratory survey schedule, etc.
   a. Any medication errors that occur shall be documented in the person's file and reported to the Support Coordinator and Contractor Director or designee.
2. Contractor shall notify the Support Coordinator and person representative within 24 hours of thedevelopment of a medical issue for any person, such as illness requiring medical appointments or an emergency room visit. This does not include medical appointments for general health check-ups.

D. Transportation

Contractor shall provide routine transportation to shopping and other community activities, based on the Contractor's and team's reasonable, professional judgment.

The Contractor shall check driver?s driving record annually and shall assure that drivers with problematic records are not allowed to continue providing transportation as part of this service. Contractor shall check annually that drivers providing transportation in their personal vehicles have current/adequate auto insurance. Contractor shall keep documentation of this review and copies of the driver?s record and auto insurance in the employee?s file.

Drivers make certain that:

1. Persons are not left unattended in the vehicle.
2. Persons use seat belts and remain seated while the vehicle is in motion.
3. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively

operating a lift on vehicles that require the keys to be in the ignition to operate the lift.
4. All persons in wheelchairs use seat belts, or locking mechanisms to immobilize wheelchairs during travel.
5. Persons are transported in safety restraint seats when required by Utah State law.
6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving.
7. Persons arrive safely at the scheduled time and arranged destination, that no person is left alone along the way to or from day supports even in emergency situations or when the health and safety of others may be in question. If necessary during an emergency, the driver may wait until another driver arrives to complete the transport.

E. Access to Community Services
1. Contractor shall assist the person in accessing community services and resources, including but not limited to finding housing, applying for food stamps, obtaining Social Security benefits, etc.

Staff Support:
SLN is a one-to-one service for persons who require hourly support. Actual type, frequency and duration of direct care staff support, and other community living supports shall be defined in the person's ISP/AP based on the person?s selected housing arrangement and assessed needs.

Service Code: **SM1** ***Creation Date:*** 1/25/2001

Service Name: **Specialized Medical Needs $0.00 - $5000.** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:

SM1 provides and supplies Assistive Devices including transportation devices, mobility devices, communication devices, bathing and bathroom devices, eating devices, and safety control devices up to $5000.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Personal Need	Standard	$5,000.00

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
PG	NON-MEDICAID ASSISTANCE
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

Supplies and Assistive Devices including transportation devices, mobility devices, communication devices, bathing and bathroom devices, eating devices and safety control. These services must not be available under the State plan.

Service Code: **SM2** ***Creation Date:*** 1/25/2001

Service Name: **Specialized Medical Needs $5001 - $10,000.** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:

SM2 provides and supplies Assistive Devices including transportation devices, mobility devices, communication devices, bathing and bathroom devices, eating devices, and safety control devices up to $10,000

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Personal Need	Standard	$10,000.00

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
PG	NON-MEDICAID ASSISTANCE
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

Supplies and Assistive Devices including transportation devices, mobility devices, communication devices, bathing and bathroom devices, eating devices and safety control.

These services must not be available under the State plan.

To use this code you must have prior approval from the Division.

Service Code: **SME** ***Creation Date:*** 1/25/2001

Service Name: **Specialized Medical Needs Monthly** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:
Supplies and Assistive Devices including transportation devices, mobility devices, communication devices, bathing and bathroom devices, eating devices and safety control. These services must not be available under the State plan.

USSDS Rates as of 12/23/2008

Unit	*Rate Type*	*Rate*
Month	Standard	$300.00

Service Eligibility

Eligibilit	*Description*
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other
Supplies and Assistive Devices including transportation devices, mobility devices, communication devices, bathing and bathroom devices, eating devices and safety control. These services must not be available under the State plan.

Service Code: SNF
Service Name: Special Needs Fund-Over the counter checks
Contract Type: No contract allowed for this service
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
DSPD

Description:
SNF is used for the over the counter checks issued at the Regional office level to provide emergency purchases for individuals who satisfy DSPD eligibility requirements.

The regional special needs funds are to be used at the discretion of the Regional Support Coordinator and Administration to make critical item purchases on behalf of an individual receiving services, where the item is essential to the individual?s safety, well being, or continued successful community living. No single SNF purchase may exceed $500 for over the counter checks without Finance?s prior approval, and no single SNF purchase may exceed $2000 without also the 295S payment form.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Personal Need	Standard	$2,000.00

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
PG	NON-MEDICAID ASSISTANCE
SG	SELF DETERM NON-MEDICAID

Service Code

Other
SNF is used for the over the counter checks issued at the Regional office level to provide emergency purchases for individuals who satisfy DSPD eligibility requirements.

The regional special needs funds are to be used at the discretion of the Regional Support Coordinator and Administration to make critical item purchases on behalf of an individual receiving services, where the item is essential to the individual?s safety, well being, or continued successful community living. No single SNF purchase may exceed $500 for over the counter checks without Finance?s prior approval, and no single SNF purchase may exceed $2000 without also the 295S

Service Code: **SSM** ***Creation Date:*** 1/25/2001

Service Name: **Specialized Supports/Message Therapy** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

SSM provides treatment, training, consultation, or other unique services necessary to achieve stated outcomes that are not otherwise achievable through Medicaid State Plan services or other Waiver supports, or non-traditional approaches to care that are effective in achieving desired outcomes in a manner that is cost-effective and responsible to the person?s cultural norms and desired treatment strategies.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Session	Standard	$57.72

Service Eligibility

Eligibilit	Description
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

Specialized supports will not duplicate other supports and services available to the person, must be cost effective, and must have demonstrated effectiveness for the intended use.
Message Therapy is not available under the Medicaid State Plan optional service.
Message Therapy must meet treatment requirements according to Utah Administrative Rule R156-47b.

Service Code: STC
Service Name: Residential Start Up Costs
Contract Type: No contract allowed for this service
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
DSPD

Description:
STC provides funds for activities that will be of time-limited duration or for start up costs of new programs.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Session	Standard	$4,300.00
Personal Need	Standard	$75.00

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan
N/A

Contractor Qualifications
Providers must be approved day, community living residential or residential providers and must obtain prior approval from the region.

Prior approval by the region director is required. Start-up costs are to be negotiated between the region and provider based upon the needs of the individual to establish a comfortable and functional living environment. Start-up funds are limited based upon region budgets. Individuals are encouraged to use their own funds, as much as possible, to purchase furniture

Other
DOCUMENTATION REQUIREMENTS
Division day, community living support contracts include a Start-up cost code (STC) which allows for reimbursement on an individual basis by means of a 295S billing form. Original sales slips or invoices must be attached to the billing form to

Population Served
Individuals placed in new living arrangements and/or new day support settings.

Staff to Client Ratios
N/A

Tx/Serv Requirement
Eligible purchases may include: home furniture, major and small appliances, kitchen supplies, domestic, bathroom accessories, life safety purchases, remodeling to meet individual treatment needs, rent deposits, utility hook up charges, and therapeutic supplies (this is not an inclusive list; the Region Director may approve other items not listed).
Non eligible purchases include: general supplies less than $5.00 with a useful life of less than one year, personal care items, provider business/office supplies, general program repair and yard and maintenance supplies.

Staff Requirements
N/A

Service Code: **TF1** ***Creation Date:*** 3/28/2006

Service Name: **Family Training and Preparation - Self-Administered** ***Obsolete Date:***

Contract Type: No contract allowed for this service DSPD

Residential: No

Description:
TF1 is intended primarily to help families participating in the Self-Administered Services method to acquire the skills necessary to function effectively as employers of their self-administered supports. This includes training in recruiting and selecting employees, the legal requirements for hiring and retaining employees, the methods for supervising employees, and the requirements and techniques for discharging employees.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$2.98

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Family Training and Preparation Service (TF1) services can include training families in areas such as parenting, skill training for daily living or social-leisure-recreation, collaborating with school and others to promote consistency, designing support strategies, building physical stamina and strength, nutrition, and communication. Services billed under this code are intended primarily to help families participating in the Self-Administered Services method with the acquisition of skills necessary to function effectively as employers of their self-administered supports. This includes training in the skills necessary to recruit and select employees, the legal requirements of hiring and retaining employees, methods of employee supervision, and the requirements and techniques of discharging employees. The services are intended to supplement, when necessary, the basic instruction and training offered to persons utilizing Financial Management Services (FMS) by their FMS provider. Training is provided intermittently on a consulting basis and shall not be duplicative to those services provided in school.

TF1 can be provided in or out of the client's home. These supports may include providing instructions, supervision and training to the family/care giver/client in all areas of daily living. The activities will not consist solely of supervision, companionship or observation of the individual during leisure and other community events. The supports may also include other activities that are identified in the client?s ISP/AP as necessary for continued skill development. The Contractor will ensure health and safety supports as well as other supports that lead to the desired outcome or goal of the client.

Clients are excluded from receiving the following waiver services while receiving funding for TF1:

RHS, RHI, HHS, and PPS.

TF1 is available for persons participating in the Self-Administered Services method, only.

Population Served:
The Contractor will serve clients currently receiving services from DHS/DSPD with mental retardation and related conditions as defined in Utah Administrative Rule R539-1.

Contractor?s Qualifications:
Contractor shall have all applicable licenses as prescribed in Utah Administrative Rule R501 to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

Non-licensed contractors shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Sec. 62A-5-103, UCA.

Contractor shall be enrolled as an approved Medicaid Provider with the Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractors shall also agree to participate in any DHS/DSPD provided Medicaid training.

Staff Qualifications:
All staff shall demonstrate competency (in the services covered by the contract), as determined by the Contractor. In addition all applicable education, and training shall be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Contractor shall ensure that family training and preparation staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a BCI background check through the Department of Human Services, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff providing this service must be at least 18 years of age.

Direct Service Requirements:
A. Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. The Contractor is responsible for implementing their applicable portion of the ISP?s Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.

2. Once the ISP/AP has been developed, the Contractor must orient the client to that portion of the plan that pertains to them and ensure the client is involved in its implementation.

3. The Contractor shall develop Support Strategies for the client. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.

4. In the case of services that are offered on a recurring basis, the Contractor, as a member of the client's Team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the client?s service/support requirements and to make adjustments as necessary based on the client?s needs. However, it may meet more often as determined by the client or other members of the team.

B. Health and Safety Requirements
Contractor shall assure that clients receive training in ways to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the Individual Service Plan.

Contractor staff shall assure clients receive training and assistance to:
a. Safely follow physician orders;
b. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the client's physician;
c. Document the frequency, dosage, and type of medication taken.

Contractor shall notify the Support Coordinator and Representative within 24 hours of the development of any apparent medical need for the person.

Contractor staff shall assure clients receive training and assistance to:
a. Identify primary health care practitioners; and

b. Obtain dental and physical examinations.

Limitations:
Services and supports provided through the Family Assistance and Support category are intended to accomplish a clearly defined outcome that is outlined in the individual support plan, including the expected duration of the activity and the measures to be used to gauge progress. The activities will not consist solely of supervision, companionship or observation of the individual during leisure and other community events. Family Training and Preparation services are not available to foster families. This service is not available to children in the custody of the State of Utah: Department of Human Services, Division of Child and Family Services.

Staff Support:
TF1 does not include 24-hour direct care staff support. Actual type, frequency and duration of direct care staff support will

be defined in the client's ISP/AP based on the client?s selected housing arrangement and assessed needs.

Service Code: **TFA** ***Creation Date:*** 3/ 8/2006

Service Name: **Family Training and Preparation** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

TFA is intended to supplement, when necessary, the basic instruction and training offered to persons utilizing Financial Management Services. The services can include training families in areas such as parenting, skill training for daily living or social-leisure-recreation, collaborating with school and others to promote consistency, designing support strategies, building physical stamina and strength, nutrition, and communication.

USSDS Rates as of 12/23/2008

Unit	*Rate Type*	*Rate*
Quarter hour	Standard	$3.80

Service Eligibility

Eligibilit	*Description*
BG	SPINAL CHORD GENERAL FUND
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

Family Training and Preparation Services (TFA) can include training families in areas such as parenting, skill training for daily living or social-leisure-recreation, collaborating with school and others to promote consistency, designing support strategies, building physical stamina and strength, nutrition, and communication. Services billed under this code are intended primarily to help families participating in the Self-Administered Services method with the acquisition of skills necessary to function effectively as employers of their self-administered supports. This includes training in the skills necessary to recruit and select employees, the legal requirements of hiring and retaining employees, methods of employee supervision, and the requirements and techniques of discharging employees. The services are intended to supplement, when necessary, the basic instruction and training offered to persons utilizing Financial Management Services (FMS) by their FMS provider. Training is provided intermittently on a consulting basis and shall not be duplicative to those services provided in school.

TFA can be provided in or out of the person's home. These supports may include providing instructions, supervision and training to the family/care giver/person in all areas of daily living. The activities will not consist solely of supervision, companionship or observation of the individual during leisure and other community events. The supports may also include other activities that are identified in the person?s Individual Support Plan?s Action Plan (ISP/AP) as necessary for continued skill development. The Contractor will ensure health and safety supports as well as other supports that lead to the desired outcome or goal of the person.

Persons are excluded from receiving the following waiver services while receiving funding for TFA:

RHS, RHI, HHS, and PPS.

TFA is available for persons participating in the Self-Administered Services (SAS) method only. However, TFA services are provided by the Contractor operating under an agency-based method.

Population Served:
The Contractor will serve persons currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC) as defined in Utah Administrative Code R539-1.

Contractor?s Qualifications:
Contractor shall have all applicable licenses as prescribed in Utah Administrative Code R501 to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed Contractor shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in

accordance with Utah Code Ï 62A-5-103.

Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor?s Staff Qualifications:
All staff shall demonstrate competency (in the services covered by the contract), as determined by the Contractor. In addition all applicable education and training shall be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Contractor shall ensure that family training and preparation staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff providing this service must be at least 18 years of age.

Direct Service Requirements:
A. Person-Centered Planning: Contractor?s staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.

1. Contractor is responsible for implementing their applicable portion of the ISP/AP. The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.

2. Once the ISP/AP has been developed, the Contractor must orient the person to that portion of the plan that pertains to them and ensure the person is involved in its implementation.

3. The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.

4. In the case of services that are offered on a recurring basis, the Contractor, as a member of the person's Team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Health and Safety Requirements
Contractor shall assure that persons receive training in ways to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the ISP.

Contractor?s staff shall assure persons receive training and assistance to:
a. Safely follow physician orders;
b. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the person's physician; and,
c. Document the frequency, dosage, and type of medication taken.

Contractor shall notify the Support Coordinator and Representative within 24 hours of the person developing any apparent medical need.

Contractor staff shall assure persons receive training and assistance to:
a. Identify primary health care practitioners; and
b. Obtain dental and physical examinations.

Limitations:
Services and supports provided through the Family Assistance and Support category are intended to accomplish a clearly defined outcome that is outlined in the ISP, including the expected duration of the activity and the measures to be used to gauge progress. The activities will not consist solely of supervision, companionship or observation of the individual during leisure and other community events. Family Training and Preparation services are not available to foster families. This service is not available to children in the custody of the State of Utah DHS, Division of Child and Family Services.

Staff Support:
TFA does not include 24-hour direct care staff support. Actual type, frequency and duration of direct care staff support will be defined in the person's ISP/AP based on the person?s selected housing arrangement and assessed needs.

Service Code: **TFB** ***Creation Date:*** 3/ 8/2006

Service Name: **Family and Individual Training and Preparation** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

TFB is intended for families with considerably more complex or dysfunctional issues than those receiving Family Training and Preparation (TFA) services, and may include families with multiple consumers within the family; or families receiving this service that have been assessed as requiring a more sophisticated level of training and assistance than those receiving routine TFA

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Quarter hour	Standard	$5.42

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

General Description:
Family and Individual Training and Preparation Services (TFB) are training and guidance services for covered person or family member. For purposes of this service, "family" is defined as the persons who live with or provide care to a person served on the waiver, and may include a parent, spouse, children, relatives, or in-laws. "Family? does not include individuals who are employed to care for the person. Training includes instruction about treatment regimens and use of equipment specified in the plan of care, and shall include updates as necessary to safely maintain the person at home and to maintain the integrity of the family unit. Training may also include instructions on how to access services, how to participate in the self-direction of care, how to hire, fire and evaluate service providers, consumer choices and rights, consumer's personal responsibilities and liabilities when participating in person-directed programs (e.g., billing, reviewing and approving timesheets), instruction to the family, and skills development training to the person relating to interventions to cope with problems or unique situations occurring within the family, techniques of behavioral support, social skills development, and accessing community cultural and recreational activities.

TFB is intended for families who present with considerably more complex or dysfunctional issues than those receiving Family Training and Preparation (TFA) services, and may include families with multiple consumers within the family. Or, families receiving this service have been assessed as requiring a more sophisticated level of training and assistance than those receiving routine TFA services. Services rendered under this service definition are delivered by Bachelors level staff with considerably greater training and experience than those rendering service under the TFA service definition, including specific topical training in family and individual consultation.

Services may also include those that enhance the person?s ability to exercise individual rights as a member of society through self-sufficiency and informed decision-making. Supports include: (a) Training in conflict resolution and mediation of disagreements, and forming a consensus; (b) Identifying, building, and maintaining natural supports; and, (c) Instructing and consulting with families on ways to become as self-sufficient as possible.

The TFB category may be provided to persons and their families that are participating in the Self-Administered Services method through a Contractor operating in the agency-based method.

Persons are excluded from receiving the following waiver services while receiving funding for TFB:
RHS, RHI, HHS, and PPS.

Population Served:

Contractor will serve persons currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC) as defined in Utah Administrative Code R539-1.

Contractor?s Qualifications:
Contractor shall have all applicable licenses as prescribed in Utah Administrative Code R501 to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed Contractor shall be certified by DHS/DSPD as an authorized Contractor of services to persons with disabilities in accordance with Utah Code Annotated Ï 62A-5-103.

Contractor shall be enrolled as an approved Medicaid Provider with the Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. services. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Staff Qualifications:
All staff shall demonstrate competency in the services covered by the contract, as determined by the Contractor. In addition all applicable education and training shall be completed before the delivery of any supports to persons and performing any work for persons without supervision.

Contractor shall ensure that family training and preparation staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

All Contractor staff providing TFB services must be a professional with a bachelor?s degree in social or behavioral sciences or a mental health professional with a master?s degree in social or behavioral sciences. Additionally, staff providing this service must complete a training course prescribed by DHS/DSPD and approved by the State Medicaid Agency and must demonstrate competency by successfully completing a learning assessment in related topical area(s) of:
(1) Self-determination,
(2) Natural supports, and
(3) Instruction and/or consultation with families/siblings on:
a) Assisting self sufficiency
b) Safety

Contractor?s staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All Contractor staff providing this service must be at least 18 years of age.

Direct Service Requirements:
A.Person-Centered Planning: Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.
1. Contractor is responsible for implementing their applicable portion of the Individual Support Plan/Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, Data Collection and/or Task Analysis sheet.
2. Once the ISP/AP has been developed, the Contractor must orient the person to that portion of the plan that pertains to them and ensure the person is involved in its implementation.
3. Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
4. In the case of services that are offered on a recurring basis, the Contractor, as a member of the person?s team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person?s service/support requirements and to make adjustments as necessary based on the person?s needs. However, it may meet more often as determined by the person or other members of the team.

B. Health and Safety Requirements
Contractor shall assure that persons receive training in ways to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the ISP.

Contractor staff shall assure persons receive training and assistance to:
a. Safely follow physician orders;
b. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the person?s physician; and,
c. Document the frequency, dosage, and type of medication taken.

Contractor shall notify the Support Coordinator and Representative within 24 hours of the development of any apparent medical need for the person.

Contractor?s staff shall assure persons receive training and assistance to:
a. Identify primary health care practitioners; and,
b. Obtain dental and physical examinations.

Limitations:

TFB

Services and supports provided through the TFB category are intended to accomplish a clearly defined outcome that is outlined in the ISP, including the expected duration of the activity and the measures to be used to gauge progress. The activities will not consist solely of supervision, companionship or observation of the person during leisure and other community events. TFB services are not available to foster families. This service is not available to children in the custody of the State of Utah: DHS/Division of Child and Family Services.

Staff Support:
TFB does not include 24-hour direct care staff support. Actual type, frequency and duration of direct care staff support will be defined in the person's ISP/AP based on the person?s selected housing arrangement and assessed needs.

Service Code: **UTA** ***Creation Date:*** 1/25/2001

Service Name: **Transportation Supports/Bus Pass** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

UTA helps the person access other supports which are needed for them to live in the community. The service is only provided independently when transportation is not otherwise available as an element of another service.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Month	Standard	$92.00

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

The need for transportation must be documented as necessary to fulfill other identified support in the Individual Service Plan and the associated documents.

Transportation Supports/Bus Pass will pay for the actual Bus Pass costs up to the Adult Fare.

Service Code: **UTP** ***Creation Date:*** 5/ 2/2007

Service Name: **Daily Transportation** ***Obsolete Date:***

Contract Type: Open or non-fixed dollar amount contract required DSPD

Residential: No

Description:

UTP provides daily transportation for people who receive Day Supports or Supported Employment services.

USSDS Rates as of 12/23/2008

Unit	Rate Type	Rate
Daily	Standard	$8.51

Service Eligibility

Eligibilit	Description
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Other

UTAH TRANSIT PAYMENT (UTP) The paratransit services provided under this Contract are not subject to the paratransit transportation service requirements of the Federal Transportation Administration, Department of Transportation, and Americans with Disabilities Act. Rather, this Contract is for specialized transportation needs and the paratransit services provided under it shall meet the service requirement outlined below:

General Description : Utah Transit Payment (UTP) provides transportation from the person's home or living facility to community habilitation programs or facilities that provide day supports. Persons may not be "kicked off", expelled, or suspended from MTP without prior notification by both the DHS/DSPD Support Coordinator and Region Director. The Contractor is responsible for the person, and is responsible to ensure the person arrives safely at the scheduled time and arranged destination. This may include arranging for other transportation to ensure that services are delivered as well as rendering assistance to the person that would ensure the successful completion of transportation services so that the person arrives safely at the scheduled time and arranged destination. Failure to serve the person under these terms may be cause for termination of UTP services.

Limitations : UTP is allowed only when no other transportation service is provided or available and when transportation is not otherwise available as an element of another service. UTP does not include payment for transportation to medical appointments. UTP may not be used for any person who receives a day support service that includes routine, non-medical transportation as part of the rate.

Population Served : The Contractor will serve persons currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and adults age 18 and older with acquired brain injury (ABI), as defined in Utah Administrative Code, Rule R539-1 (http://rules.utah.gov/publicat/code/r539/r539.htm).

Contractor?s Qualifications : The Contractor shall have all applicable licenses as prescribed in Utah Administrative Code, Rule R501 http://rules.utah.gov/publicat/code/r501/r501.htm to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits.

The Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. The Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

The Contractor shall be certified by DHS/DSPD to provide services not covered by applicable license as prescribed by Utah Administrative Code, Rule R501 http://rules.utah.gov/publicat/code/r501/r501.htm

UTP

The Contractor shall ensure that UTP and other support staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and Contract.

The Contractor shall check driver?s driving record annually and shall assure that drivers with problematic records are not allowed to continue providing UTP services. The Contractor shall check annually that drivers providing UTP services in their personal vehicles have current/adequate auto insurance. The Contractor shall keep documentation of this review and copies of the driver?s record and auto insurance in the driver?s file.

The Contractor shall be under DHS/DSPD ?Government? defined Contract to provide UTP and be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code Ï 62A-5-103. http://www.le.state.ut.us/~code/TITLE62A/62A05.htm.

Staff Qualifications : All staff shall demonstrate competency in providing UTP services, as determined by the Contractor, in addition all applicable education and training shall be completed before the delivery of any supports to persons and before performing any work for persons without supervision.

Drivers shall be trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and Contract.

Professional drivers shall be licensed as applicable according to the Utah Department of Motor Vehicles Licensing. All staff rendering this service shall possess current and valid driver?s licenses appropriate for the rendering of this service as required by Utah Administrative Code R708. http://rules.utah.gov/publicat/code/r708/r708.htm

UTP staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

Drivers who provide UTP shall be at least 18 years old.

Direct Service Requirements : Drivers make certain that:
1. Persons are not left unattended in the vehicle.
2. Persons remain seated while the vehicle is in motion.
3. Keys are removed from the vehicle at all time when the driver is not in the driver's seat unless the driver is actively operating a lift on vehicles that require the keys to be in the ignition to operate the lift.
4. All persons in wheelchairs use seat belts, or locking mechanisms to immobilize wheelchairs during travel.
5. Persons are transported in safety restraint seats when required by Utah State law.
6. Vehicles used for transporting persons have working door locks. Doors are locked at all times while the vehicle is moving.
7. Persons arrive safely at the scheduled time and arranged destination, that no one is left alone along the way to or from day supports even in emergency situations or when the health and safety of others may be in question. If necessary during an emergency, the driver may wait until another driver arrives to complete the UTP service.
8. Failure to serve the person under these terms may be cause for termination of this service.
9. No Show Policy: Under this service code, UTP, the Contractor agrees to not implement the no show policy with DHS/DSPD clients. In addition, the Contractor agrees to work with DHS/DSPD and it?s clients in resolving any transportation issues.

Staff Support : Actual type, frequency and duration of support will be defined in the person's Individual Support Plan/Action Plan (ISP/AP) based on the person?s assessed needs. Hours of support are established in the person?s ISP/AP.

Staff Training Requirements :
A. Unless otherwise specified, all staff performing this service shall be at least 18 years of age and have a current Commercial Drivers License. This training shall be conducted by qualified trainers with professional experience and knowledge in providing transportation services for this population
B. Staff shall complete and achieve competency in general training areas 1 through 11 within 30 days of employment or before working alone with a person. Staff competency in general training areas may be validated through reviews conducted by "Division of Health Care Financing, Utah Department of Health".
1. Emergency Procedures, when to call 911 because of emergency, incident reporting, when to call a doctor or hospital and orientation to seizure disorders.
2. Catastrophic Emergency and Civil Crisis Procedures.
3. Legal Rights of Persons with Disabilities.
4. Abuse, Neglect, and Exploitation.
5. DHS Provider Code of Conduct.
6. Confidentiality.
7. Orientation to Persons with Mental Retardation and Related Conditions (MR.RC), or Acquired Brain Injury (ABI).
8. Protective Services reporting.
9. The Contractor?s policy, philosophy, and mission.
10. Key elements of the Americans with Disabilities Act.

The Contractor is responsible to provide additional specific staff training as determined by the Contractor.

A. Quality Monitoring Process. The Contractor shall cooperate with all DHS/DSPD quality requirements. In addition, the Contractor shall have an internal quality monitoring process that may be externally validated by DHS/DSPD. At a minimum, this process shall include the following:
1. An agency self-assessment or accreditation process for DHS/DSPD funded services.
2. An established method for responding to concerns identified in the Contractor's internal monitoring and feedback processes.
3. An established method for responding to and/or correcting within specified timeframes, any areas needing improvement or any areas of non-compliance noted by DHS/DSPD.
4. Deficiencies in Quality . The Contractor shall respond within fifteen (15) working days after the notification of quality deficiencies. The Contractor shall respond to each identified deficiency, including proposed method of correction, task assignments, and supervision. The Contractor shall submit response to corrective action within the timeframe specified by DHS/DSPD.
5. If the Contractor's response is determined unacceptable by DHS/DSPD, the Contractor shall submit a revised plan of correction within five (5) working days.
6. If a revised plan of correction is unsatisfactory, DHS/DSPD may initiate sanctions pursuant to Utah Code Ï 62A-5-103(2)(i), which can be found at: http://www.le.state.ut.us/~code/TITLE62A/62A05.htm The Contractor may appeal sanctions to the DHS/DSPD Director.

B. Protective Service Investigations
1. The Contractor shall cooperate in all DHS Protective Service Investigations.
2. Unless superseded by a recommendation from protective services, if an allegation is made against a staff person, the staff person involved shall not be allowed any unsupervised contact with persons until the investigation is completed and a determination is made with regard to the allegations.

C. DHS Provider Code of Conduct. The Contractor and the Contractor?s staff are required to be familiar with and abide by the DHS Provider Code of Conduct policy prohibiting the abuse or neglect of persons with disabilities. Copies of this policy shall be maintained at each program site and annually each employee shall sign a statement acknowledging that they have read it. The DHS Provider Code of Conduct may be found at www.hspolicy.utah.gov/

D. Provider Agency or Staff as Guardian. Provider staff shall not become the legal guardian of any person receiving services under this Contract. This is a conflict of interest and a violation of the DHS Provider Code of Conduct.

Supervisory Requirements :
Incident Reports : Within 24 hours of any incident requiring a report, the Contractor shall notify both the DHS/DSPD Support Coordinator and the person?s Guardian by phone, email, or fax. Within five (5) business days of the occurrence of an incident, the Contractor shall complete a DHS/DSPD Form 1-8 Incident Report and file it with the DHS/DSPD Support Coordinator at the DHS/DSPD Region Office. However, the mandatory reporting requirements of Utah Code Ï 62-A-3-301 through 321 for adults and, Utah Code ÏÏ 62-4a-401 through 412 for children always take precedence. Therefore, in the case of actual or suspected incidents of abuse, neglect, exploitation, or maltreatment of an adult, the Contractor shall immediately notify Adult Protective Services intake or the nearest law enforcement agency, and shall immediately notify the Division of Children and Family Services Child Protective Services intake or the nearest peace officer, law enforcement agency in a case involving a child.

The following situations are incidents that require the filing of a report:
1. Significant property destruction (damage totaling $500.00 or more). Property damage shall be covered by the Contractor?s insurance unless it is agreed upon by the person's team that the person shall pay for damages,
2. Physical injury reasonably requiring a medical intervention,
3. Law enforcement involvement,
4. Any other instances the Contractor determines should be reported.

After receiving an incident report, the DHS/DSPD Support Coordinator shall review the report and refer it to Division leadership for administrative and supervisory oversight, review and remediation, if indicated.

Record Keeping : For record keeping, the Contractor shall maintain accurate supporting documentation such as transportation records, pick-up and delivery sheets and time sheets, recording the delivery of UTP services.

All Medicaid service records shall be made available for State or Federal audit and review purposes within 24 hours of request.

The Contractor providing Medicaid reimbursed home and community-based waiver services shall document all direct services provided as identified below:
1. The name of the person served,
2. The name of the person, who delivered the service,
3. The specific service provided,
4. The date the service was rendered,
5. The amount of time spent delivering the service

Records pertaining to the client using UTP services under this contract will need to be kept and items covered below shall be

kept by the Contractor for auditing purposes .
The Contractor shall maintain records of operational costs and revenue according to general accounting principles.

Reports: The Contractor shall submit the reports listed below by the specified due date. If required reports and billings are not submitted in a timely manner, payment may be denied.

DOCUMENT DUE DATE: Incident Reports. Five business days after the event.
520 Billings 30 days after the receipt of the DHS/DSPD generated 520 billings.
Response to DHS/DSPD Corrective Action when applicable. Major deficiency: within 24 hours of notification.Significant deficiency: within 10 days of notification.Minor deficiency: within 30 days of notification.