

REQUEST FOR QUALIFIED VENDOR APPLICATION AMENDMENT

Date: 3/23/2017

RFQVA No.: DDD-710000

Amendment No. 4

Arizona Department of Economic Security 1789 W Jefferson Street, Mail Drop 2HC3, Phoenix, AZ 85007

In accordance with Section 6, 6.6 Agreement Changes, the below revisions are posted for review and comment from March 23, 2017 through April 24, 2017.

Written comments and opinions on the proposed changes will be accepted until 11:59 PM (M.S.T.) on April 24, 2017 and will be considered when the changes are to be made final. The Department prefers that comments be submitted electronically through the DDD Contract Administration Unit email box at DDDContractsManager@azdes.gov. Please include on the email subject line "Proposed Changes to RFQVA # DDD 710000 A4"

REQUEST FOR QUALIFIED VENDOR APPLICATION AMENDMENT #4

EFFECTIVE May 19, 2017, THE ABOVE REFERENCED REQUEST FOR QUALIFIED VENDOR APPLICATION IS HEREBY AMENDED AS FOLLOWS:

- 1. Section 7 Service Specifications
 - a. Section 7 revised to add the service titled "Habilitation Consultation" which is hereby revised and replaced
- 2. Rate Book as posted on January 1, 2017. The January 1, 2017 Rate Book which reflects the revised Habilitation Consultation service will be updated to reflect the proposed rates as reflected on the Rate Sheet attached.

ALL OTHER REQUIREMENTS, SPECIFICATIONS, AND TERMS AND CONDITIONS

REMAIN UNCHANGED

SECTION 7

HABILITATION CONSULTATION

Service Description

Habilitation Consultation is a consultative service that is intended to complete an assessment and develop an intervention plan. The plan identifies strategies to strengthen the skills of the member and his/her family/caregivers. This service assists a member to remain in his/her home or the home of their family/caregivers and to participate in community activities by providing a variety of behavioral interventions.

Service Requirements and Limitations

- 1. This service may be provided in the following settings:
 - 1.1 The member's own home or family home, or
 - 1.2 A group home, or
 - 1.3 A state-supported or a vendor-supported developmental home (child or adult), or
 - 1.4 A community setting chosen by the member and his/her Planning Team, or
 - 1.5 An Intermediate Care Facility, or
 - 1.6 A Skilled Nursing Facility.
- 2. This service may be provided for observation and assessment purposes only in:
 - 2.1 The member's school, during school provided transportation to and from school, and the hospital.
- 3. This service shall not be provided when the member is hospitalized for acute medical needs.
- 4. The plan for this service must include:
 - 4.1 Respect for themember's preferences, favorite activities, and his/her lifestyle choices, etc.;
 - 4.2 The development of useful techniques and facilitating theuse of these techniques by caregivers for the member's benefit; and
 - 4.3 The development and facilitation of techniques, as appropriate, forincreasing the member's social skills and ability to interact withothers.
- 5. The Qualified Vendor shall ensure that the consultant staff is fully able to complete an assessment, implement the applicable intervention plan for the member and follow the protocols for managing and reporting incidents to the Division.

Service Goals and Objectives

Service Goals:

- 1. To provide an improved quality of life for the member by assisting the member in his/her environment by the teaching of alternative methods of responding to stressors and other sources of challenging behavior.
- 2. Todevelop and maintain the member's self-help, socialization and adaptive skills.
- 3. To assist planning teams and family members/caregivers in managing the member's challenging behaviors through athorough understanding of the purpose and function of a behavior.
- 4. Todevelop an intervention plan for the member derived from the assessment
- 5. To facilitate implementation of the intervention planstrategies for the members

Service Objectives:

The Qualified Vendor shall ensure that the following objectives are met:

- 1. Conduct an assessment of the member's challenging behavior or area of skill deficit.
- 2. Develop with the planning team and family members/caregivers an intervention plan.
- 3. Model the implementation of the intervention plan for the member, family members/caregivers, and/orservice providers, including the teaching of alternative or replacement behavior.
- 4. Train the member, family members/caregivers, and/or service providers in the implementation of the intervention plan and monitor their usage of the plan. The intervention planshould include specific activities for the family or other caregivers to use between visits by the consultant. The intervention plan should be written in language understandable to the family andorcaregivers.
- 5. Assist the planning team in acquiring the needed approvals of the intervention plan by the applicable Human Rights Committee and Program Review Committee pursuant to the Division's administrative rules [Arizona Administrative Code ("A.A.C.") R6-6-903 and subsequent amendments] and Division policy, including any subsequent revisions.
- 6. Review data with the planning team and other people important to the member as to the success of the intervention plan.
- 7. Providefollow-upconsultation to ensure proper implementation of the intervention plan and revise the plan asneeded.

Service Utilization Information

- 1. The assessment shall be conducted by a licensed Psychologist, a licensed Behavior Analyst, or a Board Certified Behavior Analyst ("BCBA") under the supervision of a licensed Behavior Analyst.
- 2. The development of the intervention planshall be conducted by a licensed Psychologist, a licensed Behavior Analyst, or a BCBA under the supervision of a licensed Behavior Analyst.
 - 2.1 All interventions shall be based on the principles of applied behavior analysis.
 - 2.2 Allinterventions shallrespect the rights and dignity of the member and his/her family members/caregivers.
 - 2.3 Allinterventions shall be based as much as possible on positive behavior supports and themember's ability toself-manage when supported.
- 3. The training of the member, family members/caregivers, and/or direct service staff in the implementation of the intervention plan, monitoring their usage of the plan, and revision of the plan shall be conducted by a licensed Psychologist, a licensed Behavior Analyst, or a BCBA under the supervision of a licensed Behavior Analyst.
- 4. All services shall be delivered in strict compliance with the provisions of Title 6, Chapter 6, Article 9 pertaining to "Managing Inappropriate Behaviors" of the A.A.C. and Chapter1600of the Division's Policies and Procedures Manual, including subsequent amendments/revisions.

Rate Basis

- 1. The published rate(s) for this service is available on the Division's website in the *Rate Book*.
- 2. Throughout the term of the contract, the appropriate billing codes, billing units, and associated billing rules are subject to change. All billing codes and billing units, and associated billing rules will be included in the Division's Policies and Procedures Manual, Billing Manual, published *Rate Book*, and/or other provider resources made available by the Division.

Consultant Staff Qualifications

- 1. Psychologist shall possess a current license issued by the Arizona Board of Psychologist Examiners and meet all requirements set forth in Arizona Revised Statutes ("A.R.S."). Title 32, Chapter 19.1 *et seq.*, as amended. The licensed psychologist shall have a minimum of three (3) years' experience treating and or evaluating individuals with Autism and/or Intellectual Disability.
- 2. Licensed Behavior Analyst shall possess a current license issued by the Arizona Board of Psychologist Examiners and meet all requirements set forth in A.R.S. § 32-2091.01 through 32-2091.14, asamended.

3. BCBA shall possess a current certification issued by the Behavior Analyst Certification Board as a Board Certified Behavior Analyst, and shall practice under the general supervision of a licensed Behavior Analyst who possesses a current license issued by the Arizona Board of Psychologist Examiners.

Record keeping and Reporting Requirements

- 1. The assessment and intervention plan shall be completed no later than forty-five (45) business days following theacceptance of themember's service authorization.
- 2. The Qualified Vendor shall provide the assessment report and the intervention plan to the member's Support Coordinator, the member/member's representative, and service providers nolater thanseven(7) business days upon completion.
- 3. Following the submittal of the initial intervention plan, the Qualified Vendor shall submit quarterly individualized progress reports regarding the member no later than the tenth (10^{the}) business day following the close of the quarter to the Division and the member/member's representative unless the member/member's representative has requested not to receive them. The Qualified Vendor shall refer to the Division's Provider Manual for guidance on report due dates and minimum content of thereports.
- 4. The Qualified Vendor shall maintain daily records on file as proof of the number of hours workedby its consultant staff providing direct service to the member.
 - 4.1 Each time sheet, equivalent document, or data system must contain the original signature or other independent verification (that complies with A.R.S. § 18-442) of the member/member's representative after service delivery confirming the hours worked. Proof of hours worked must be signed or verified by the member's representative before the Qualified Vendor submits the claim for payment.
- 5. The Qualified Vendor shall maintain on file documentation of required licensures and certification for each consultant providing this service.
- 6. The Qualified Vendor shall maintain data that demonstrates full compliance with all programmatic and contractual requirements of the Department and the Division.

Habilitation Consultation Rates

HCPCS Service Code	DDD Service Code	Description	Unit of Service	Multip Client		Adopted Rate	Adopted: Benchmark Ratio	
Habilitation Consultation Evaluation								
H0031	HCA	Habilitation Consultation Evaluation, (Urban)	Per-Diem	1	\$149.08	\$130.70	87.67%	
H0031	HCA	Habilitation Consultation Evaluation, (Rural)	Per-Diem	1	\$196.88	\$172.60	87.67%	
Habilitation Consultation								
0364T, 0365T, 0370T	HCM	Habilitation Consultation, Licensed Psychologist (Urban)	Half-Hour	1	\$62.39	\$54.69	87.67%	
0364T, 0365T, 0370T	HCM	Habilitation Consultation, Licensed Psychologist (Rural)	Half-Hour	1	\$73.99	\$64.86	87.67%	
0364T, 0365T, 0370T	HCM	Habilitation Consultation, Behavioral Analyst/BCBA (Urban)	Half-Hour	1	\$37.26	\$32.66	87.67%	
0364T, 0365T, 0370T	HCM	Habilitation Consultation, Behavioral Analyst/BCBA (Rural)	Half-Hour	1	\$44.72	\$39.21	87.67%	
0364T, 0365T, 0370T	HCB	Habilitation Consultation, Assistant (Urban)	Half-Hour	1	\$20.82	\$18.25	87.67%	
0364T, 0365T, 0370T	HCB	Habilitation Consultation, Assistant (Rural)	Half-Hour	1	\$25.40	\$22.27	87.67%	

HCPCS Key	Description
H00311	Mental Health Assessment by Non-Physician
0364T ²	Adaptive behavior treatment by protocol, administered by technician, face-to-face with one patient; first 30 minutes of technician time
$0365T^{2}$	Adaptive behavior treatment by protocol, administered by technician, face-to-face with one patient; each additional 30 minutes of technician time.
0370T ²	Family adaptive behavior treatment guidance, administered by physician or other QHCP (without the patient present, 30 minutes.)

¹HCA/H0031 service is limited to a maximum of 10 units. Each unit is a per diem rate based on an average of 2 hours/unit. If the Evaluation does not require the full 10 units, the extra units can be used for on-going training needs of the member.

²HCM/HCB/0364T-0370T service codes are limited to a maximum of 110 units unless there are left over units from the Evaluation.