

## **HABILITATION, EARLY CHILDHOOD AUTISM SPECIALIZED**

### **Service Description**

**HP16-00**

Services provide a variety of interventions designed to maximize the functioning of persons with developmental disabilities. Services may include, but are not limited to: habilitative therapies, special developmental skills, behavior intervention and sensorimotor development.

This bundled service consists of two components:

1. The Consultative component of this service is intended for Division members who are pre-school aged children with autism or at risk of autism. The consultative component provides behavioral supports pursuant to an Early Childhood Autism Specialized Habilitation intervention plan that assists a young child to remain in the home of his/her family/caregivers and to participate in community activities by strengthening the skills of the parents/caregivers. This service is provided in a consultative model to the child's parents/caregivers. This consultant will also provide training to the habilitation support providers providing the hourly habilitation support component of this service.
2. The Hourly Habilitation Support component of this service is designed to assist a child in acquiring, retaining, and improving the self-help, socialization, and adaptive skills necessary to reside successfully in home and community-based settings. The service includes the provision of training in independent living skills or special developmental skills, orientation and mobility training, sensorimotor development, and behavioral management.

The two components of this bundled service are authorized and billed as distinct service units delivered by the same Qualified Vendor.

### **Service Requirements and Limitations**

1. This service may be provided in the following settings:
  - 1.1 The family's home, or
  - 1.2 At the child's activity sites, or
  - 1.3 A community setting chosen by the child's representative.
2. This service shall not be provided when the child is hospitalized.
3. The Hourly Habilitation Support component of this service shall not be provided to children living in group homes, vendor-supported developmental homes (child or adult), skilled nursing facilities, non-state operated Intermediate Care Facilities ("ICFs"), or Level I or Level II behavioral health facilities. The Consultative component of this service may be provided in these settings.

4. The Hourly Habilitation Support component of this service shall not be provided in schools or in transit to schools and the Consultative component of this service may take place in school only for the limited purpose of an assessment.
5. This service shall not be provided when the child has reached the earliest age of eligibility for a first grade public school program.
6. The plan for this service shall include:
  - 6.1 Criteria for reassessment;
  - 6.2 Criteria for fading;
  - 6.3 The potential for developing and maintaining self-help, socialization, and adaptive skills;
  - 6.4 Respect for the family's/caregivers' preferences, favorite activities, and their lifestyle choices, etc.;
  - 6.5 The development of useful techniques for the child's benefit and training for parents/caregivers in the use of these techniques; and
  - 6.6 The development of techniques, as appropriate, for increasing the child's social skills and ability to interact with others.
7. The Qualified Vendor shall ensure that each consultant staff and hourly habilitation staff is fully able to implement the planning document [ e.g., Individual Support Plan ("ISP")] and applicable Early Childhood Autism Specialized Habilitation intervention plan for the child, and follows the protocols for responding to and reporting incidents to the Division.

## **Service Goals and Objectives**

### Service Goals

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

#### *Consultative Component Service Goals for Doctoral/Master's-Level and Bachelor's-Level Service Providers*

Provide an improved quality of life for the young child by targeting the core symptoms of autism and the teaching of alternative methods of responding to their environment.

*For Doctoral/Master's-level service providers only:*

1. To assist planning teams (e.g., ISP teams) and parents/caregivers in managing behaviors relating to the core symptoms of autism through a thorough understanding of the purpose and function of a behavior.
2. To develop a plan for the Early Childhood Autism Specialized Habilitation intervention derived from a behavioral assessment.
3. To determine the amount of weekly Habilitation Hourly Support required to adequately implement the Early Childhood Autism Specialized Habilitation intervention plan.

*For Bachelor's-level service providers only:*

1. To implement the strategies of the Early Childhood Autism Specialized Habilitation intervention plan.

*Hourly Habilitation Support Component Service Goals*

1. To implement the Early Childhood Autism Specialized Habilitation intervention plan.
2. To provide training to increase or maintain the child's self-help, socialization, and adaptive skills to reside and participate successfully with his/her family in his/her own community.
3. To assist the child in achieving and maintaining a quality of life that promotes the parents'/caregivers' vision for the future and priorities.
4. To adjust the dependence on this service as natural supports become available in the child's home and/or community.
5. To encourage and develop the identification and use of natural supports and reduce the need for this paid support.

*Service Objectives*

*Consultative Component Service Objectives for Doctoral/Master's-Level Service Providers*

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

1. Conduct and develop a functional behavioral analysis and proactive teaching strategies to prepare the child for age-appropriate social, sensorimotor, and learning readiness skills.
2. Develop with the planning team and parents/caregivers a plan for the Early Childhood Autism Specialized Habilitation intervention.

3. In accordance with the Early Childhood Autism Specialized Habilitation intervention plan, assist in developing individualized, time-limited outcomes that are based on assessment data and input from the member and the member's representative which allow the member to achieve his/her long-term vision for the future and priorities.
  - 3.1 Assist in developing a specific teaching strategy for each habilitation outcome within twenty (20) business days following the initiation of service for a new or a continuing placement and whenever a new outcome has been identified for the member. The specific teaching strategy for each outcome shall identify the schedule for implementation, frequency of services, data collection methods, and the steps to be followed to teach the new skill.
  - 3.2 Assist in developing changes to specific outcome(s) and/or strategies, as agreed upon by the member's planning team, based on the presence or absence of measurable progress by the member.
4. Model the implementation of the plan for parents/caregivers and/or direct service staff, including the teaching of alternative or replacement behavior(s).
5. Train parents/caregivers and/or direct service staff in the plan and assess/monitor their usage of the plan.
6. Review data with the planning team members and other people important to the child as to the success of the plan.
7. Provide follow-up consultation to ensure proper implementation of the plan and revise the plan as needed.
8. Assist the planning team in the transition from this service to other developmentally appropriate services by providing information needed to assess the child's and parents'/caregivers' ongoing needs and outcomes.
9. Provide training and support to habilitation staff as necessary to ensure implementation of the designed Early Childhood Autism Specialized Habilitation intervention plan.

*Consultative Component Service Objectives for Bachelor's-Level Service Providers*

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

1. Participate with the planning team and parents/caregivers in the implementation of an Early Childhood Autism Specialized Habilitation intervention plan.
2. Model the implementation of the plan for parents/caregivers and/or direct service staff, including the teaching of alternative or replacement behavior(s).

3. Train parents/caregivers and/or direct service staff in the plan and assess/monitor their usage of the plan.
4. Review data with the planning team members and other people important to the child as to the success of the plan.
5. Provide follow-up consultation to ensure proper implementation of the plan and revise the plan as needed.
6. Assist the planning team in the transition from this service to other developmentally appropriate services by providing information needed to assess the child's and parent's/caregiver's ongoing needs and outcomes.

Hourly Habilitation Support Component Service Objectives

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

1. In accordance with the child's planning document [e.g., Individual Support Plan (ISP)] processes, assist in revising the Early Childhood Autism Specialized Habilitation intervention plan, including:
  - 1.1 Implementing the teaching strategies of the Early Childhood Autism Specialized Habilitation intervention plan. A teaching strategy is required for each of the member's habitative outcome(s) identified by the Early Childhood Autism Specialized Habilitation intervention plan. The specific teaching strategy for each outcome identifies the schedule for implementation, the frequency and duration of services, data collection methods, and a series of steps to teach the child a single outcome.
  2. As identified in the child's planning document, provide training and/or assistance such as:
    - 2.1 Implementing strategies to address behavioral concerns as identified in the Early Childhood Autism Specialized Habilitation intervention plan;
    - 2.2 Implementing all therapeutic recommendations including speech, occupational, and physical therapy and assisting the child in following special diets, exercise routines, or other therapeutic programs;
    - 2.3 Mobility training, alternative or adaptive communication training.
3. As identified in the child's planning document, provide training and/or assistance to the parents/caregivers to increase and/or maintain targeted skill acquisition of the child.
  - 3.1 With input from the parents/caregivers and other people important to the child, develop strategies for habitative outcomes that can be carried out in context of the child's daily routine.

- 3.2 Communicate with the parents/caregivers regarding how the plan is working when the direct service staff is not present.

### **Service Utilization Information**

#### Consultative Component for Doctoral-Level, Master's-Level, and Bachelor's-Level Service Providers

1. All interventions shall be based on the principles of learning alternative behaviors.
2. All interventions shall respect the rights and dignity of the child and his/her parents/caregivers.
3. All interventions shall be based on positive behavior supports and the child's ability to self-manage when supported.
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 Arizona Administrative Code ("A.A.C.") and Chapter 1600 of the Division's Policy and Procedures Manual, including subsequent amendments/revisions.
5. Careful assessment for the amount of habilitative training is critical. Holistic evaluation of all other activities in the child's day, including school, attendant care, and respite, is necessary.

#### Hourly Habilitation Support Component

1. Utilization of this form of habilitation is determined by the professional assessment completed by the consultant.
2. All interventions shall be based on the principles of learning alternative behaviors.
3. All interventions shall respect the rights and dignity of the child and his/her parents/caregivers.
4. All interventions shall be based on positive behavior supports and the child's ability to self-manage when supported.
5. 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 Chapter 1600 of the Division's Policy and Procedures Manual, including subsequent amendments/revisions.

### **Rate Basis**

1. Published. The published rate is based on one (1) hour of direct service.

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, *RateBook*, and/or other provider resources made available by the Division.

## **Staff Qualifications**

### Consultative Component Staff Qualifications for Doctoral-Level, Master's-Level, and Bachelor's-Level Service Providers

The Consultant staff shall:

1. Have successfully completed the following:
  - 1.1 Prevention and Support Training/Client Intervention Training ("CIT") from a certified trainer;
  - 1.2 Training required by Article 9, Chapter 6, Title 6 of A.A.C., including subsequent amendments, from a certified trainer; and
2. If a Doctoral-level service provider, have at a minimum,
  - 2.1 A current license to practice psychology in the state of Arizona 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; or
  - 2.2 A current license as a Behavior Analyst from the Arizona Board of Psychologist Examiners.
3. If a Master's-level service provider, have at a minimum:
  - 3.1 A current license as a Behavior Analyst from the Arizona Board of Psychologist Examiners, or
  - 3.2 If unlicensed, must receive supervision from a Behavior Analyst (preferred) who is licensed by the Arizona Board of Psychologist Examiners, as outlined by A.R.S. 32-2091, or a licensed psychologist and have:
    - 3.2.1 A Master's degree in behavior analysis, psychology, special education, or a related field, and
    - 3.2.2 Fifteen (15) hours of graduate level coursework in behavior analysis, and
    - 3.2.3 Six (6) months of full-time, supervised employment (internship/practicum) in behavior analysis under the supervision [minimum equivalent one (1) hour per

week] of a certified behavior analyst (i.e., implementing, developing, revising behavior support plans); or

3.2.4 Current certification as a Board-Certified Behavior Analyst (“B.C.B.A.”).

4. If a Bachelor’s-level service provider, receive supervision from a Behavior Analyst (preferred) who holds a current and active license recognized by the State of Arizona Board of Psychologist Examiners or licensed psychologist and have at a minimum:
  - 4.1 A Bachelor’s degree in psychology, behavior analysis, social work, education, special education, child development, or counseling and two (2) years of full-time experience in behavioral therapy, behavioral modification, or behavioral analysis (i.e., implementing positive behavior support plans); or
  - 4.2 A Bachelor’s degree in an alternative discipline and five (5) years of full-time experience in behavioral therapy, behavioral modification, or behavioral analysis (i.e., implementing positive behavior support plans), or
  - 4.3 Current certification as a Board Certified Associate Behavior Analyst.

Hourly Habilitation Support Component Staff Qualifications

Direct service staff shall:

1. Have at least three (3) months experience implementing and documenting performance in individual programs (specific training strategies);
2. Have both three (3) months experience in providing either respite or personal care and have received training, approved by the Division, in implementing and documenting performance; or
3. Perform three (3) months of habilitation services under the direct supervision of an individual who is qualified to provide habilitation as described above.
4. Have completed additional training provided by the Qualified Vendor (with a curriculum including an applicable competency based assessment approved by the Division) on all of the following topics:
  - 4.1 Typical child development;
  - 4.2 Diagnosis of Autism (e.g., what is Autism, how is Autism identified; who can formally diagnose Autism);
  - 4.3 Treatment of Autism (e.g., types and techniques); and

- 4.4 Information specific to the child/family/caregivers as contained in the Early Childhood Autism Specialized Habilitation intervention plan.

### **Recordkeeping and Reporting Requirements**

1. The Qualified Vendor shall, with the assistance of the parents/caregivers, complete and score the Vineland Scales of Adaptive Functioning on each child enrolled in the Early Childhood Autism Specialized Habilitation Program at the beginning of treatment, at twelve (12) months of treatment, and at twenty-one (21) months of treatment.
  - 1.1 The Qualified Vendor shall also ensure that this information is sent to the Division within thirty (30) days of the date upon which the testing should be completed. This information will be used by the Division to assess the appropriateness of continued Early Childhood Autism Specialized Habilitation services during the program and upon completion of the initial two (2) years of treatment.
  - 1.2 The Division's Medical Director or designee may authorize the use of another instrument for the measurement of a child's progress while receiving this service.
2. The Qualified Vendor shall provide quarterly individualized progress reports on the child to the Division and the child's representative unless the member/member's representative has requested not to receive them. The quarter is based on calendar year and the reports are due no later than the fifteenth (15) day following the end of the quarter. The Qualified Vendor shall refer to the Division's Provider Manual for guidance on report due dates and minimum content of the reports.
3. The Qualified Vendor shall maintain on file proof of hours worked by each consultant and the hourly habilitation support service providers.
  - 3.1 Each time sheet, equivalent document, or data system must contain the original signature or other independent verification (that complies with A.R.S. § 41-132) of the child's representative after service delivery confirming the hours worked. Proof of hours worked must be signed or verified by the child's representative before the Qualified Vendor submits the claim for payment.
  - 3.2 In addition, the Qualified Vendor shall submit a monthly statement of billed activity to the child/child's representative and to the child's Support Coordinator.
4. The Qualified Vendor shall maintain on file documentation of required certification for each consultant and hourly habilitation support service providers providing this service, including both training and certification requirements.
5. The Qualified Vendor shall maintain data that demonstrates full compliance with all programmatic and contractual requirements of the Department and the Division.