The RFQVA is amended as follows:

**Section 1 – NOTICE OF REQUEST FOR QUALIFIED VENDOR APPLICATIONS**

Page 1-3, RFQVA Contact Person, is amended to replace the contact information for the RFQVA contact person.

**Section 2 – TABLE OF CONTENTS**

Page 2-1, Replace “5.11 Application and Use of Rate Book” with “5.11 Application and Use of Rate Book and Billing Manual”

**Section 5 – SERVICE REQUIREMENTS/SCOPE OF WORK**

Page 5-7, Section 5.10.3, is amended to provide for the consumers access to records

Page 5-7, Section 5.11, is amended to:
- Change the section title to “Application and Use of Rate Book and Billing Manual”
- Correct the reference to A.R.S. § 36-557.
- Include reference to the Division billing instruction manual.

**Section 6 – DES/DDD STANDARD TERMS AND CONDITIONS**

Page 6-4, Section 6.2.5, Severability, is amended to clarify that provisions within amendments are severable.

Pages 6-5 and 6-6, Section 6.3.2, Non-Discrimination, is amended to clarify non-discrimination requirements.
Page 6-7, Section 6.3.4, Notice, is amended to:
Correct a typographical error.
Specify information required on documentation submitted to the Division.

Page 6-7(a), Section 6.3.7.2 is added to include records available to consumers.

Page 6-12, Section 6.4.8.3 is amended to specify information required on documentation submitted to the Division.

Page 6-16, Section 6.6.1 Amendments, is amended to:
Provide for a notice to Qualified Vendors of amendments to the agreement.
Provide options available to Qualified Vendors to comment on, file a request for problem solving on proposed amendments to the agreement or file a notice of protest on proposed amendments to the agreement.

Page 6-16(a), Section 6.6.1.1 is amended to clarify the ability of the Division to withdraw, in whole or in part, a proposed amendment to the agreement.

Page 6-19, Section 6.7.6.1.2 is amended to clarify that state agencies are excluded from indemnity requirements.

Pages 6-19 and 6-19 (.1), Section 6.7.6.2.3.1, is amended to specify commercial insurance requirements for Therapy Providers.

Page 6-19(a), Section 6.7.6.2.3.2, is amended to include information on assistance available to Qualified Vendors with respect to automobile insurance.

Pages 6-19(b) and 6-19(c), Section 6.7.6.2, is amended to correct section numbering errors.

Page 6-19(c), Section 6.7.6.2.8.1 is amended to provide for Developmental Home subcontractors to be covered through the Provider Indemnity Program.

Page 6-24, Section 6.8.7 is amended to correct numbering error.

Pages 6-28 to 6-31, Section 6.11 Agreement Claims, is amended to:
Clarify the processes that are applicable to agreement claims.
Clarify the provisions for a grievance, protest or appeal of a proposed amendment to the agreement.

Section 7 – SERVICE SPECIFICATIONS

Page 7-38, Habilitation, Vendor supported Developmental Home, service specification is amended to clarify the service setting requirements related to eligible subcontractors that provide services.

Page 7-49, Habilitation, Community Protection and Treatment Group Home, service description is amended to clarify the supervision responsibilities for the Qualified Vendor.

Page 7-50, Habilitation, Community Protection and Treatment Group Home, service goals is amended to clarify the supervision responsibilities for the Qualified Vendor.
Pages 7-53, Habilitation, Community Protection and Treatment Group Home, rate is amended to clarify requirements for the Qualified Vendor when billing the Division for incontinence supplies.

Pages 7-53(a), Habilitation, Community Protection and Treatment Group Home, rate is amended to clarify the reference to the rate tables.

Page 7-55, Habilitation, Community Protection and Treatment Group Home, is amended to:
  - Specify the source of the rates quoted throughout the billing examples.
  - Update the specific amounts used within the billing examples.

Pages 7-61, 7-61(.1), 7-61(a) and 7-62, Habilitation, Group Home, rate, is amended to:
  - Clarify requirements for the Qualified Vendor when billing the Division for incontinence supplies.
  - Clarify the reference to the rate tables.
  - Specify the source of the rates quoted throughout the billing examples.
  - Update the specific amounts used within the billing examples.

Page 7-67, Habilitation, Nursing Supported Group Home, rate, is amended to clarify requirements for the Qualified Vendor when billing the Division for incontinence supplies.

Page 7-87, Occupational Therapy, is amended to
  - Add a service utilization guideline related to consultation/coaching model and the presence of third parties.
  - Remove reference to distance traveled within the Rate section and remove numbering.

Pages 7-91 and 7-91(a), Occupational Therapy Early Intervention, is amended to
  - Add a service utilization guideline related to consultation/coaching model and the presence of third parties.
  - Remove reference to distance traveled within the Rate section and remove numbering.

Page 7-95, Physical Therapy, is amended to
  - Add a service utilization guideline related to consultation/coaching model and the presence of third parties.
  - Remove reference to distance traveled within the Rate section and remove numbering.

Page 7-99, Physical Therapy Early Intervention, is amended to
  - Add a service utilization guideline related to consultation/coaching model and the presence of third parties.
  - Remove reference to distance traveled within the Rate section and remove numbering.

Page 7-103, Speech Therapy, is amended to
  - Add a service utilization guideline related to consultation/coaching model and the presence of third parties.
  - Remove reference to distance traveled within the Rate section and remove numbering.

Page 7-104, Speech Therapy, amended to clarify requirements for temporary licensees.

Page 7-107, Speech Therapy Early Intervention, is amended to add a service utilization guideline related to consultation/coaching model and the presence of third parties.
Page 7-108, Speech Therapy Early Intervention, is amended to
Remove reference to distance traveled within the Rate section and remove numbering.
Clarify requirements for temporary licensees.

The following pages are attached:

Revised SECTION 1 – NOTICE OF REQUEST FOR QUALIFIED VENDOR APPLICATIONS, page 1-3
Revised SECTION 2 – TABLE OF CONTENTS, page 2-1
Revised SECTION 5 – SERVICE REQUIREMENTS/SCOPE OF WORK page 5-7
Revised SECTION 6 – DES/DDD STANDARD TERMS AND CONDITIONS, pages 6-4, 6-5, 6-6, 6-7, 6-7(a), 6-12, 6-16, 6-16(a), 6-19, 6-19(.1), 6-19(a), 6-19(b), 6-19(c), 6-24 and 6-28 through 6-31
Revised SECTION 7 – SERVICE SPECIFICATIONS, pages 7-38, 7-49, 7-50, 7-53, 7-52(a), 7-55, 7-61, 7-61(.1), 7-61(a), 7-62, 7-67, 7-87, 7-91, 7-91(a), 7-95, 7-99, 7-103, 7-104, 7-107 and 7-108

THE PROVISIONS OF THIS AMENDMENT ARE SEVERABLE TO THE EXTENT THAT ANY PROVISION OR APPLICATION HELD TO BE INVALID SHALL NOT AFFECT ANY OTHER PROVISIONS OR APPLICATION OF THE CONTRACT, WHICH MAY REMAIN IN EFFECT WITHOUT THE INVALID PROVISION, OR APPLICATION.

EXCEPT AS PREVIOUSLY AMENDED, ALL OTHER PROVISIONS OF THE RFQVA SHALL REMAIN IN THEIR ENTIRETY.

NOTE: IN ACCORDANCE WITH A.R.S. § 36-557.K, RATES FOR THE SERVICES PURCHASED THROUGH THIS RFQVA ARE INCLUDED IN THE RATE BOOK, WHICH IS AVAILABLE ON THE DIVISION’S WEBSITE.

Applicant hereby acknowledges receipt and understanding of the above RFQVA amendment.

The above referenced RFQVA Amendment is hereby executed this 6th day of October, 2006, at Phoenix, Arizona.

Signed: ____________________________
Antonia Velladarez
DDD Procurement Specialist
Persons with a disability may request a reasonable accommodation by contacting the RFQVA contact person. (For TDD/TTY call through the Arizona Relay Service at 800 367-8939). Requests should be made as early as possible to allow time to arrange the accommodation.

**Agreement Type:** Qualified Vendor Agreement with Published Rate

**Agreement Term:** 12 months beginning no sooner than 7/1/03, with five one-year options for the Division to extend or renew the agreement, with all agreements ending 6/30/09. The agreement can be terminated as specified in Section 6, DES/DDD Terms and Conditions.

**RFQVA Contact Person** (email)

Contracts Manager (DDDContractsManager@azdes.gov)

_________________________ ______________________
DDD Procurement Specialist Date

AN EQUAL EMPLOYMENT OPPORTUNITY AGENCY
SECTION 2
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2. The Qualified Vendor shall maintain a file on each consumer. A consumer’s file should include the following, as applicable:
   2.1 Pertinent documents related to the consumer’s ISP such as the consumer’s ISP, the consumer’s support plan, and the consumer’s behavioral health treatment plan.
   2.2 Record of services rendered (including administration of medications) and the consumer’s response to services.
   2.3 Documentation of communications with consumer/consumer’s representative, other service providers, support coordinator, etc.
   2.4 Copy of the orientation document.
   2.5 Copy of attendance sheets.
   2.6 Copy of the monthly progress reports.
   2.7 Documentation of incidents related to the consumer and/or complaints related to the Qualified Vendor’s care of the consumer and documentation of resolution.
   2.8 All required consents, such as General Consent and/or Consent for Use of Behavior Modifying Medications.

3. All records created and maintained by the Qualified Vendor shall be made available to the consumer or their legal representative. Upon request, the Qualified Vendor shall produce a legible copy of any or all such records at no cost to the consumer or their legal representative. All records created and maintained by the Division shall be made available to the consumer or their legal representative from the Division.

5.11 Application and Use of Rate Book and Billing Manual

In accordance with A.R.S. § 36-557.K, the Division has published a rate book describing the rates and rate structure for services described in this RFQVA. The rate book is available on the Division’s website. The rate book, including any updates, is incorporated by reference into this RFQVA. Qualified Vendors shall be paid the applicable rates as reflected in the rate book.

The Division acknowledges that the rate models used to determine the Benchmark Rates do not necessarily reflect actual cost profiles. Actual patterns of expenditures by Qualified Vendors may be different from those outlined in a given rate model. The Division recognizes that assumptions in the rate models may need to be updated over time.

The Division has also published a billing instruction manual. The manual specifies the billing requirements that must be followed by providers in order to file a claim for services under this RFQVA. The billing instruction manual is available on the Division’s website. The billing instruction manual, including any updates, is incorporated by reference into this RFQVA.
6.2.4 Relationship of Parties.
The Qualified Vendor under this agreement is an independent Qualified Vendor. Neither party to this agreement shall be deemed to be the employee or agent of the other party to the agreement.

6.2.5 Severability.
The provisions of this agreement and any amendments to the agreement are severable. Any term or condition deemed illegal or invalid shall not affect any other term or condition of the agreement or the amendment.

6.2.6 No Parol Evidence.
This agreement is intended by the parties as a final and complete expression of their agreement. No course of prior dealings between the parties and no usage of the trade shall supplement or explain any terms used in this document.

6.2.7 No Waiver.
Either party’s failure to insist on strict performance of any term or condition of the agreement shall not be deemed a waiver of that term or condition even if the party accepting or acquiescing in the nonconforming performance knows of the nature of the performance and fails to object to it.

6.2.8 Headings.
The section headings used in the agreement are for reference and convenience only and shall not enter into any interpretation of the agreement.

6.3 Agreement Administration and Operation

6.3.1 Records.
6.3.1.1 Under A.R.S. § 35-214 and A.R.S. § 35-215, the Qualified Vendor shall retain and shall contractually require each subcontractor to retain all data and other records (“records”) relating to the acquisition and performance of the agreement for a period of five years after the completion of the agreement. All records shall be subject to inspection and audit by the State at reasonable times. Upon request, the Qualified Vendor shall produce a legible copy of any or all such records.

6.3.1.2 Records that relate to grievances, disputes, litigation or the settlement of claims arising out of the performance of this agreement, or costs and expenses of this agreement as to which exception has been taken by the State, shall be retained by the Qualified Vendor until such grievances, disputes, litigation, claims or exceptions have been resolved.

6.3.1.3 The Qualified Vendor shall provide all reports requested by the Department, the Division and/or the AHCCCS and all information from its records relating to the performance of this agreement that the Department, the Division and/or the AHCCCS may reasonably require. The Qualified Vendor reporting requirements hereunder may include, but are not limited to, timely and detailed utilization statistics, information and reports.

6.3.1.4 The Qualified Vendor shall follow all policies and procedures of the Division for the acceptance, retention, disposition, and accounting for client funds. The Qualified Vendor also shall develop and maintain internal policies and procedures for the administration of such funds.
6.3.1.5 The Division is responsible for submission of accurate encounters to AHCCCSA for all agreement services rendered to eligible members by the Qualified Vendor and any subcontractor. Claims filed by the Qualified Vendor are the basis of the encounter submission by the Division.

6.3.1.6 Agreement service records will be maintained in accordance with this agreement. Records shall, as applicable, meet the following standards:

6.3.1.6.1 Adequately identify the service provided;
6.3.1.6.2 Include personnel records, which contain applications for employment, job titles and descriptions, hire and termination dates, a copy of the fingerprint clearance card, wage rates, and effective dates of personnel actions affecting any of these items;
6.3.1.6.3 Include time and attendance records for individual employees to support all salaries and wages paid and claims for payment from the Division;
6.3.1.6.4 Include records of the source of all receipts and the deposit of all funds received by the Qualified Vendor;
6.3.1.6.5 Include original copies of invoices, statements, sales tickets, billings for services, deposit slips, etc., and a cash disbursement journal and cancelled checks to reflect all disbursements applicable to the agreement;
6.3.1.6.6 Include a complete general ledger with accounts for the collection of all costs and/or fees applicable to the agreement; and
6.3.1.6.7 Include copies of lease/rental contracts, mortgages and/or any other contracts, which in any way may affect agreement expenditures.

6.3.2 Non-Discrimination.

The Qualified Vendor shall comply with State Executive Order No. 99-4 and all other applicable Federal and State laws, rules and regulations, including the Americans with Disabilities Act and including:

6.3.2.1 Unless exempt under Federal law, the Qualified Vendor shall comply with Title VII of the Civil Rights Act of 1964 as amended, which prohibits discrimination on the basis of race, sex, national origin or religion. The Qualified Vendor shall comply with the Age Discrimination in Employment Act, which prohibits discrimination based on age. The Qualified Vendor shall comply with the Rehabilitation Act of 1973, as amended, which prohibits discrimination in the employment or advancement in employment of qualified persons because of physical or mental handicap. The Qualified Vendor shall comply with the requirements of the Fair Labor Standards Act of 1938, as amended.

6.3.2.2 If Qualified Vendor is an Indian Tribal Government, Qualified Vendor shall comply with the Indian Civil Rights Act of 1968. It shall be permissible for an Indian Tribal Qualified Vendor to engage in Indian preference in hiring.

6.3.2.3 The Qualified Vendor shall comply with Title VI of the Civil Rights Act of 1964, which prohibits the denial of benefits of, or participation in, services on the basis of race, color, or national origin. The Qualified Vendor shall comply with the requirements of Section 504 of the Rehabilitation Act of 1973, as amended, which prohibits discrimination on the basis of handicap, in delivering services; and with Title II of the Americans with Disabilities Act, and the Arizona Disability Act, which prohibit discrimination on the basis of physical or mental disabilities in the provision of programs, services and activities.
6.3.2.4 The following which shall be included in all publications, forms, flyers, etc. that are distributed to consumers:

“Under Titles VI and VII, of the Civil Rights Act of 1964 and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975, the (insert Qualified Vendor name here) prohibits discrimination in admissions, programs, services, activities or employment based on race, color, religion, sex, national origin, age, and disability. The (insert Qualified Vendor name here) must make a reasonable accommodation to allow a person with a disability to take part in a program, service, or activity. For example, this means that if necessary, the (insert Qualified Vendor name here) must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the (insert Qualified Vendor name here) will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program or activity because of your disability, please let us know of your disability needs in advance if at all possible. Please contact: (insert Qualified Vendor contact person and phone number here)”

6.3.3 Audit.

6.3.3.1 Pursuant to ARS § 35-214, at any time during the term of this agreement and five years thereafter, the Qualified Vendor’s and/or any subcontractor’s books and records shall be subject to audit by the State and, where applicable, the Federal Government, to the extent that the books and records relate to the performance of the agreement or subcontract.

6.3.3.2 All Qualified Vendors are subject to the programmatic and fiscal monitoring requirements of each Department program to insure accountability of the delivery of all goods and services, as required under the Federal Single Audit Act. A minimum fiscal requirement for all Qualified Vendors receiving more than $500,000 from all sources is an annual financial audit, which includes Division agreement numbers and payment amounts. Audits must be conducted in accordance with generally accepted auditing standards (GAAS). The Audit Report, Management Letter and Auditor’s Opinion must be submitted to the Division person designated to receive notices within 30 days after completion of the audit.

6.3.3.2.1 Audits of non-profit corporations receiving Federal or State monies required pursuant to Federal or State law must be conducted as provided in 31 U.S.C. Section 7501 et seq. and A.R.S. Section 35-181.03 and any other applicable statutes, rules, regulations, and standards.

6.3.3.2.2 The annual financial audit must disclose the Division lines of business (including assets, liabilities, equity, revenue, expenses, and cash flows) independent of any other lines of business in which the Qualified Vendor may be engaged. The financial statements must at least separate the Division lines of business in the form of additional supplemental schedules, if they are not separately presented in the financial statements themselves.
6.3.4 Notices.
Notices to the Qualified Vendor required by this agreement shall be made by the State via email to the email contact indicated on the Qualified Vendor Application form submitted by the Qualified Vendor. Notices to the Qualified Vendor shall be made via email only. Therefore, in order to ensure notice, the Qualified Vendor shall update the email contact and address information in the Qualified Vendor Application and directory System as necessary. Notices to the State required by the agreement shall be made by the Qualified Vendor to the Division’s Contract Manager at the following address:

Contract Management Section  
Business Operations – Site Code 791A  
Division of Developmental Disabilities  
Arizona Department of Economic Security  
P.O. Box 6123  
Phoenix, Arizona 85005

An authorized Procurement Officer or authorized Procurement Specialist and an authorized Qualified Vendor representative may change their respective person to whom notice shall be given and an amendment to the agreement shall not be necessary. All notices or other documentation supplied to the Division by the Qualified Vendor shall contain the qualified vendor number, agreement number and name of the entity.

6.3.5 Advertising and Promotion of Agreement.
The Qualified Vendor shall not advertise or publish information for commercial benefit concerning this agreement without the prior written approval of the Division.

6.3.6 Property of the State.
6.3.6.1 Any materials, including reports, computer programs and other deliverables, created under this agreement are the sole property of the State. The Qualified Vendor is not entitled to a patent or copyright on those materials and may not transfer the patent or copyright to anyone else. The Qualified Vendor shall not use or release these materials without the prior written consent of the State.

6.3.6.2 The Federal and State governments reserve a royalty-free, nonexclusive and irrevocable license to reproduce, publish, or otherwise use and to authorize others to use for Federal or State government purposes such materials, reports, data or information system, software, documentation and manuals.

6.3.6.3 At the termination of the agreement in whole or in part, the Qualified Vendor shall make available all such relevant materials, reports, data and information to the Division within 30 days following termination of the agreement or such longer period as approved by the Division.
6.3.7 Confidentiality.

6.3.7.1 The Qualified Vendor shall observe and abide by all applicable State and Federal statutes, rules and regulations regarding the use or disclosure of information including, but not limited to, information concerning applicants for and recipients of agreement services. To the extent permitted by law, the Qualified Vendor shall release information to the Department and the Attorney General’s Office as required by the terms of this agreement, by law or upon their request.

6.3.7.2 All records created and maintained by the Qualified Vendor shall be made available to the consumer or their legal representative. Upon request, the Qualified Vendor shall produce a legible copy of any or all such records at no cost to the consumer or their legal representative.
6.4.7.6 Any amounts paid to the Qualified Vendor, which are subsequently determined to be
defective pursuant to the “Certification of Cost or Pricing Data” section of these
terms and conditions;
6.4.7.7 Any payments made for services rendered before the agreement begin date or after
the agreement termination date (whether in whole or in part); and
6.4.7.8 Any amounts received by the Qualified Vendor from the Division that are identified
as a financial audit exception.

6.4.8 Reporting Requirements.
6.4.8.1 Unless otherwise provided in this agreement, reporting shall adhere to the following
schedule: no later than the 15th day following the end of each month during the
agreement term the Qualified Vendor shall submit required programmatic and
financial reports to the Division in the form set forth in the agreement or as required
by the Division. Failure to submit accurate and complete reports by the 15th day
following the end of a month may result, at the option of the Division, in retention of
payment. Failure to provide such report within 45 days following the end of a month
may result, at the option of the Division, in a forfeiture of such payment.
6.4.8.2 No later than the 45th day following the termination of this agreement in whole or in
part, the Qualified Vendor shall submit to the Division a final program and fiscal
report. Failure to submit the final program and fiscal report within the above time
period may result, at the option of the Division, in forfeiture of final payment.
6.4.8.3 All records or other documentation supplied to the Division by the Qualified Vendor
shall contain the qualified vendor number, agreement number, name of the entity and
be submitted to the person designated by the Division.
6.4.8.4 Earned income

6.4.9 Substantial Interest Disclosure.
6.4.9.1 The Qualified Vendor shall not make any payments, either directly or indirectly, to
any person, partnership, corporation, trust, or any other organization which has a
substantial interest in the Qualified Vendor’s organization or with which the
Qualified Vendor (or one of its directors, officers, owners, trust certificate holders or
a relative thereof) has a substantial interest, unless the Qualified Vendor has made a
full written disclosure of the proposed payments, including amounts, to the Division.
6.4.9.2 Leases or rental contracts or purchase of real property which would be covered by
6.4.9.1 of this section shall be in writing and accompanied by an independent
commercial appraisal of fair market rental, lease, or purchase value, as appropriate.
6.4.10 Coordination of Benefits; Third Party Liability Determination.
6.4.10.1 When applicable, the Qualified Vendor shall establish and maintain a third party pay
or identification process. The Qualified Vendor shall report to the Division any
updates to the
6.5.9.2 Any other sanctions imposed against the Division by AHCCCSA in accordance with applicable AHCCCS rules, policies, and procedures that would not have been imposed but for the Qualified Vendors action or lack thereof will be assessed dollar for dollar against the Qualified Vendor.

6.5.9.3 Sanctions imposed against the Division by AHCCCSA for failure of a Qualified Vendor or any subcontractor to submit requested disclosure statements will be assessed dollar for dollar against the Qualified Vendor.

6.5.10 Fair Hearings and Consumers’ Grievances.
6.5.10.1 The Qualified Vendor shall advise all consumers who receive services of their right, at any time and for any reason, to present to the Qualified Vendor and to the Division any grievances arising from the delivery of services, including, but not limited to, ineligibility determination, reduction of services, suspension or termination of services, or quality of services. The Division may assert its jurisdiction to hear the grievance or refer the matter to the appropriate authority.

6.5.10.2 The Qualified Vendor shall maintain a system, subject to review upon request by the Division, for reviewing and adjudicating grievances by members or subcontractors concerning the actual provision of services and payment for same by or on behalf of the Qualified Vendor. This system shall follow the grievance procedure agreed to by AHCCCSA and the Division in the current AHCCCS/Division intergovernmental agreement and the Division rules and policies.

6.5.11 Merger or Acquisition.
A proposed merger, reorganization, affiliation, or change in ownership of the Qualified Vendor shall require prior approval of the Division.

6.6 Agreement Changes
6.6.1 Amendments.
This agreement is issued under the authority of the Procurement Officer who signed this agreement. The agreement may be modified only through an agreement amendment within the scope of the agreement unless otherwise permitted by the Terms and Conditions. The Division shall provide notice to Qualified Vendors not less than thirty days prior to the issuance of an amendment to this agreement. During the thirty day posting period Qualified Vendors may submit comments on the proposed amendment to the Division, or, pursuant to section 6.11.2 herein may file a Request for Problem Solving with the Division Assistant Director or a Notice of Protest with the Department Procurement Officer. Unless otherwise provided in this agreement, after an amendment has been posted at least 30 days, the Division may issue the amendment to the agreement in whole or in part. Changes to the agreement, including the addition of work or materials, the revision of payment terms, or the substitution of work or materials, directed by an unauthorized State employee or made unilaterally by the Qualified Vendor are violations of the agreement and of applicable law. Such changes, including unauthorized written agreement amendments shall be void and without effect, and the Qualified Vendor shall not be entitled to any claim under this agreement based on those changes. If an amendment requires the signature of the Qualified Vendor, and the Qualified Vendor fails to sign and return the amendment in the form and within the timeframe specified by the Division, the Division may terminate the agreement in whole or in part.
6.6.1.1 The Division Assistant Director may withdraw an amendment in whole or in part before it has been issued, if it is determined to be in the best interest of the State.

6.6.2 Updating Information in Qualified Vendor Application and Directory System.

6.6.2.1 The Qualified Vendor shall update in the Qualified Vendor Application and Directory System the general information section of the vendor contract information component, the assurances and submittal form and associated submittals, and the program description section of the detail information component as necessary to ensure that the information is current and accurate. Any change to these items in the Qualified Vendor Application and Directory System must be approved by the Division and shall require an agreement amendment or other agreement action.

6.6.2.2 The Qualified Vendor shall update all other information in the Qualified Vendor Application and Directory System as necessary to ensure that the information is current and accurate.

6.6.2.3 If the Division finds that the information provided in the original application or as an update to the application is materially inaccurate, and the Qualified Vendor fails to correct such information within the time specified in a notice from the Division, such failure may be cause for termination of the agreement in whole or in part. The Division may remove the information from the directory until a correction is provided or the agreement is terminated.

6.6.2.4 The addition of a service to a Qualified Vendor Agreement shall require an agreement amendment.

6.6.3 Subcontracts.

The Qualified Vendor shall not enter into any subcontract for direct services under this agreement without advance notice to the Division. The subcontract shall incorporate by reference this agreement. The Qualified Vendor shall provide copies of subcontracts relating to the provision of agreement services to the Division upon request. The Qualified Vendor shall be legally responsible for agreement performance whether or not subcontractors are used. No subcontract shall operate to terminate or limit the legal responsibility of the Qualified Vendor to assure that all activities carried out by any subcontractor conform to the provisions of this agreement.

6.6.4 Assignment and Delegation.

The Qualified Vendor shall not assign any right nor delegate any duty under this agreement without advance notice to the Division.
decree. It is the specific intention of the parties that the Indemnitee shall, in all instances, except for Claims arising solely from the negligent or willful acts or omissions of the Indemnitee, be indemnified by Qualified Vendor from and against any and all claims. It is agreed that Qualified Vendor will be responsible for primary loss investigation, defense and judgment costs where this indemnification is applicable. In consideration of the award of this agreement, the Qualified Vendor agrees to waive all rights of subrogation against the State of Arizona, its officers, officials, agents and employees for losses arising from the work performed by the Qualified Vendor for the State of Arizona.

6.7.6.1.2 This indemnity shall not apply if the Qualified Vendor or subcontractor(s) is/are State of Arizona agencies, boards, commissions or universities.

6.7.6.2 Insurance Requirements

6.7.6.2.1 Qualified Vendor and subcontractors shall procure and maintain until all of their obligations have been discharged, including any warranty periods under this agreement, are satisfied, insurance against claims for injury to persons or damage to property which may arise from or in connection with the performance of the work hereunder by the Qualified Vendor, his agents, representatives, employees or subcontractors.

6.7.6.2.2 The insurance requirements herein are minimum requirements for this agreement and in no way limit the indemnity covenants contained in this agreement. The State of Arizona in no way warrants that the minimum limits contained herein are sufficient to protect the Qualified Vendor from liabilities that might arise out of the performance of the work under this agreement by the Qualified Vendor, its agents, representatives, employees or subcontractors, and Qualified Vendor is free to purchase additional insurance.

6.7.6.2.3 Minimum Scope and Limits of Insurance: Qualified Vendor shall provide coverage with limits of liability not less than those stated below:

6.7.6.2.3.1 Commercial Scope and Limits of Insurance- Occurrence Form

Policy shall include bodily injury, property damage, personal injury and broad form contractual liability coverage.

For Qualified Vendors that provide occupational, physical or speech therapy services:

- General Aggregate: $2,000,000
- Personal and Advertising Injury: $1,000,000
- Blanket Contractual Liability – Written and Oral: $1,000,000
- Fire Legal Liability: $50,000
- Each Occurrence: $1,000,000

a. The policy shall be endorsed to include the following additional insured language: “The State of Arizona and the Department of Economic Security shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Qualified Vendor”.

b. Policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Qualified Vendor.
This requirement may be satisfied if the policy is combined with the Professional Liability policy (item 6.7.6.2.3.4, below), provided that the General Liability coverage is written on an occurrence basis and certified with all of the coverage, limits and additional insured in this requirement. If written with the Professional Liability policy, the General Liability section shall have separate limits from the Professional Liability.

For all other Qualified Vendors:

- General Aggregate $2,000,000
- Products – Completed Operations Aggregate $1,000,000
- Personal and Advertising Injury $1,000,000
- Blanket Contractual Liability – Written and Oral $1,000,000
- Fire Legal Liability $50,000
- Each Occurrence $1,000,000
  
a. The policy shall be endorsed to include coverage for sexual abuse and molestation.
b. The policy shall be endorsed to include the following additional insured language: “The State of Arizona and the Department of Economic Security shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Qualified Vendor”.

c. Policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Qualified Vendor.

6.7.6.2.3.2 Automobile Liability

Bodily Injury and Property Damage for any owned, hired, and/or non-owned vehicles used in the performance of this agreement.

Combined Single Limit (CSL) $1,000,000

a. The policy shall be endorsed to include the following additional insured language: “The State of Arizona and the Department of Economic Security shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Qualified Vendor, involving automobiles owned, leased, hired or borrowed by the Qualified Vendor”.

b. For additional assistance a Qualified Vendor may contact the Department of Insurance Market Assist hotline at 602-364-3100. The Qualified Vendor may obtain assistance with sources for the Business Auto (BAP) to comply with this agreement and should specify the limit required as well as the Qualified Vendor’s status with the Division.

6.7.6.2.3.3 Worker’s Compensation and Employers’ Liability

Workers’ Compensation Statutory

Employers’ Liability:

Each Accident $ 500,000
Disease – Each Employee $ 500,000
Disease – Policy Limit $1,000,000

a. Policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Qualified Vendor.

b. This requirement shall not apply to: Separately, EACH Qualified Vendor or subcontractor exempt under A.R.S. 23-901, AND when such Qualified Vendor or subcontractor executes the appropriate waiver (Sole Proprietor/Independent Contractor) form.

6.7.6.2.3.4 Professional Liability (Errors and Omissions Liability)

Each Claim $1,000,000
Annual Aggregate $2,000,000

a. In the event that the professional liability insurance required by this agreement is written on a claims-made basis, Qualified Vendor warrants that any retroactive date under the policy shall precede the effective date of this agreement; and that either continuous coverage will be maintained or an extended discovery period will be exercised for a period of two (2) years beginning at the time work under this agreement is completed.
b. Policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Qualified Vendor.

c. The policy shall cover professional misconduct or lack of ordinary skill for those positions defined in the Scope of Work of this agreement.

6.7.6.2.4 Additional Insurance Requirements: The policies shall include, or be endorsed to include, the following provisions:

6.7.6.2.4.1 The State of Arizona and the Department of Economic Security wherever additional insured status is required such additional insured shall be covered to the full limits of liability purchased by the Qualified Vendor, even if those limits of liability are in excess of those required by this agreement.

6.7.6.2.4.2 The Qualified Vendor’s insurance coverage shall be primary insurance with respect to all other available sources.

6.7.6.2.4.3 Coverage provided by the Qualified Vendor shall not be limited to the liability assumed under the indemnification provisions of this agreement.

6.7.6.2.5 Notice of Cancellation: Each insurance policy required by the insurance provisions of this agreement shall provide the required coverage and shall not be suspended, voided, canceled, or reduced in coverage or in limits except after thirty (30) days prior written notice has been given to the State of Arizona. Such notice shall be sent directly to the Division’s Contracts Management Section and shall be sent by certified mail, return receipt requested.

6.7.6.2.6 Acceptability of Insurers: Insurance is to be placed with duly licensed or approved non-admitted insurers in the state of Arizona with an “A.M. Best” rating of not less than A- VII. The State of Arizona in no way warrants that the above-required minimum insurer rating is sufficient to protect the Qualified Vendor from potential insurer insolvency.

6.7.6.2.7 Verification of Coverage:

6.7.6.2.7.1 Qualified Vendor shall furnish the State of Arizona with certificates of insurance (ACORD form or equivalent approved by the State of Arizona) as required by this agreement. The certificates for each insurance policy are to be signed by a person authorized by that insurer to bind coverage on its behalf.

6.7.6.2.7.2 All certificates and endorsements are to be received and approved by the State of Arizona before work commences. Each insurance policy required by this agreement must be in effect at or prior to commencement of work under this agreement and remain in effect for the duration of the project. Failure to maintain the insurance policies as required by this agreement, or to provide evidence of renewal, is a material breach of agreement.
6.7.6.2.7.3 All certificates required by this agreement shall be sent directly to the Division’s Contracts Management Section. The State of Arizona project/agreement number and project description shall be noted on the certificate of insurance. The State of Arizona reserves the right to require complete, certified copies of all insurance policies required by this agreement at any time. **DO NOT SEND CERTIFICATES OF INSURANCE TO THE STATE OF ARIZONA’S RISK MANAGEMENT SECTION.**

6.7.6.2.8 Subcontractors: Qualified Vendors’ certificate(s) shall include all subcontractors as insureds under its policies or Qualified Vendor shall furnish to the State of Arizona separate certificates and endorsements for each subcontractor. All coverages for subcontractors shall be subject to the minimum requirements identified above.

6.7.6.2.8.1 Qualified Vendors that utilize subcontractors to provide Developmental Home services will be exempt from providing separate certificates and endorsements if the Qualified Vendor enters into a separate agreement between the Qualified Vendor, the Developmental Home subcontractor and the Division. Such agreement shall provide for the Developmental Home subcontractor to be covered under the Provider Indemnity Program (PIP). A sample format for the agreement may be found on the Division’s website at [www.de.state.az.us/ddd](http://www.de.state.az.us/ddd).

6.7.6.2.9 Approval: Any modification or variation from the insurance requirements in this agreement shall be made by the Department of Administration, Risk Management Section, whose decision shall be final. Such action will not require a formal agreement amendment, but may be made by administrative action.

6.7.6.2.10 Exceptions: In the event the Qualified Vendor or subcontractor(s) is/are a public entity, then the Insurance Requirements shall not apply. Such public entity shall provide a Certificate of Self-Insurance. If the Qualified Vendor or subcontractor(s) is/are a State of Arizona agency, board, commission, or university, none of the above shall apply.
6.8.5 Service Process for Wards of the State.
In the event that an individual calls or appears at a physical location of the Qualified Vendor seeking to service process (summons and complaint, petition or subpoena, etc.) upon a minor who is in the physical custody of the Qualified Vendor but is a ward of the State of Arizona, Department of Economic Security, Qualified Vendor agrees not to accept service of that/those document(s) and to refer the individual to the child’s Support Coordinator. If, by error, Qualified Vendor or its agent accepts any service of process, a copy shall immediately be forwarded to the child’s Support Coordinator and shall also contain a transmittal memorandum that indicates the date the legal document was received, the person receiving it and the place of service, as well as the child to whom it refers.

6.8.6 Gratuities.
The Qualified Vendor or its representative shall not offer or make employment or a gratuity to any officer or employee of the State for the purpose of influencing the outcome of the procurement or securing the agreement, an amendment to the agreement, or favorable treatment concerning the agreement, including the making of any determination or decision about agreement performance.

6.8.7 Suspension or Debarment.
6.8.7.1 The Qualified Vendor shall not be debarred, suspended, or otherwise lawfully prohibited from participating in any public procurement activity.
6.8.7.2 The Qualified Vendor shall not employ, consult, subcontract or otherwise reimburse for services any person or entity that is debarred, suspended or otherwise excluded from public procurement activity. This prohibition extends to any person or entity that employs, consults, subcontracts with or otherwise reimburses for services any person or entity substantially involved in the management of another entity that is debarred, suspended or otherwise excluded from public procurement activity.
6.8.7.3 The Qualified Vendor shall not retain as a director, officer, partner or owner of five percent or more of the Qualified Vendor, any person, or affiliate of such a person, who is debarred, suspended or otherwise excluded from public procurement activity.

6.8.8 Survival of Rights and Obligations after Agreement Expiration or Termination.
All representations and warranties made by the Qualified Vendor under this agreement shall survive the expiration or termination hereof. In addition, the parties hereto acknowledge that pursuant to A.R.S. § 12-510, except as provided in A.R.S. § 12-529, the State is not subject to or barred by any limitations of actions prescribed in A.R.S., Title 12, Chapter 5.

6.9 State’s Contractual Remedies
6.9.1 Right to Assurance.
If the State in good faith has reason to believe that the Qualified Vendor does not intend to, or is unable to perform or continue performing under this agreement, the Division may demand in writing that the Qualified Vendor give a written assurance of intent to perform. Failure by the Qualified Vendor to provide written assurance within the number of days
6.10.8.2 In the event of early termination, any funds advanced to the Qualified Vendor shall be returned to the Division within ten days after the date of termination or upon receipt of notice of termination of the agreement, whichever is earlier.

6.10.8.3 In the event the agreement is terminated, in whole or in part, with or without cause, or expires, the Qualified Vendor shall assist the Division in the transition of members to other Qualified Vendors in accordance with applicable rules and policies. Such assistance shall include but shall not be limited to:

6.10.8.3.1 Forwarding program and other records as may be necessary to assure the smoothest possible transition and continuity of services. The cost of reproducing and forwarding such records shall be borne by the Qualified Vendors.

6.10.8.3.2 Notifying of subcontractors and members.

6.10.8.3.3 Facilitating and scheduling medically necessary appointments for care and services.

6.10.8.3.4 Providing all reports set forth in this agreement.

6.10.8.3.5 Making provisions for continuing all management/administrative services until the transition of members is completed and all other requirements of this agreement are satisfied.

6.10.8.3.6 If required by the Division, extending performance until suitable arrangements have been made by the Division for a replacement Qualified Vendor.

6.10.8.3.7 If required by the Division, at the Qualified Vendor’s own expense, assisting in the training of personnel.

6.10.8.3.8 Paying all outstanding obligations for care rendered to members.

6.10.8.3.9 Providing the following financial reports to the Division until the Division is satisfied that the Qualified Vendor has paid all such obligations: (a) a monthly claims aging report by provider/creditor including Incurred But Not Reported (IBNR) amounts; (b) a monthly summary of cash disbursements; and (c) copies of all bank statements received by the Qualified Vendor in the preceding month for Qualified Vendor’s bank accounts. All reports in this section shall be due on the fifth day of each succeeding month for the prior month.

6.10.9 In the event the agreement is terminated in part, the Qualified Vendor shall continue the performance of the agreement to the extent not terminated.

6.11 Agreement Claims

6.11.1 Protests of the posting of a Request for Qualified Vendor Application, or the denial of one or more services included in the Qualified Vendor Application shall be resolved according to A.A.C. R-6-6-2115, and claims under this agreement shall be resolved according to A.A.C. R6-6-2116.

6.11.2 Pursuant to A.R.S. 36-557(I) all grievances, protests, and appeals relating to the notice, issuance, or content of an amendment to an Agreement shall be resolved according to the procedures in this section.
6.11.2.1 A Qualified Vendor may protest the notice, issuance or content of an amendment to an agreement by filing:
   a. A written Request for Problem Solving with the Division Assistant Director after notice of the amendment has been posted and before issuance of the amendment, or
   b. A Notice of Protest with the Department procurement officer.

6.11.2.2 Request for Problem Solving.

6.11.2.2.1 The Qualified Vendor shall include the following information in the Request for Problem Solving:
   a. Name, address, and telephone number of the protester,
   b. Signature of the protester or its representative,
   c. Identification of the notice of amendment and the RFQVA number,
   d. The specific numbered provision(s) of the amendment being protested,
   e. A statement of the legal and factual grounds of the intended protest, including copies of any relevant documents, and
   f. The relief requested.

6.11.2.2.2 The Qualified Vendor shall file the Request for Problem Solving with the Division within 30 days of the posting of the notice of amendment.

6.11.2.2.3 The Request for Problem Solving is deemed filed when the Division receives the written document. The Assistant Director shall reach a determination on the Requests for Problem Solving before issuing the amendment. No amendment may be issued until 10 days after the Assistant Director has notified the Qualified Vendor filing a Request for Problem Solving that resolution was reached or that resolution cannot be reached.

6.11.2.2.4 If resolution is reached and documented, the Qualified Vendor shall not be entitled to pursue further legal remedies with regard to the amendment at issue. If the specific numbered provision(s) of the amendment being protested is deleted from the amendment, the Request for Problem Solving shall be considered resolved.

6.11.2.2.5 If resolution cannot be reached, the Assistant Director shall issue written verification to the Qualified Vendor that the matter was not resolved. To pursue further review the Qualified Vendor may file a Notice of Protest with the Department procurement officer within 5 days of the issuance of verification.

6.11.2.3 Notice of Protest.

6.11.2.3.1 The protester shall include the following information in the Notice of Protest:
   a. Name, address, and telephone number of the protester,
   b. Signature of the protester or its representative,
   c. Identification of the notice of amendment and the RFQVA number,
   d. The specific numbered provision(s) of the amendment being protested,
   e. A statement of the legal and factual grounds of the intended protest including copies of any relevant documents, and
   f. The relief requested.

6.11.2.3.2 The Qualified Vendor shall file the Notice of Protest with the Department procurement officer within 30 days of the posting of the notice of amendment, or within 5 days of issuance of the verification of non-resolution through the Problem Solving process from the Assistant Director.
6.11.2.3.3 The Notice of Protest is deemed filed when the Department procurement officer receives the written document.

6.11.2.3.4 If the Department procurement officer makes a written determination within 5 days of receipt of the Notice of Protest that there is reasonable probability that the protest will be sustained and it serves the best interests of the state, the Department procurement officer shall notify the Division Assistant Director that the amendment may not be issued with the specific numbered provision(s) being protested that have a reasonable probability of being sustained until the Department procurement officer issues a written decision on such specific numbered provisions.

6.11.2.3.5 If the specific numbered provision(s) of the amendment being protested is deleted from the amendment, the Division Assistant Director shall notify the Department Procurement Officer, the protest shall be considered resolved, the Department Procurement Officer shall issue a written decision to that effect and the Division may issue the revised amendment.

6.11.2.3.6 If applicable, the protester shall include in the Notice of Protest a copy of the original Request for Problem Solving documentation and the written verification of non-resolution from the Assistant Director.

6.11.2.3.7 If the Department procurement officer sustains the protest, in whole or in part, and the notice, issuance or content of the amendment does not comply with applicable statutes and rules, the Department procurement officer shall implement an appropriate remedy.

6.11.2.3.8 In determining an appropriate remedy, the Department procurement officer shall consider the following:
   a. Circumstances surrounding the amendment,
   b. The degree of prejudice to other interested parties,
   c. The degree of prejudice to the integrity of the Qualified Vendor system,
   d. The good faith of the parties,
   e. The extent of performance,
   f. The costs to the state,
   g. The urgency of the amendment, and
   h. The impact of the relief on the Department's mission.

6.11.2.3.9 Within 21 days of the receipt of the protest, the Department procurement officer shall send a written decision to the protester by certified mail, return receipt requested, or by any other method that provides evidence of receipt and shall send a copy of the decision to the Division. The Department procurement officer shall explain the reasons for the conclusions reached in the decision.

6.11.2.3.10 Upon receipt of the decision from the Department procurement officer, the protester may file an appeal with the Department's Office of Appeals as authorized in A.R.S. §§ 41-1991, 41-1992(A) through (C), excluding any references to review by the Appeals Board, and A.R.S. § 41-1993(A).

6.11.2.3.11 The protester may proceed to the next level of appeal if the protester does not receive a response from the Department procurement officer within 21 days of receipt by the Department procurement officer of the Notice of Protest.
6.11.2.3.12 Upon receipt of the decision Department’s Office of Appeals, the protester may appeal pursuant to Title 41, Chapter 6, Article 10, or seek relief through the Superior Court as provided in A.R.S. § 12-901 et seq.

6.11.2.3.13 If a Protest of any specific numbered provision of an amendment is upheld pursuant to sections 6.11.2.3.7, 6.11.2.3.10 or 6.11.2.3.11 above, then that specific numbered provision shall be subject to the remedy associated with the Protest decision, but no other provision of the amendment shall be affected.
HABILITATION, VENDOR SUPPORTED DEVELOPMENTAL HOME (CHILD AND ADULT)

Service Description

This service provides a variety of interventions designed to maximize the functioning of consumers. Services may include but are not limited to: habilitative therapies, special developmental skills, behavior intervention, and sensory-motor development.

This service also provides for recruitment of homes, studies, training, monitoring, support, supervision, and recommendation of licensing/re-licensing and/or certification of child and adult developmental homes.

Service Setting

1. This service is provided to consumers who reside in licensed developmental homes (child or adult) that are subcontractors to the Qualified Vendor. Qualified Vendors cannot subcontract with themselves to provide this service.

2. This service shall not be provided when the consumer is hospitalized.

Service Goals and Objectives

Service Goals

1. To provide a broad array of support services to promote the physical, emotional, and mental well being of the consumer.

2. To enable the consumer to acquire knowledge and skills and be a member of his/her community based on his/her own choices.

3. To provide training and supervision for the consumer to increase or maintain his/her self-help, socialization, and adaptive skills to reside and participate successfully in his/her own community.

4. To develop positive relationships for consumers and their families.

5. To provide opportunities for consumers to interact socially with family, friends, and the community at large, including providing information regarding and facilitating access to community resources.

6. Assist the consumer in achieving and maintaining a quality of life that promotes the consumer’s vision of the future.
HABILITATION, COMMUNITY PROTECTION AND TREATMENT GROUP HOME

Service Description

This service provides a variety of interventions designed to maximize the functioning of consumers with intensive behavioral support needs or who otherwise meet the criteria for community protection and treatment.

In general, this service is designed to protect Community Protection and Treatment Program eligible consumers as well as the general public from possible harm and provide treatments and related supports designed to ameliorate symptoms, disorders or behaviors that have interfered with the consumer’s full inclusion in the community. The Qualified Vendor shall assume the responsibility for assuring continuous responsible supervision of Community Protection and Treatment Group Home program participants.

Services may include but are not limited to: habilitative therapies, special developmental skills, behavior intervention, and sensory-motor development. These services must capture community strengths and resources and be designed with clear and therapeutic measurable outcomes.

Community Protection and Treatment is designed to be a time-limited program based on the needs and progress of the person.

Service Setting

1. This service is provided to consumers in a residential setting that emphasizes positive behavioral supports and high level supervision and typically serves one to three consumers, one of whom must meet the definition of a Community Protection and Treatment Program participant and who voluntarily, or as directed by the court, participates in the program and abide by agreed upon restrictions stated in the consumer’s ISP.

2. This service shall not be provided when the consumer is hospitalized.

Service Goals and Objectives

The foundation for achieving all service goals and objectives will be a person-centered plan that will minimally consist of the following focuses: a common understanding of the person from a strengths/needs perspective, developing a shared vision of the future that reflects a shared commitment for a quality life for the person, a listing of the opportunities and obstacles for reaching that vision, and a review process for checking progress over time.
Service Goals

1. To provide services that facilitate treatment with interventions designed accordingly:
   1.1 To provide integrated treatment goals, objectives, and therapeutic interventions that assist program participants to function safely in society and avoid offending or re-offending.
   1.2 To provide training, therapy and supervision, whether voluntary or court ordered, for consumers to increase or maintain their self-help, socialization, and adaptive skills to better live successfully in the community and continue to remain out of prison or psychiatric settings.
   1.3 To assist the consumer in defining, achieving and maintaining a quality of life that corresponds to the consumer’s vision of the future.
   1.4 To include the consumer in both development and implementation; the program should be respectful to the consumer, with positive supports and collaboration with both the consumer and team members.

2. To provide services that facilitate protection with interventions designed accordingly:
   2.1 To provide environmental and programmatic safeguards and structures that protect the consumer as well as neighbors and community members from those behaviors that endanger the consumer, other people or property and/or interfere with the rights of others. The Qualified Vendor shall assume the responsibility for assuring continuous responsible supervision of Community Protection and Treatment Group Home program participants.
   2.2 To support consumers to make positive choices to resolve or contain the behaviors that require intensive intervention and supervision, thus reducing the need for protective measures.
   2.3 To be respectful to the consumer, with positive supports and collaboration with both the consumer and team members.

Service Objectives

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

1. In accordance with the consumer’s Person Centered Plan and ISP processes, determine the habilitation needs of the consumer in order to ensure that consumers are provided the appropriate habilitation services and other needed supports, as well as appropriate implementation strategies, and develop an individualized support plan, including:
   1.1 Establish habilitation-related service objectives based on assessment data and input from the consumer and the consumer’s representative(s).
   1.2 Develop a specific teaching/training strategy for each objective, e.g., schedule for implementation, frequency of services, teaching strategies, data collection methods.
   1.3 Based upon the presence or absence of measurable progress, make changes to objective(s) and/or strategies, as agreed upon by the Person Centered Plan or ISP team.
Rate

1. Published.

2. If at least one of the residents in the facility is authorized to receive this service, the Qualified Vendor may bill the Division the Habilitation, Community Protection and Treatment Group Home rate for all residents in the facility. Otherwise, the Qualified Vendor must bill the Division the Habilitation, Group Home rate for all residents in the facility.

3. If the resident that requires Habilitation, Community Protection and Treatment Group Home direct service hours moves out of the facility, the Qualified Vendor may continue to bill the Division at the Habilitation, Community Protection and Treatment Group Home rate for the reduced number of residents for a 60 day period, at which point the facility will be delivering Habilitation, Group Home services.

4. The daily rate for this service is based on Staff Hour unit of service. Staff Hours are the hours provided by the Qualified Vendor that the Division authorizes the Qualified Vendor to schedule and provide at the service site to assure health, safety, and the delivery of habilitation services to the residents.

5. The Division will make payments to the Qualified Vendor on the per diem basis based on the hourly rate for the Staff Hour unit of service, the number of residents in the home, and the direct service hours provided up to the number of authorized direct service hours for the home. The adopted rate on the Daily Rates schedule includes incontinent supplies or nutritional supplements as indicated.

5.1 The Qualified Vendor shall not bill the Division for incontinent supplies when the consumer:
   - Is eligible for ALTCS or AHCCCS acute care coverage, and
   - Is age 3 or older but less than 21, and
   - Has a disability that causes incontinence, and
   - Has a prescription from his/her physician for incontinence supplies.

5.2 Incontinence supplies for consumers identified in 3.1 are available from the consumer’s acute care health plan.

5.3 Incontinence supplies for consumers not identified in 3.1 are subject to prior approval from the Division. The modified rates will be approved by the Division for each consumer on a case-by-case basis.
6. The Daily Rates schedule for Habilitation, Community Protection and Treatment Group Home contains a series of tables depicting the Daily Rates. Each table represents a level of staffing with the number of direct service hours that are authorized by the Division to be provided by the Qualified Vendor at a particular group home during a week. A week is a consecutive seven day stretch of time that begins at midnight on Sunday and ends at 11:59 p.m. the following Saturday. The number of hours specified in each range represents the number of direct service hours the Qualified Vendor must provide in a week in order to bill the per diem rates associated with that range. These Daily Rates are statewide for all Habilitation, Community Protection and Treatment Group Home providers.
NOTE: In the examples presented below, all figures are obtained from the RateBook dated January 1, 2006 available on the Division’s website.

Example 1: Typical Billing

Using Range 6 of the Daily Rates schedule for Habilitation, Community Protection and Treatment Group Home as reflective of both the authorized range and the number of direct service hours delivered, and assuming three residents were present in the group home, the applicable per diem rate per resident would be $152.99.

Example 2: Qualified Vendor Provides More/Fewer Hours than Authorized

Using Range 8 of the Daily Rates schedule for Habilitation, Community Protection and Treatment Group Home as reflective of the authorized range, the Qualified Vendor is authorized to provide between 190 and 210 hours of direct service per week. As long as the Qualified Vendor’s direct service hours are within this range (whether those hours are actual weekly direct service hours or are a monthly average of weekly direct service hours), the Qualified Vendor will bill the division a per diem rate equivalent to that shown in Range 8. If, however, the Qualified Vendor delivers 185 direct hours, or fewer than the low end of Range 8, the Qualified Vendor will bill the per diem rate at Range 7, or the range reflecting the actual direct service hours that were delivered.

On the other hand, if the Qualified Vendor delivers 215 of direct service hours (whether those hours are actual weekly direct service hours or are a monthly average of weekly direct service hours), or more than those authorized in Range 8 (equivalent to 210 hours), the Qualified Vendor will continue to bill the per diem rate at Range 8, or the range reflecting the direct service hours that were authorized by the Division.

Example 3: Different Number of Residents

Using Range 6 of the Daily Rates schedule for Habilitation, Community Protection and Treatment Group Home as reflective of both the authorized range and the number of direct service hours delivered, and assuming three residents were present in the group home, the applicable per diem rate per resident would be $152.99.

Assume on day two of the week one resident leaves, until an adjustment is made and unless the Qualified Vendor reduces the number of direct service hours for the remaining two residents, the Qualified Vendor shall bill the Division a per diem rate based the authorized range of hours (Range 6) and two residents. Therefore, starting with day two of the week and until an adjustment is made in the authorized direct service hours, the Qualified Vendor shall bill the Division a per diem rate of $229.49 for the remaining two residents.
or nutritional supplements as indicated.

3.1 The Qualified Vendor shall not bill the Division for incontinent supplies when the consumer:

- Is eligible for ALTCS or AHCCCS acute care coverage, and
- Is age 3 or older but less than 21, and
- Has a disability that causes incontinence, and
- Has a prescription from his/her physician for incontinence supplies.

3.2 Incontinence supplies for consumers identified in 3.1 are available from the consumer’s acute care health plan.

3.3 Incontinence supplies for consumers not identified in 3.1 are subject to prior approval from the Division. The modified rates will be approved by the Division for each consumer on a case-by-case basis.

4. The Daily Rates schedule for Habilitation, Group Home contains a series of tables depicting the Daily Rates. Each table represents a level of staffing with the number of direct service hours that are authorized by the Division to be provided by the Qualified Vendor at a particular group home during a week. A week is a consecutive seven day stretch of time that begins at midnight on Sunday and ends at 11:59 p.m. the following Saturday. The number of hours specified in each range represents the number of direct service hours the Qualified Vendor must provide in a week in order to bill the per diem rates associated with that range. These Daily Rates are statewide for all Habilitation, Group Home services.

5. The Qualified Vendor shall invoice for payment for each consumer the per diem rate on the Daily Rates schedule for Habilitation, Group Home that reflects the number of residents in the group home and the range of hours provided in a week that reflect the lesser of 1) the authorized direct service hours, or 2) the actual direct service hours delivered. The Qualified Vendor may calculate the weekly direct service hours weekly, or may calculate a monthly average of weekly direct service hours at the end of the month for that month.

6. If the Qualified Vendor elects to calculate a monthly average of weekly direct service hours at the end of the month, the Qualified Vendor shall determine the total number of direct service hours in a given month and determine the average number of direct service hours per week by dividing (the total number of direct service hours in a month) by (the number of weeks in a month).

- If there are 31 days in a month, then the number of weeks in a month is 4.43
- If there are 30 days in a month, then the number of weeks in a month is 4.29
- If there are 29 days in a month, then the number of weeks in a month is 4.14
- If there are 28 days in a month, then the number of weeks in a month is 4.00
7. The *per diem* rates paid to a Qualified Vendor with multiple homes will vary among homes according to the authorized direct service hours, actual direct service hours provided, and number of residents at each group home.
8. Because direct service hours provided can vary by week (if the Qualified Vendor does not elect to calculate a monthly average of weekly direct service hours), and the number of occupants can vary both by week and within a week, the Qualified Vendor may bill more than one per diem rate for each resident on their monthly invoice, but none of the rates billed shall be in excess of the rate which reflects the number of authorized direct service hours.

9. The Qualified Vendor shall use the actual resident occupancy to determine the per diem rate to be billed to the Division. The actual resident occupancy includes all residents, whether or not they are funded by the Division. The Qualified Vendor must notify the DDD Program Administrator/Manager or designee about movement into or out of a home by any resident, whether or not funded by the Division. The Division shall determine if direct service hours will be adjusted on a temporary or permanent basis to reflect the need for direct service hours.

10. If a resident is not in the group home facility on a particular day, the Qualified Vendor shall not bill the Division for this resident. In this situation, the Qualified Vendor shall bill the Division the per diem rate for the actual number of Division-funded residents.

Examples below illustrate some of the scenarios that the Qualified Vendor may come across over the course of providing direct service services to their consumers. NOTE: In the examples presented below, all figures are obtained from the RateBook dated January 1, 2006 available on the Division’s website.

Example 1: Typical Billing

Using Range 6 of the Daily Rates schedule for Habilitation, Group Home as reflective of both the authorized range and the number of direct service hours delivered, and assuming five residents were present in the group home, the applicable per diem rate per resident would be $82.51.

Example 2: Qualified Vendor Provides More/Fewer Hours than Authorized

Using Range 8 of the Daily Rates schedule for Habilitation, Group Home as reflective of the authorized range, the Qualified Vendor is authorized to provide between 190 and 210 hours of direct service per week. As long as the Qualified Vendor’s direct service hours are within this range (whether those hours are actual weekly direct service hours or are a monthly average of weekly direct service hours), the Qualified Vendor will bill the division a per diem rate equivalent to that shown in Range 8. If, however, the Qualified Vendor delivers 185 direct hours, or fewer than the low end of Range 8, the Qualified Vendor will bill the per diem rate at Range 7, or the range reflecting the actual direct service hours that were delivered.
On the other hand, if the Qualified Vendor delivers 215 of direct service hours (whether those hours are actual weekly direct service hours or are a monthly average of weekly direct service hours), or more than those authorized in Range 8 (equivalent to 210 hours), the Qualified Vendor will continue to bill the *per diem* rate at Range 8, or the range reflecting the direct service hours that were authorized by the Division.

**Example 3: Different Number of Residents**

Using Range 6 of the Daily Rates schedule for Habilitation, Group Home as reflective of both the authorized range and the number of direct service hours delivered, and assuming five residents were present in the group home, the applicable *per diem* rate per resident would be $82.51.

Assume on day two of the week one resident leaves, until an adjustment is made and unless the Qualified Vendor reduces the number of direct service hours for the remaining four residents, the Qualified Vendor shall bill the Division a *per diem* rate based the authorized range of hours (Range 6) and four residents. Therefore, starting with day two of the week and until an adjustment is made in the authorized direct service hours, the Qualified Vendor shall bill the Division a *per diem* rate of $103.14.

**Unit of Service**

One unit of service equals one hour (60 minutes) of direct service time. Direct service time is the period of time spent with or on behalf of the consumer and can be verified by consumer attendance records and includes transportation time spent with consumers during daily activities. This unit of service is converted to a daily rate for billing purposes.
Rate

1. Published.

2. The Division will make payments to the Qualified Vendor based on the daily rate for each consumer at the authorized level. The adopted rate includes incontinent supplies or nutritional supplements as indicated.
   2.1 The Qualified Vendor shall not bill the Division for incontinent supplies when the consumer:
      - Is eligible for ALTCS or AHCCCS acute care coverage, and
      - Is age 3 or older but less than 21, and
      - Has a disability that causes incontinence, and
      - Has a prescription from his/her physician for incontinence supplies.
   2.2 Incontinence supplies for consumers identified in 2.1 are available from the consumer’s acute care health plan.
   2.3 Incontinence supplies for consumers not identified in 2.1 are subject to prior approval from the Division. The modified rates will be approved by the Division for each consumer on a case-by-case basis.

3. If the resident is not in the group home facility for a particular day, the Qualified Vendor shall not bill the Division for this resident.

Unit of Service

One unit of service equals one day (24 hours) of service time. A day begins at midnight and ends at 11:59 p.m. Unit of service includes transportation time spent with consumers during daily activities.

Qualifications

1. Direct service staff must:
   1.1 Have at least three months experience implementing and documenting performance in individual programs (specific training strategies);
   1.2 Have both three months experience in providing either respite or personal care and have received training, approved by the Division, in implementing and documenting performance;
   1.3 Perform three months of habilitation services under the direct supervision of an individual who is qualified to provide habilitation as described above; or
   1.4 Be a registered nurse (RN) or licensed practical nurse.

2. The home must be under the general supervision of an RN.
4. Goals will be identified and developed within the context of the ISP team so that the consumer will receive consistency across environments (home and community). Supports and services should build upon natural relationships and be delivered in settings and ways that support daily routines. Informational support will be provided on a regular basis to consumers/families/consumer representatives.

5. The Qualified Vendor/direct service staff should make recommendations for needed equipment, help obtain equipment and train family/consumer’s representative in use and maintenance. The Qualified Vendor/direct service staff will monitor equipment as appropriate.

6. Services should be time limited.

7. To continue service, progress and family/consumer representative follow through should be documented.

8. The Qualified Vendor/direct service staff will review the need for ongoing therapy and adjust recommendations for level of intervention/treatment and modify or discontinue when a skilled therapist is no longer necessary.

9. The Qualified Vendor/direct service staff shall provide therapies according to the consultation/coaching model. The therapist will make every effort to provide services with a family member, caretaker or designee present. In circumstances that the service is delivered in a clinical setting, the same applies, or other personnel may be present in the same clinic. This is not applicable to adult, competent clients.

**Rate**

Published.

**Unit of Service**

1. One unit of evaluation equals one visit for evaluation.

2. The basis of payment for this service other than evaluation is an hourly unit of direct service time. Direct service time is the period of time spent with or on behalf of the consumer and verified by the consumer. When billing, the Qualified Vendor should round its direct service time to the nearest 15-minute increment, as illustrated in the examples below:
   - If services were provided for 65 minutes, bill for 1 hour.
   - If services were provided for 68 minutes, bill for 1.25 hour.
   - If services were provided for 50 minutes, bill for 0.75 hour.
5. Participate in assessing progress toward IFSP outcomes.

5.1 The occupational therapist, as a member of the Individualized Family Service Plan team, shall document and report progress toward outcomes systematically and use this information to develop, review and evaluate the Individualized Family Service Plan. The occupational therapist shall involve the family and other caregivers in assessing progress, both qualitatively and quantitatively.

Service Utilization Guidelines

1. Evaluation and assessment, standards of service delivery, and family’s concerns, priorities and resources determine the outcomes identified in the IFSP.

2. The IFSP team determines who will assist the family and child in attaining the outcomes.

3. All IFSP team members contribute to the discussion of types and frequency of services and are not unilateral decision-makers.

4. Service delivery methods, times, days, locations should be flexible and meet the requirements of natural environments.

5. The Qualified Vendor/direct service staff should make recommendations for needed equipment, help obtain equipment and support the family in its use and maintenance. The Qualified Vendor/direct service staff will monitor equipment as appropriate.

6. The IFSP team will review the progress toward the IFSP outcomes and determine the appropriateness of services identified to meet the outcomes.

7. This service shall be authorized in accordance with Administrative Directive #77 “…if day treatment and training/special instruction is identified to meet a planned outcome the support coordinator shall first offer the family choice of day treatment and training/special instruction provider. If the plan also identifies therapy as a service to meet planned outcomes and the family’s choice of provider for day treatment and training/special instruction also contracts through the Qualified Vendor process for any or all of the therapy services, the family shall automatically be assigned these services through this provider.”

8. The Qualified Vendor/direct service staff shall deliver therapies according to the consultation/coaching model in a natural environment. The therapist will make every effort to provide services with a family member, caretaker or designee present. In circumstances that the service is delivered in a clinical setting, the same applies or other personnel may be present in the same clinic.
Rate

Published.
5. The Qualified Vendor/direct service staff should make recommendations for needed equipment, help obtain equipment and train family/consumer’s representative in use and maintenance. The Qualified Vendor/direct service staff will monitor equipment as appropriate.

6. Services should be time limited.

7. To continue service, progress and family/consumer representative follow through should be documented. Services should be discontinued as indicated.

8. The Qualified Vendor/direct service staff will review the need for ongoing therapy and adjust recommendations for level of intervention/treatment and modify or discontinue when a skilled therapist is no longer necessary.

9. The Qualified Vendor/direct service staff shall deliver therapies according to the consultation/coaching model. The therapist will make every effort to provide services with a family member, caretaker or designee present. In circumstances that the service is delivered in a clinical setting, the same applies or other personnel may be present in the same clinic. This is not applicable to adult, competent clients.

Rate

Published.

Unit of Service

1. One unit of evaluation equals one visit for evaluation.

2. The basis of payment for this service other than evaluation is an hourly unit of direct service. Direct service time is the period of time spent with or on behalf of the consumer and verified by the consumer. When billing, the Qualified Vendor should round its direct service time to the nearest 15-minute increment, as illustrated in the examples below:
   - If services were provided for 65 minutes, bill for 1 hour.
   - If services were provided for 68 minutes, bill for 1.25 hour.
   - If services were provided for 50 minutes, bill for 0.75 hour.

3. If the Qualified Vendor provides this service with a single direct service staff person to multiple consumers at the same time, the basis of payment for each consumer will be the total direct service time multiplied by the appropriate multiple client rate for the same unit of service. In no event will more than three consumers receive this service with a single direct service staff person at the same time.
5. Participate in assessing progress toward IFSP outcomes.

5.1 The physical therapist, as a member of the Individualized Family Service Plan team, shall document and report progress toward outcomes systematically and use this information to develop, review and evaluate the Individualized Family Service Plan. The physical therapist shall involve the family and other caregivers in assessing progress, both qualitatively and quantitatively.

Service Utilization Guidelines

1. Evaluation and assessment, standards of service delivery, and family’s concerns, priorities and resources determine the outcomes identified in the IFSP.

2. The IFSP team determines who will assist the family and child in attaining the outcomes.

3. All IFSP team members contribute to the discussion of types and frequency of services and are not unilateral decision-makers.

4. Service delivery methods, times, days, locations should be flexible and meet the requirements of natural environments.

5. The Qualified Vendor/direct service staff should make recommendations for needed equipment, help obtain equipment and support the family in its use and maintenance. The Qualified Vendor/direct service staff will monitor equipment as appropriate.

6. The IFSP team will review the progress toward the IFSP outcomes and determine the appropriateness of services identified to meet the outcomes.

7. This service shall be authorized in accordance with Administrative Directive #77 “...if day treatment and training/special instruction is identified to meet a planned outcome the support coordinator shall first offer the family choice of day treatment and training/special instruction provider. If the plan also identifies therapy as a service to meet planned outcomes and the family’s choice of provider for day treatment and training/special instruction also contracts through the Qualified Vendor process for any or all of the therapy services, the family shall automatically be assigned these services through this provider.”

8. The Qualified Vendor/direct service staff shall deliver therapies according to the consultation/coaching model in a natural environment. The therapist will make every effort to provide services with a family member, caretaker or designee present. In circumstances that the service is delivered in a clinical setting, the same applies or other personnel may be present in the same clinic.

Rate

Published.
4. Goals will be identified and developed within the context of the ISP team so that the consumer will receive consistency across environments (home and community). Supports and services should build upon natural relationships and be delivered in settings and ways that support daily routines. Informational support will be provided on a regular basis to consumers/families/consumer representatives.

5. The Qualified Vendor/direct service staff should make recommendations for needed equipment, help obtain equipment and train family/consumer’s representative in use and maintenance. The Qualified Vendor/direct service staff will monitor equipment as appropriate.

6. Services should be time limited.

7. To continue service, progress and family/consumer representative follow through should be documented. Services should be discontinued as indicated.

8. The Qualified Vendor/direct service staff will review the need for ongoing therapy and adjust recommendations for level of intervention/treatment and modify or discontinue when a skilled therapist is no longer necessary.

9. The Qualified Vendor/direct service staff shall deliver therapies according to the consultation/coaching model. The therapist will make every effort to provide services with a family member, caretaker or designee present. In circumstances that the service is delivered in a clinical setting, the same applies or other personnel may be present in the same clinic. This is not applicable to adult, competent clients.

Rate

Published.

Unit of Service

1. One unit of evaluation equals one visit for evaluation.

2. The basis of payment for this service other than evaluation is an hourly unit of direct service time. Direct service time is the period of time spent with or on behalf of the consumer and verified by the consumer. When billing, the Qualified Vendor should round its direct service time to the nearest 15-minute increment, as illustrated in the examples below:
   - If services were provided for 65 minutes, bill for 1 hour.
   - If services were provided for 68 minutes, bill for 1.25 hour.
   - If services were provided for 50 minutes, bill for 0.75 hour.
3. If the Qualified Vendor provides this service with a single direct service staff person to multiple consumers at the same time, the basis of payment for each consumer will be the total direct service time multiplied by the appropriate multiple client rate for the same unit of service. In no event will more than three consumers receive this service with a single direct service staff person at the same time.

Direct Service Staff Qualifications

Speech therapy services must be provided by:
1. A qualified Speech Language Pathologist that holds a license issued by the Arizona Department of Health Services (ADHS), or
2. A speech-language pathologist who has temporary license from ADHS and is completing a clinical fellowship year. He/she must be under the direct supervision of an ASHA certified speech-language pathologist. AHCCCS registration will be terminated at the end of two years if the fellowship is not completed at that time.

Recordkeeping and Reporting Requirements

1. The Qualified Vendor shall submit an evaluation report to the support coordinator within three weeks of the evaluation. The report will adhere to the Division’s therapy policy.

2. The Qualified Vendor shall submit a quarterly progress report to the support coordinator within 15 days of the end of the quarter. The report will adhere to the Division’s therapy policy.

3. The Qualified Vendor must maintain on file proof of hours worked by their direct service staff, e.g., staff time sheets. Each document must be signed by the consumer/family/consumer’s representative as verification of hours served.
5. Participate in assessing progress toward IFSP outcomes.
   5.1 The speech language pathologist, as a member of the Individualized Family Service Plan team, shall document and report progress toward outcomes systematically and use this information to develop, review and evaluate the Individualized Family Service Plan. The speech language pathologist shall involve the family and other caregivers in assessing progress, both qualitatively and quantitatively.

Service Utilization Guidelines

1. Evaluation and assessment, standards of service delivery, and family’s concerns, priorities and resources determine the outcomes identified in the IFSP.

2. The IFSP team determines who will assist the family and child in attaining the outcomes.

3. All IFSP team members contribute to the discussion of types and frequency of services and are not unilateral decision-makers.

4. Service delivery methods, times, days, locations should be flexible and meet the requirements of natural environments.

5. The Qualified Vendor/direct service staff should make recommendations for needed equipment, help obtain equipment and support the family in its use and maintenance. The Qualified Vendor/direct service staff will monitor equipment as appropriate.

6. The IFSP team will review the progress toward the IFSP outcomes and determine the appropriateness of services identified to meet the outcomes.

7. This service shall be authorized in accordance with Administrative Directive #77 “…if day treatment and training/special instruction is identified to meet a planned outcome the support coordinator shall first offer the family choice of day treatment and training/special instruction provider. If the plan also identifies therapy as a service to meet planned outcomes and the family’s choice of provider for day treatment and training/special instruction also contracts through the Qualified Vendor process for any or all of the therapy services, the family shall automatically be assigned these services through this provider.”

8. The Qualified Vendor/direct service staff shall deliver therapies according to the consultation/coaching model in a natural environment. The therapist will make every effort to provide services with a family member, caretaker or designee present. In circumstances that the service is delivered in a clinical setting, the same applies or other personnel may be present in the same clinic.
Rate

Published.

Unit of Service

1. One unit of evaluation equals one visit for evaluation.

2. The basis of payment for this service other than evaluation is an hourly unit of direct service time. Direct service time is the period of time spent with or on behalf of the consumer and verified by the consumer. When billing, the Qualified Vendor should round its direct service time to the nearest 15-minute increment, as illustrated in the examples below:
   - If services were provided for 65 minutes, bill for 1 hour.
   - If services were provided for 68 minutes, bill for 1.25 hour.
   - If services were provided for 50 minutes, bill for 0.75 hour.

3. If the Qualified Vendor provides this service with a single direct service staff person to multiple consumers at the same time, the basis of payment for each consumer will be the total direct service time multiplied by the appropriate multiple client rate for the same unit of service. In no event will more than three consumers receive this service with a single direct service staff person at the same time.

Qualifications

The Qualified Vendor shall meet all applicable licensure and Arizona Early Intervention Program (AzEIP) Personnel Standards requirements in order to provide speech therapy services, including:

Speech therapy services must be provided by:
   1. A qualified Speech Language Pathologist that holds a license issued by the Arizona Department of Health Services (ADHS), or

   2. A speech-language pathologist who has a temporary license from ADHS and is completing a clinical fellowship year. He/she must be under the direct supervision of an ASHA certified speech-language pathologist. AHCCCS registration will be terminated at the end of two years if the fellowship is not completed at that time.