

**Statement of Work:
Behavioral Aide Services**

Target Geographical Area for Implementation:

- Arenac County Bay County Other:

Consumer Populations to be Served:

- Adults with Serious Mental Illnesses Adults and/or Children with Developmental Disabilities Persons with Substance Use Disorders
 Children with Serious Emotional Disturbances Other: Other:

Services to be Provided:

Provider is engaged to render the Services listed and defined below to the consumer populations in the geographic areas identified herein.

| Service Definition Number | Service Title | HCPCS Code | Unit Type | Estimated Volume | Unit Rate | Estimated Total Value |
|---|---------------|------------|-----------|------------------|-----------|-----------------------|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| Estimated Total Annual Contract Value: | | | | | | |

Total estimated number of individual consumers to be served under this Agreement: _____

Service Definitions:

Community Living Supports includes providing supports that increase or maintain personal self-sufficiency, facilitating an individual's achievement of his goals of community inclusion and participation, independence or productivity. The supports may be provided in the participant's residence or in community settings (including but not limited to libraries, city pools, camps, etc.) and include:

- a) Assisting, reminding, observing, guiding and/or training in the following activities:
 - o Meal preparation;
 - o Laundry;
 - o Routine, seasonal, and heavy household care and maintenance;
 - o Activities of daily living such as bathing, eating, dressing, personal hygiene;
 - o Shopping for food and other necessities of daily living.

- b) Staff assistance, support and/or training with such activities as:
 - o Money management;
 - o Non-medical care (not requiring nurse or physician intervention);
 - o Socialization and relationship building;

- Transportation (excluding to and from medical and dental appointments) from the beneficiary's residence to community activities, among community activities and from those activities back to the beneficiary's residence;
 - Participation in regular community activities and recreation opportunities (e.g. attending classes, movies, concerts and event in a park; volunteering; voting)
 - Attendance at medical appointments;
 - Acquiring or procuring goods other than those listed under shopping and non-medical services.
- c) Reminding, observing and/or monitoring of medication administration;
- d) Staff assistance with preserving the health and safety of the individual in order that he/she may reside or be supported in the most integrated, independent community setting.

CLS behavioral aide:

- a) Assist professional staff with implementation of treatment plan behavioral goals related to positive skill development and development of age-appropriate social behaviors.
- b) Provide support to a beneficiary younger than 18, and the family in the care of their child, while facilitating the child's independence and integration into the community.
- Skill development related to activities of daily living, such as bathing, eating, dressing, personal hygiene, household chores and safety skills;
 - Skill development to achieve or maintain mobility, sensory-motor, communication, socialization and relationship-building skills, and participation in leisure and community activities.
 - These supports must be provided directly to, or on behalf of, the child.
 - These supports may serve to reinforce skills or lessons taught in school, therapy, or other settings.
 - For children and adults up to age 26 who are enrolled in school, CLS services are not intended to supplant services provided in school or other settings, or to be provided during the times when the child or adult would typically be in school but for the parent's choice to home school.

Exceptions: N/A

Other Conditions:

1. Provider will comply with BABHA expectations that contractual increases in compensation must be distributed to its direct care workers as soon as possible following the date Provider receives compensation increases from BABHA, including lump sum payments and/or per diem increases for such purposes. In addition and upon request, Provider agrees to submit periodic reports to BABHA which shall include the range of rates of pay for employees providing direct care to BABH consumers served under contract. Direct care workers are those working in local residential settings and paraprofessionals and other non-professional direct care workers in (non-residential) settings where skill building, community living supports, training and personal care services are provided. The reports will list each employee position or classification, together with the actual rate or rates of pay for each position or classification for the applicable time period, including the starting rate and each rate/step increase.

A.1 Provider Specific Services Requirements.

In addition to the duties and obligations set forth in the Agreement, Provider shall comply with the following specific requirements for services rendered by **Providers of Behavioral Aide Services**:

- A.1.1 **Staff Training:** All staff who work with individuals shall have, at a minimum, successfully completed the required training courses in **Exhibit D: Provider Training Requirements**.
- a) Training shall be arranged by the Provider and provided by BABHA (where available) or by training organizations or resources that follow a DCH curriculum and are approved in writing by BABHA.
 - b) Provider understands and agrees that any untrained staff shall only work with individuals under parental supervision within the consumer's home until training has been completed. Any person engaged in direct care work shall successfully complete all required training within 90 days of hire, and complete all annual refreshers and updates.
 - c) Training beyond what is required under contract is the financial responsibility of the Provider. Additional trainings secured through BABH will be based on a predetermined fee. Provider's internal training resources should be utilized whenever possible.
 - d) A twenty-four (24) hour cancellation notice is required for all trainings conducted by the BABH Staff Development Center. The Provider will contact the Staff Development Center at (989) 895-2395, or via email to staffdevelopment@babha.org, immediately upon becoming aware of a cancellation, but no later than 24 hours in advance. The first no-show without proper notification will result in a warning letter being issued to the Provider. Subsequent no-shows will result in an assessment fee of \$50.00 per no-show violation applied to the program. Upon the third no-show violation, a written corrective action plan must be submitted by the Provider to BABHA within 10 business days that specifies what will be done to resolve this issue. Failure to follow through with corrective action will result in further actions, including a decision to limit access to training resources.
- A.1.2 The Provider shall make every effort to provide a behavioral aide within twenty-one (21) days of receipt of a referral from BABH, that of whom shall be fully qualified and trained to meet the consumer(s)' PCP needs, familiar with and capable of implementing emergency procedures, and alert at all times when any consumer is under their care.
- A.1.3 Behavioral aides providing services to BABHA consumers will meet the following criteria:
- a) Must be at least 18 years old
 - b) Must have a minimum of a high school diploma; an Associates Degree in a human services field and experience working with children with emotional or behavioral problems is preferred.
 - c) Must possess a valid unrestricted Driver's License
 - d) Must have reliable car for transportation and auto insurance
 - e) Must clear the Central Registry check
 - f) Must not be convicted of any felonies or have any substance abuse problems
 - g) Successfully complete all required training within 90 days of hire (see A1.1 b)
 - h) Knowledge of mental illness or developmental disabilities is desired but not required
- A.1.4 Qualifications of the Provider's behavioral aide supervisor will meet the following criteria:
- a) Must have a minimum of two years' experience in working with children and adults in a behavioral health setting and have at least a Bachelor's Degree in a human services field
 - b) Must exhibit exemplary communication, organization, delegation and decision making skills, and a high level of empathetic listening and motivational skills

A.1.5 Service Delivery requirements:

- a) Behavioral aide services are to be provided in the consumer's home and/or in the community.
- b) Program availability shall be 24 hours per day, 7 days per week.
- c) Provider shall designate a single point of entry for referrals and coordination of services.
- d) Behavioral aides shall demonstrate good judgment and will also demonstrate the ability to listen, communicate, set and maintain appropriate and consistent behavioral boundaries, and maintain supportive relationships.
- e) Hours of service provided will be based on the consumer's needs and Person-Centered Plan (PCP).
- f) Provider staff will be trained in the individual's PCP for goals applicable to behavior aides and evidence such by staff signature on the PCP (or PCP addendum).
- g) The Provider is required to utilize the Phoenix Electronic Medical Record (EMR) as dictated by BABHA guidelines.
- h) Behavioral aides shall adequately document services and interventions in daily progress notes. Progress notes will be entered into the EHR within 3 days of service contact. Progress notes to include the following details:
 - Start and end time of the service
 - The activity or service or intervention provided
 - The result of the intervention
 - Any problems or incidents that might have occurred while the service is being delivered.
- i) If there was an unusual incident, **an incident report should be completed and** contain the following:
 - Information on what precipitated the behavior
 - Description of the **incident/behavior**
 - **Actions taken by the behavioral aide**
 - **Corrective measures taken to remedy/prevent the recurrence**
 - Result of the intervention
- j) The behavior aide should also collect data as specified in the consumer's person centered plan.
- k) Provider shall assure the continuity of care for the consumer.
 - It is essential that behavior aides are consistently available to provide services as scheduled and as specified in the consumer's person centered plan.
 - Behavior aides that are not able to attend a scheduled shift should notify the child's parent at least 24 hours in advance except in case of an unexpected illness.
 - Three or more staff no shows within a calendar year will be viewed as an indication that a new behavior aide should be identified for the consumer.
- l) Behavior aides will consult with the supervising CSM/SC or clinical specialist **at least once per month** to review this service, review the benefit of the service for the consumer and determine if the amount, scope or duration of the service needs to be adjusted. This contact may occur at the consumer's home during a time the service is being provided and may include input from the consumer.
- m) The Provider documents that a minimum of monthly clinical supervision with each aide occurs. Supervision may include training, case consultation, case reviews, topic based in-services, etc. Group supervision may occur as long as the supervision is structured and documented appropriately so that the content is clear.

A.2 Performance Requirements and Indicators.

A.2.1 Improving Outcomes For People:

- a) Promoting and sustaining a Culture of Gentleness (as applicable to individuals with ID/DD):
Bay Arenac Behavioral Health will continue to promote and implement a Culture of Gentleness.

A.2.2 Consumer Satisfaction

- a) All CMHSP-sponsored consumers will be requested to participate in a standardized consumer satisfaction process that is adopted by the Provider. **The Provider will maintain evidence that it acts on the data received from the consumer satisfaction process.**
- b) The results of the consumer satisfaction measurement process will be available to BABHA at least annually, or per the time frame specified in provider policies or procedures pertaining to consumer satisfaction reporting.

A.2.3 Billing and Claims:

- a) Provider is encouraged to submit claims using the online billing module available to BABHA providers.
- b) If submitting paper claims, at least 90% of submitted claims will be accurate for purposes of immediate processing and reimbursement.
- c) All Coordination of Benefits (COB) claims shall be submitted using paper claims with a copy of the Explanation of Benefits (EOB) from the primary insurance(s) attached.
- d) Standard practices shall be to submit claims as soon as practical after the delivery of service. All claims must be submitted **90 days** of the delivery of service, **or within 90 days of receipt of the EOB from the primary insurance.**

A.2.4 Other Performance Indicators and Requirements:

- a) Percentage of recipient rights complaints that are substantiated.
- b) Frequency of normalized and integrated community activity by consumer.
- c) Rate of movement of users of support staffing into more restrictive residential settings due to adverse clinical situations.
- d) Rate of accidents resulting in serious injury.