Statement of Work Individual Practitioners

Target Ge	<u>ographical Area for Implen</u>	nentation:				
☐ Arenac County		☐ Bay County			Other:	
Consumer	Populations to be Served:	:				
☐ Adults with Serious Mental Illnesses☐ Children with Serious Emotional Disturbances		☐ Adults and/or Children with☐ Developmental Disabilities☐ Other:			Persons with Substance UseDisordersOther:	
Services to be Provided:						
	engaged to render the Se c areas identified herein.	ervices listed a	and defined be	elow to the co	onsumer popula	tions in the
Service Definition Number	Service Title	HCPCS Code	Unit Type	Estimated Volume	Unit Rate	Estimated Total Value
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
Estimated Total Annual Contract Value:						
Total estimated number of individual consumers to be served under this Agreement:						
Service Definitions:						
Exceptions: N/A						
Other Conditions: N/A						

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 **Individual Practitioners**:

- A.1.1 All staff who work with individuals shall have, at a minimum, successfully completed the required training courses in **Exhibit C: Provider Training Requirements**. Training shall be arranged by the Provider and provided by BABHA (where available) or by training organizations or resources that follow a MDHHS curriculum and are approved in writing by BABHA.
- A.1.2 In addition to the licensing, training, and staffing requirements set forth in the Agreement, Individual Practitioner will ensure they are adequately trained to provide the Services specified in the Agreement and this Statement of Work (SOW) and in the consumer's Person-Centered Plan (PCP)/ Individual Plan of Service (IPOS) for which the Individual Practitioner is responsible. The Individual Practitioner will make reasonable efforts to attend the consumer's PCP, when invited to do so.
- A.1.3 Individual Practitioner will develop goals and objectives that are measurable, achievable, time-specific, attainable, and understandable to the person served.
- A.1.4 Individual Practitioner must provide services at the frequency identified in the Individual Plan of Service (IPOS).
- A.1.5 Documentation: Assessments must be completed within 14 days of the initial referral. Clinical service documentation (i.e. progress notes) must be submitted to BABHA for inclusion in the medical record within 24 hours of the Individual Practitioner's service contact.
- A.1.6 Individual Practitioner agrees to notify BABHA within three (3) business days of closing a case.
- A.1.7 If a script is required for services to be provided, the Individual Practitioner will ensure that the script is in place prior to providing services.
- A.1.8 Nursing Providers will maintain current First Aid and CPR certifications.

A.2 Credentialing and Privileging.

- A.2.1 Provider's Individual Practitioners must request and be assigned clinical responsibilities by BABHA;
- A.2.2 Provider and BABHA will work together to define clinical responsibilities;
- A.2.3 Provider must follow the credentialing and privileging policies and procedures of BABHA, including, without limitation, C07-S01-T13 Credentialing and Privileging of Individual Practitioner.

- A.2.4 Individual Practitioners are prohibited from providing services to consumers of BABHA until clinical privileges have been granted;
- A.2.5 For physician services, if the Provider's Individual Practitioner designates an outside Individual Practitioner to cover his/her absence and coverage exceeds over 13 consecutive days or 72 consecutive hours, then Provider's covering physician must be credentialed and privileged by BABHA prior to providing the coverage;
- A.2.6 Individual Practitioner shall notify BABHA of any and all changes related to status of licensure and/or credentialling prior to providing services to BABHA consumers.
- A.2.7 BABHA shall review and assess the performance of all contract personnel on an annual basis.
- A.2.8 Upon request, the Provider will immediately forward copies of required evidence for credentialing including driver's license, professional license, evidence of training, etc.

A.3 Performance Requirements and Indicators.

A.3.1 Primary Healthcare Integration:

Provider agrees to coordinate service delivery with the recipients' health care providers, including each recipient's primary health care provider. Providers are responsible for obtaining recipient consent to release and/or exchange information with the recipient's primary health care provider, or other providers, an with that consent, agrees to inform the primary health care provider of the initiation of services, to engage in discussion with the primary health care provider of any significant change in the course of treatment or care, including medication changes, and to integrate into the Providers' treatment plan input received from the primary care physician.

A.3.2 Recovery Oriented Systems:

BABHA and its Provider Network will ensure recovery-oriented care for all individuals served. Clinical practices and supports for individuals and their families must project hope, communicate the expectation of recovery, and empower people to exercise choice and control over their lives. (Policy C04-S05-T06 and Substance Abuse and Mental Health Services, SAMHSA.)

A.3.3 Trauma Informed Services:

BABHA and its Provider Network will ensure a Trauma-Informed System of Care is provided for all individuals served. All providers will ensure that their staff understand the prevalence of trauma and the impact that trauma plays in the lives of people seeking mental health and addiction services as well as the staff that support them. Independent Practitioners will make every effort to accommodate the vulnerabilities of trauma survivors and allows services to be delivered in a way that will avoid inadvertent re-traumatization and will facilitate the person's participation in treatment. (Policy C04-S05-S07 and the DHHS/CMHPS Medicaid Contract Amendment 2)