Behavior analysis services are provided to assist a person or persons to learn new behavior that are directly related to existing challenging behaviors or functionally equivalent replacement behaviors for identified challenging behaviors. Services may also be provided to increase existing behavior, to reduce existing behavior, and to emit behavior under precise environmental conditions. The term “behavior analysis services” includes the terms “behavior programming” and “behavioral programs.” Behavior analysis includes the design, implementation and evaluation of systematic environmental modifications for the purposes of producing socially significant improvements in and understanding of human behavior based on the principles of behavior identified through the experimental analysis of behavior.

<table>
<thead>
<tr>
<th>Cite</th>
<th>Standard</th>
<th>Probes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Explanation of Monitoring Tool Symbols/Codes</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>🔴 ≥ Alert: Denotes a critical standard or cite relating to health, safety and rights. A deficiency requires a more intense corrective action and follow-up cycle.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“W” Weighted Element: A “W” followed by 2.0 or 4.0 in the Cite column denotes elements that have a greater impact on the monitoring score.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“R” Recoupment: An “R” in the Cite column denotes an element that is subject to recoupment of funds by the State if the element is “Not Met.”</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cite</td>
<td>Standard</td>
<td>Probes</td>
</tr>
<tr>
<td>------</td>
<td>----------</td>
<td>--------</td>
</tr>
<tr>
<td><strong>B. Provider Qualifications and Requirements</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>For all training related elements of performance appearing under this section: Review Area requirements for mandatory meetings and training documentation. Review provider's/staff member training records to determine if documentation is maintained, and at a minimum includes: The topic of the training; Length of the training session; Training dates; Participants' signature; Instructor's name; Objectives and/or a syllabus.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Provider is certified as a behavior analyst or licensed as a psychologist, school psychologist, clinical social worker, marriage and family therapist, or mental health counselor with the required experience and/or education.</td>
<td>Note: Providers can receive certification as a: Florida Certified Behavior Analyst with expanded privileges; Florida Certified Behavior Analyst; Florida Certified Associate Behavior Analyst; Board Certified Behavior Analyst; Board Certified Associate Behavior Analyst</td>
<td></td>
</tr>
</tbody>
</table>

- Review provider qualifications maintained in Area Office enrollment files for solo practitioners
- Review license for active status
- If an agency provider, review files supplied for agency staff

Note: LEVEL 1 services require the provider to have certification in a field mentioned above with more than three years of experience post certification/licensure. LEVEL 2 services require the provider to have certification in a field mentioned above with less than three years of experience or Florida Certified Behavior Analyst with Masters or Doctorate regardless of experience. LEVEL 3 services require the provider to have certification in a field mentioned above with bachelors or high school diploma regardless of experience. |
<table>
<thead>
<tr>
<th>Cite</th>
<th>Standard</th>
<th>Probes</th>
</tr>
</thead>
</table>
| 2    | Level two background screenings are complete for all direct service employees. | Review available personnel files or records to ascertain compliance. Check for:  
- Notarized affidavit of good moral character;  
- Proof of local background check  
- Documentation of fingerprints submitted to FDLE for screening and screening reports on file.  
- Criminal records that include possible disqualifiers have been resolved through court dispositions.  
- If this is an agency, look for evidence that the provider has used the screening information to identify any potentially disqualifying offenses and to make a determination of eligibility of the employee to render services and supports. As appropriate, look for evidence of Area Office exemptions on disqualifying offenses. |
| 3    | Provider undergoes background re-screening every 5 years. | Review available personnel files or records to verify that provider and staff, as applicable, undergo background re-screening at least every 5 years.  
- Look for evidence of completion and submission of an FDLE Form, identified as either attachment 3 or 4.  

```
Note: Fingerprint cards are not required on resubmission.
```

| 4    | The provider attends mandatory meetings and training scheduled by the Area Office and/or Agency. | If this is an onsite visit:  
- Ask the provider if they are aware of Area Office and Agency mandatory meeting and training schedules. Ask the provider if they can produce any notices, announcements or agendas received about meetings or training.  
- Ask the provider what Area Office and Agency meetings or training they have attended during the review period.  
- Ask the provider for any evidence they have to verify attending the meeting or training.  

If this is a desk review:  
- Look for evidence in documents supplied by the provider of attendance at Area Office and Agency meetings, such as notes in personnel files or other records.  

```
Note: If the Area Office has not sponsored any mandatory meetings or training, score this element Not Applicable.
```
<table>
<thead>
<tr>
<th>Cite</th>
<th>Standard</th>
<th>Probes</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 W2.0</td>
<td>Independent providers and agency staff receive training on responsibilities and procedures for maintaining health, safety and well-being of individuals served.</td>
<td>Review provider personnel files or training records for evidence of this type of training. Ask the provider and/or their staff about what types of training programs they have and continue to attend. Training on health, safety and well-being of individuals could include such topics as:  - Fire safety for the environment;  - Evacuation procedures in the event of natural or other disasters;  - Training on what to do in the event of personal health emergencies involving consumers;  - Basic infection control training, e.g., hand washing before and after all contact with consumers.  - Appropriate mealt ime interventions  - Positioning requirements, as applicable. Refer also to the provider’s policy in this area to determine compliance. Note: The Area Office is not the sole source for a provider to find training programs and activities referred to in the Core Assurances. Providers may develop their own curriculum for their staff; providers and their staff may attend a program offered through another provider.</td>
</tr>
<tr>
<td>6</td>
<td>Independent providers and agency staff receive training on required documentation for service(s) rendered.</td>
<td>Look for evidence that the provider and/or staff have received training on the type and format of documentation that is required for the services and supports that they render. Examples of this training could include:  - The proper format and content of a progress note,  - Recording data related to an individual’s progress towards achieving goals,  - Documenting the activities that individuals participate in during their time with the provider.  - Instruction on documentation that is required for reimbursement and monitoring purposes. Note: The Area Office is not the sole source for a provider to find training programs and activities referred to in the Core Assurances. Providers may develop their own curriculum for their staff; provider and their staff may attend a program offered through another provider.</td>
</tr>
<tr>
<td>Cite</td>
<td>Standard</td>
<td>Probes</td>
</tr>
<tr>
<td>------</td>
<td>----------</td>
<td>--------</td>
</tr>
</tbody>
</table>
| 7    | Independent providers and agency staff receive training on responsibilities under the Core Assurances. | Look for evidence that the provider and/or staff have been familiarized with and have had some training related to the Core Assurances section of their Waiver Services Agreement and the DS Waiver Services Florida Medicaid Coverage and Limitations Handbook.  
Examples of this training could include instruction on:  
- The rights of individuals in the program and how the provider respects these rights;  
- Maintaining confidentiality of consumer information;  
- Offering individual’s choice of services and supports;  
- Recognizing and reporting of suspected abuse, neglect or exploitation;  
- Assisting individuals in achieving personal goals and desired outcomes;  
- Rendering services in an ethical manner.  

*NOTE: The Area Office is not the sole source for a provider to find training programs and activities referred to in the Core Assurances. Providers may develop their own curriculum for their staff; provider and their staff may attend a program offered through another provider.* |
| 8    | Independent providers and agency staff receive training on responsibilities under the requirements of specific services offered. | Look for evidence that the provider and/or staff have been familiarized with and have had training related to the service specific sections of their Waiver Services Agreement and the DS Waiver Services Florida Medicaid Coverage and Limitations Handbook.  
Examples of this training could include instruction on:  
- Specifics of rendering services and supports;  
- Service limitations;  
- Service documentation requirements; and  
- Billing for services.  

*NOTE: The Area Office is not the sole source for a provider to find training programs and activities referred to in the Core Assurances. Providers may develop their own curriculum for their staff; provider and their staff may attend a program offered through another provider.* |
<table>
<thead>
<tr>
<th>Cite</th>
<th>Standard</th>
<th>Probes</th>
</tr>
</thead>
</table>
| 9    | Independent providers and agency staff receive training on use of personal outcomes to establish a person-centered approach to service delivery. | Look for evidence that the provider and/or staff have received training on using desired outcomes for individuals as the guide for rendering services and supports. Examples of this training could include instruction on:  
- Development of an individual’s behavior analysis service plan using Support Plan goals.  
- Establishing a monitoring schedule for the individual.  
- Development of a caregiver training program and schedule.  
- Designing services and supports from the standpoint of the outcome that is desired by the individual and/or family.  
- Use of Personal Outcomes Measures, or another person-centered planning approach.  
- Individualizing service delivery methods.  

Also refer to the provider’s policy in this area to determine specified training.  

*Note: This does not mean that the provider must have received the official Personal Outcome Measures training (with the exception of Support Coordinators). Other person-centered approaches are acceptable. The Area Office is not the sole source for a provider to find training programs and activities referred to in the Core Assurances. Providers may develop their own curriculum for their staff; provider and their staff may attend a program offered through another provider.* |
<table>
<thead>
<tr>
<th>Cite</th>
<th>Standard</th>
<th>Probes</th>
</tr>
</thead>
</table>
| 10 W2.0 | Independent providers and agency staff receive other training specific to the needs or characteristics of the individual as required to successfully provide services and supports. | Look for evidence that the provider and/or staff assigned to render services and supports to individuals have received some orientation to an individual and their unique characteristics and needs. The family or guardian, a physician or nurse, other providers or people who are in regular contact with and understand the unique characteristics and needs of the individual can provide this orientation. Examples of this training could include instruction on:  
- Communicating with the individual;  
- Positioning requirements for the individual, as applicable;  
- Instruction on a behavior program, if applicable to the individual;  
- Appropriate mealtime interventions This training may be one-on-one in nature, and therefore documentation may not take the form of an agenda, or curriculum with handouts and outline. Also look for evidence in the consumer’s record, such as in progress notes or other provider documentation. |
| 11 | Proof of required training in recognition of abuse and neglect to include domestic violence and sexual assault, and the required reporting procedures is available for all independent vendors and agency staff. |  
- Review personnel files and other provider training records for evidence of required training.  
- If applicable, ask staff about the in-service training that they have received.  
- Training should include prevention, detection and reporting requirements. |

### C. Service Limits and Times

<table>
<thead>
<tr>
<th>Cite</th>
<th>Standard</th>
<th>Probes</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>Provider is authorized to render behavior analysis services.</td>
<td>Review provider records for a service authorization.</td>
</tr>
</tbody>
</table>
| 13 | Provider renders services and supports at a frequency and intensity as defined in the service authorization. | Review provider records for a service authorization and compare against the service log, claims data and monthly summary.  
Services are rendered in the setting(s) relevant to the behavior problems being addressed. |
| 14 | Services are limited to no more than 16 units per day. | Note: A unit is defined as a 15 minute time period or portion thereof. This service may be provided concurrently (at the same time and date) with another service.  
- Review service authorizations  
- Review provider records and service logs  
- Review claims data. |
<table>
<thead>
<tr>
<th>Cite</th>
<th><strong>Standard</strong></th>
<th><strong>Probes</strong></th>
</tr>
</thead>
</table>
| 15   | Assessments are limited to one per year. | If the provider was authorized to perform a behavior analysis assessment, look for evidence in  
  - Provider invoices  
  - Provider records and service logs, and  
  - Claims data  
  to determine that this service was provided only once during the review period.  
  *Note: Score this element Not Applicable if the provider did not perform an assessment.* |
| 16   | Training for parents, caregivers and staff is part of the services rendered (when these persons are integral to the implementation or monitoring of a behavior analysis services plan.) | Review provider records for documentation that training of appropriate individuals has occurred as required to implement or monitor the behavior analysis services plan. |
| 17   | Providers of incidental transportation comply with program requirements. | *(Incidental transportation is considered that which is outside of the transportation for disadvantaged program.)*  
  - Determine if the provider transports individuals. If yes, determine if the provider is following program requirements including:  
    - If transportation is provided in personal cars and/or agency vehicles, check personnel files to verify that valid licenses, vehicle registration and proof of insurance coverage are on file and current.  
    - The Area Office should be notified immediately of any traffic violations, with the exception of parking tickets.  
    - Ask the provider about their system to ensure vehicle safety. |

**D. Documentation**

| 18   | Provider has at a minimum a copy of an assessment used to evaluate the problems with behavior. | Review provider records to determine if an assessment was performed. The assessment should form the basis for interventions used in the behavior services plan.  
  This report is submitted to the waiver support coordinator within 30 days of initially providing the service. |
<table>
<thead>
<tr>
<th>Cite</th>
<th>Standard</th>
<th>Probes</th>
</tr>
</thead>
</table>
| 19 R | Provider has at a minimum a copy of the behavior analysis service plan. | Review provider records to determine if a behavior analysis services plan is present. The behavior analysis services plan:  
- Is clearly written in language that is easily understood by other service providers.  
- Includes a description of the specific  
  - Behaviors to be changed,  
  - Intervention procedures to be used,  
  - Data to be collected,  
  - Training for caregivers, and  
  - Monitoring schedule to be followed by the behavior analysis services provider.  
This document is submitted to the waiver support coordinator within 90 days of initially providing services.  
This Cite is subject to recoupment as reimbursement documentation if not available. |
| 20 W2.0 | Provider has obtained approval from Local Review Committee for restrictive behavioral programs. | Review provider records for evidence of Local Review Committee (LRC) approval of restrictive programs.  
Note: If program is not restrictive, score this element Not Applicable. |
| 21 R | Provider has at a minimum copies of data displays. | Review provider records to determine if graphed data of target and replacement behaviors is present.  
Look for evidence that the provider is using direct observation and measurement of behavior and environment. (Note: The provider can be engaging family members or other providers to observe and collect this data.)  
These graphic displays are of acquisition and reduction behaviors related to the implementation of the service, with baseline data to allow evaluation of progress.  
These documents are submitted to the waiver support coordinator monthly.  
This Cite is subject to recoupment as reimbursement documentation if not available. |
<table>
<thead>
<tr>
<th>Cite</th>
<th>Standard</th>
<th>Probes</th>
</tr>
</thead>
</table>
| 22 R | Provider has at a minimum a copy of the service logs for the period being reviewed. | Review provider records to determine if they contain service logs that include the required documentation.  
Determine if there is a record of the location where services are being rendered to individuals.  
Service logs are to be submitted to the waiver support coordinator on a monthly basis.  
*Note: A service log contains the individual’s name, social security number, Medicaid ID number, the description of the service, activities, supplies or equipment provided and corresponding procedure code, times and dates service was rendered.*  
*This Cite is subject to recoupment as reimbursement documentation if not available.* |
| 23 R | Provider has at a minimum a copy of the monthly summary notes. | Review provider records to determine if they contain a summary note of the month’s activities indicating the individual’s progress toward achieving their support plan goals for the month billed. The monthly summary notes include who, what, when, and where of the monitoring events.  
For Behavior Analysis Services the monthly summary must include a statement of what was accomplished during the preceding billing period with reference to the specific behavioral interventions, behaviors targeted for change and monitoring requirements that are described in the client’s behavior analysis services plan.  
*This Cite is subject to recoupment as reimbursement documentation if not available.* |
| 24 R | Provider has at a minimum a copy of the assessment report, if the provider was specifically reimbursed for an assessment. | Review authorizations, billing documentation and claims data to determine if the provider was responsible for and billed for an assessment. If authorized and billed for, review provider records to determine if they contain a copy of the assessment report. (Providers may be authorized and paid solely for performing an assessment without any other behavior analysis service being provided.)  
*Note: If the provider was not reimbursed for an assessment score this element Not Applicable.*  
*This Cite is subject to recoupment if the provider was paid for an assessment but no documentation is available.* |
<table>
<thead>
<tr>
<th>Cite</th>
<th>Standard</th>
<th>Probes</th>
</tr>
</thead>
<tbody>
<tr>
<td>25 R NEW</td>
<td>Provider has at a minimum an annual report.</td>
<td>Interactively, with the provider, review a sample of records to determine if they contain an annual, written report that indicates the individual’s progress toward their support plan goal(s) for the year. Progress statements in the annual report should contain objective (data/fact based) as well as subjective information. Progress statements should be consistent with monthly summaries and other supporting data. The report is to be submitted to the waiver support coordinator prior to the annual support plan update. This is subject to recoupment as monitoring documentation if not available.</td>
</tr>
</tbody>
</table>