

Service Specific Record Review – Behavior Assistant

#	Performance Measure/Standard	Protocol	Not Met Reasons	
1	<p>The provider has complete Service Logs for each date of service provided and billed during the period under review.</p>	<p>CMS Assurance – Financial Accountability RECORD REVIEW</p> <p>The Daily Progress Note/Service Logs shall identify:</p> <ul style="list-style-type: none"> • Name of individual receiving service • Time in/out • Date of service • A summary of the service provided <ul style="list-style-type: none"> • Review Service Logs for the entire period of review. • Determine that Service Logs include all required components. • Review Service Logs against claims data to ensure accuracy in billing. <p style="text-align: center;">This standard is subject to identification of a potential billing discrepancy</p>	<ol style="list-style-type: none"> 1) Provider did not maintain Service Logs covering services provided and billed during the period under review. (B) 2) Service Logs covering services provided and billed during the period under review did not include the individual's name. (B) 3) Service Logs covering services provided and billed during the period under review did not include a time in/out. (B) 4) Service Logs covering services provided and billed during the period under review did not include the date service was provided. (B) 5) Service Logs covering services provided and billed during the period under review did not include a summary of the service provided. (B) 6) Service Logs had discrepancies between units billed and units documented. (B) 	B
2	<p>The responsible Behavior Analysis Services Local Review Committee chairperson or Regional Behavior Analyst approves Behavior Assistant services.</p>	<p>CMS Service Plan Sub-Assurance RECORD REVIEW</p> <p>All Behavior Assistant services provided must be authorized in a Behavior Assistant Plan contained within the Behavior Analysis Services Plan developed by a supervising behavior analyst or provider licensed under chapter 490 or 491, F.S., reviewed and approved by the Local Review Committee or the Regional Behavior Analyst</p> <p>Review provider documents to determine if:</p> <ul style="list-style-type: none"> • Behavior Assistant services have been approved by 	<ol style="list-style-type: none"> 1) Documentation did not indicate Behavioral Assistant services are approved by the Local Review Committee or Regional Behavior Analyst. 2) Provider submitted request for approval but through no fault of the provider, the Local Review Committee or Regional Behavior Analyst has not yet approved the request.*****Not Met but not calculated into score 	C

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		<p>the Behavior Analysis Services Local Review Committee chairperson or designee.</p> <ul style="list-style-type: none"> • The designee is usually the Area Behavior Analyst or designee, including a contracted LRC chairperson. • Several Areas have a designated form, including Areas 2, 4, 9, 12, 13, 14, and 23, or approval is found in the LRC Minutes for Behavior Assistant Services. <p>Note: If provider is able to show Supervising Behavior Analyst followed procedure, submitted plan for approval and documentation indicates they followed up on request with no response from LRC or Regional Behavior Analyst score not met using reason #2.</p>		
3	The current and complete Behavior Analysis Service Plan covering services provided and billed during the period under review is in the record.	<p>CMS Assurance - Service Plan 65G-4 F.A.C. RECORD REVIEW</p> <ul style="list-style-type: none"> • Review the record to locate the current Behavior Analysis Service Plan. • Look for the date on plan indicating date written or updated within past 12 months. <p style="text-align: center;">This standard is subject to identification of a potential billing discrepancy</p>	1) Record did not contain a current Behavior Analysis Service Plan. (B)	B
4	A Quarterly Summary covering services provided and billed during the period under review is in the record.	<p>CMS Assurance – Financial Accountability RECORD REVIEW</p> <p>Summaries completed by the Behavior Assistant should be separate and apart from the summary completed by the Behavior Analyst. The Behavior Assistant should be documenting training, the individual's response to the intervention, the parents' response to training, suggestions or questions about program adjustments,</p>	<p>1) Quarterly/Monthly Summary covering services provided/billed during the period under review was not in the record.</p> <p>2) Quarterly/Monthly Summaries covering services provided/billed during the period under review were present but were not reflective of progress toward Support Plan goals.</p> <p>3) Some, but not all Quarterly/Monthly</p>	C

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		<p>parent's level of competency, etc.</p> <ul style="list-style-type: none"> • Determine Support Plan effective date to determine Quarterly Summary timeframes for each individual to be reviewed. • Ask provider if provider completes Monthly Summaries or Quarterly summaries. Monthly Summaries in lieu of Quarterly Summaries are acceptable. • Determine if the provider is aware of the person's recent progress towards or achievement of personal goals the person has recently achieved. • Ask the provider to describe goals achieved for the individual from the Behavior Analysis Service Plan. • Review summaries. Each summary must contain: A summary of the individual's progress toward achieving Support Plan goals for services billed in that month/quarter. <p>If service has not been rendered long enough for a Quarterly Summary to be required, score N/A.</p>	<p>Summaries covering services provided/billed during the period under review were present.</p> <p>4) Quarterly Summaries covering services provided/billed during the period under review were completed but were not aligned with the Support Plan effective date.</p>	
5	<p>The third Quarterly/Annual Report covering services provided and billed during the period under review is in the record.</p>	<p>CMS Assurance – Financial Accountability RECORD REVIEW</p> <ul style="list-style-type: none"> • Review record to determine Support Plan effective date. • Determine if the Annual Report is a component of the third Quarterly Report or a separate document (which is acceptable). • Determine if the third Quarterly/Annual Summary was completed prior to the Support Plan effective date. <p>If the provider was providing services to the person at the</p>	<p>1) Current third Quarterly/Annual Report covering services provided/billed during the period under review was not in the record. (B)</p> <p>2) Third Quarterly/Annual Report covering services provided/billed during the period under review was completed, but not prior to the Support Plan effective date. (B)</p>	B

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		<p>time the last Annual Report would have been due, an annual report is still required even if the provider has served the person less than one full year., If the provider was not providing services at the time of the last annual, score as N/A.</p> <p style="text-align: center;">This standard is subject to identification of a potential billing discrepancy</p>		
6	<p>The third Quarterly/Annual Report covering services provided and billed during the period under review contains all required components.</p>	<p>CMS Assurance – Financial Accountability RECORD REVIEW</p> <ul style="list-style-type: none"> • Review record to determine Support Plan effective date. • Determine if the Annual Report is a component of the third quarterly report or a separate document (which is acceptable). • Review Annual Report for content to ensure it includes at a minimum: <ul style="list-style-type: none"> ○ A summary of the first three quarters of the Support Plan ○ Description of the person’s progress, or lack thereof, toward achieving each of the goals identified on the Support Plan based service rendered • Determine if progress statements are consistent with supporting data in documentation. <p>If the provider was providing services to the person at the time the last Annual Report would have been due an annual report is required even if the provider has served the person less than one full year. If the provider was not providing services at the time of the last annual, score as N/A.</p>	<ol style="list-style-type: none"> 1) Third Quarterly/Annual Report covering services provided/billed during the period under review was not in the record. 2) Third Quarterly/Annual Report covering services provided/billed during the period under review did not contain a summary of the recipient’s progress toward achieving Support Plan goal(s). 3) Third Quarterly/Annual Report covering services provided/billed during the period under review did not contain a summary of the first three quarters of the Support Plan year. 	C

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7	<p>The provider maintains accurate Service Authorization(s) covering services provided and billed during the period under review.</p>	<p>CMS Assurance - Service Plan RECORD REVIEW</p> <p>Service Authorizations are provided quarterly or more frequently as changes dictate.</p> <p>Review the Service Authorization for Behavior Assistant to ensure:</p> <ul style="list-style-type: none"> ○ A Service Authorization is available to cover all services provided and billed during the period under review. ○ The Service Authorization(s) is in approved status; ○ The Service Authorization(s) is for the correct rate (agency vs. solo – geographic vs. non-geographic, ratio). <p>Refer to the current APD Provider rate table as needed.</p> <p>WSCs and service providers must verify the Service Authorization is correct according to the authorized amount of services in the iBudget system. If corrections are needed the service provider should immediately contact the WSC for resolution.</p> <ul style="list-style-type: none"> ○ Consider provider due diligence in securing corrected Service Authorizations when incorrect ones are received. 	<ol style="list-style-type: none"> 1) No Service Authorizations were in the record covering services provided and billed during the period under review. 2) One or more Service Authorizations covering services provided and billed during the period under review were not in the record. 3) One or more Service Authorizations covering services provided and billed during the period under review were not in approved status. 4) One or more Service Authorizations covering services provided and billed during the period under review did not indicate the correct rate. 	C
8	<p>The Providers documentation indicates service provided is directly related to the achievement of an outcome on the individual's current support plan.</p>	<p>CMS Assurance - RECORD REVIEW</p> <ul style="list-style-type: none"> • Review Support Plan (s) for Behavior Assistant goals. • Review Service Log (s) for direct relation to an outcome/goal on the individual's Support Plan (s). • Ask the provider about the stated outcomes and goals. 	<ol style="list-style-type: none"> 1) The provider did not have a copy of the Support Plan (s). 2) Documented services did not relate to the achievement of an outcome on the individual's current support plan. 	C

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		<p>Consider “overall” documentation for the period of review. If there are only isolated occurrences of documentation not relating to a goal score as “met”.</p>		
9	<p>The provider renders the service in accordance with the Handbook.</p>	<p>CMS Service Plan Sub-Assurance RECORD REVIEW</p> <p>Services authorized to bill concurrently with another service include Behavior Analysis, Behavior Assistant, private duty nursing, skilled nursing and residential nursing.</p> <ul style="list-style-type: none"> • Review provider records for Service Authorizations. • Determine Service Authorization(s) are available covering services provided and billed during the period under review • If service authorizations are not present for some or all of the period under review other documentation such as Service Logs, Behavior Plans, Support Plans, etc. can be used. • Review data collection documentation and Service Logs for information that supports frequency of service provision approved ratio. (days per week/month, Q/H per day/week, etc.) • Unlike other services, the Behavior Assistant provider’s focus is more on working with the caregivers to provide them with the skills to execute the procedures as detailed in the Behavior Analysis Service Plan, rather than the provision of intervention directly with the individual. • Behavior Assistants provide direct implementation of services as outlined in the Individual Behavior Program. 	<ol style="list-style-type: none"> 1) Services are billed when the individual lives in an Intensive Behavior Group Home. (B) 2) Service is not being rendered in accordance with the Handbook. (B) 	B

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		<p>If service is being routinely rendered at a frequency less than or more than the Service Authorization, score as Met and add a discovery.</p> <p style="text-align: center;">This standard is subject to identification of a potential billing discrepancy</p>		
10	The Provider is in compliance with billing procedures and the Medicaid provider agreement.	<p>CMS Assurance – Financial Accountability RECORD REVIEW</p> <p>Provider bills the appropriate rate:</p> <ul style="list-style-type: none"> • Solo vs. Agency <p style="text-align: center;">This standard is subject to identification of a potential billing discrepancy</p>	1) Provider is a solo provider but is billing at the agency rate. (B)	B
11	The Provider Bills for services only after service is rendered	<p>CMS Assurance – Financial Accountability RECORD REVIEW</p> <p>Provider is not to bill for services prior to rendering.</p> <ul style="list-style-type: none"> • Review Claims data for date billed. • Review dates on Service Logs. • Determine whether or not services were rendered prior to billing for each date of service. 	1) Provider billed for services prior to rendering services on one or more dates during the period under review.	C
12	Training for parents, caregivers and staff on the Behavior Analysis Service Plan is documented.	<p>CMS Assurance – Service Plan RECORD REVIEW</p> <ul style="list-style-type: none"> • Ask the provider to explain the method used to document this training. • Review Behavior Analysis Service Plan to determine identified training needs. • Determine who is currently working with the person and check to see if these people have been trained 	<p>1) Documentation did not reflect training for parents/other caregivers identified on the Behavior Analysis Service Plan.</p> <p>2) Documentation did not reflect training for staff on the Behavior Analysis Service Plan.</p> <p>3) Documentation reflected training for some, but not all of the people integral to the plan.</p>	C

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		<p>on the program</p> <p>Note: This standard pertains only to people integral to plan – the people who see the person. If the person lives at home with parents, it will include parents. If in a group home or day program, it will include residential and/or day program staff. If the person goes home on visits, it would include the family and the group home. Plan should indicate who should be trained and in what setting programs are implemented.</p>		
13	The provider documents efforts to assist the individual/legal representative to know about rights.	<p>CMS Assurance - Service Plan RECORD REVIEW</p> <ul style="list-style-type: none"> • Ask the provider how they inform individuals and their families or guardians of their rights and responsibilities as related to this service and how frequently. • Ask the provider for examples of how they have assisted individuals to fully exercise their rights and make informed choices. • Review documentation supporting discussion with the provider. • Ask the provider for examples of how they observe the rights and responsibilities of individuals. 	<ol style="list-style-type: none"> 1) Provider documentation did not reflect evidence of assisting the individual/legal representative to know about rights as related to this service. 2) Provider was able to describe efforts to assist the individual/legal representative to know about rights as related to this service, but had not documented the information. 	C
14	The provider has a method in place to document information about the individual's physical health on an ongoing basis.	<p>CMS Assurance – Health and Welfare RECORD REVIEW</p> <ul style="list-style-type: none"> • Ask the provider for method of collecting and documenting historical physical health information relevant to the service provided. • Ask the provider for method of collecting and documenting current information about the individual's 	<ol style="list-style-type: none"> 1) Provider has no method in place to document information about the individual's physical health. 2) Key/Critical pieces of physical health information were absent from the record. 	C

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		<p>physical health.</p> <ul style="list-style-type: none"> • Review record for documentation supporting stated method. • Documentation may include intake forms, stand-alone forms, or other available documentation. • This will be captured in a well written BASP 		
15	<p>The provider has a method in place to document information about the individual's behavioral/emotional health on an ongoing basis.</p>	<p>CMS Assurance – Health and Welfare RECORD REVIEW</p> <ul style="list-style-type: none"> • Ask the provider for method of collecting and documenting historical behavioral/emotional health information relevant to the service being provided. • Ask the provider for method of collecting and documenting current information about the individual's behavioral/emotional health. • Review record for documentation supporting stated method. • Documentation may include intake forms, stand-alone forms, or other available documentation. 	<ol style="list-style-type: none"> 1) Provider has no method in place to document information about the individual's behavioral/emotional health. 2) Key/Critical pieces of behavioral/emotional health information were absent from the record. 	C
16	<p>The provider submits documents to the Waiver Support Coordinator as required.</p>	<p>CMS Service Plan Sub-Assurance RECORD REVIEW</p> <ul style="list-style-type: none"> • Ask the provider for the method used to document submission to WSC. • Documentation that should be submitted to the WSC: <ul style="list-style-type: none"> ○ Copy of Service Logs for dates of service billed ○ Data collected each month ○ Quarterly/Monthly Summaries ○ Annual Report (Separately or included in third Quarterly Summary) ○ Copy of that data is provided to behavior analyst at least monthly 	<ol style="list-style-type: none"> 1) The provider did not have documented evidence indicating submission of the Monthly/Quarterly Summaries. 2) The provider did not have documented evidence indicating the third Quarterly Summary/Annual Report was submitted at least 30 days prior to the Support Plan effective date 3) The provider did have documented evidence indicating the third Quarterly Summary/Annual Report was submitted but not at least 30 days prior to the Support Plan effective date. 	C

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		Review available documentation for proof of submission to the WSC. Examples could include fax transmittal reports with cover sheet indicating exact descriptions of what was faxed, submission tracking logs, date stamps, or indication of date of submission and method sent on the documentation.	4) The provider did not have documented evidence indicating submission of Service Logs.	

CONTROLLED DOCUMENT