Behavior Assistant

- iBudget Handbook -

The primary purpose of Behavior Assistant Services (BAS) is to provide support in implementing the BASP created by the Behavior Analysis services provider. The BAS provider must maintain a copy of the plan.

The service includes assisting the CBA in assessing the person, assisting in implementing new procedures in the presence of the Behavior Analyst, acting as a model for correct implementation for the person or the caregivers, or coaching caregivers to implement the BASP.

Unlike other services, the BAS provider's focus is working with the caregivers to provide them with the skills to execute the procedures as detailed in the BASP, rather than the provision of intervention directly with the person and to evaluate a caregiver's maintenance of skills needed for BASP program implementation.

In addition to training and systematically transferring the implementation of the plan to the caregivers, BAS also include monitoring of caregivers implementing the behavior plan, data collection, copying of forms and documents, maintenance of materials for data collection, and implementation of procedures, as well as communicating with the supervising behavioral services provider, in order to assist the behavior analysis services provider.

| # | Performance Measure/Standard | Protocol | Not Met Reasons |
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| 1 | The provider has complete Service Logs for each date of service provided and billed during the period under review. | iBudget Handbook COMPLIANCE Review Service Logs for the entire period of review. Determine that Service Logs include all required components: Name of person receiving services Name of person providing the service Name of the service Date of service Time in/out Summary or list of services provided In all instances of BAS, the notes must thoroughly document the recipient's activities, as well as observations, data collection, and planning. (Page 2-96) Review Service Logs against claims data to ensure accuracy in billing. Compare each date of service in claims to documented date of service on each Service Log in the period of review. Compare units paid in claims to documented units on each Service Log. Claims may indicate the provider billed by combining documented units covering a few days, a week or more into one billable unit billed on the last date in the service period. There will not be a 1:1 service date to claims date relationship. In these instances, the single billed unit must match total documented units since the last billing date. This standard is subject to identification of a potential billing discrepancy | Service Log was not present for the date of service for which the claim was submitted. (B) Service Log did not include the name of the person receiving services. (B) Service Log did not include a time in/out. (B) Service Log did not include the date service was provided. (B) Service Log did not include a summary or list of the service provided. (B) Discrepancies were noted between units billed and units documented. (B) |

| # | Performance Measure/Standard | Protocol | | Not Met Reasons |
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| 2 | A current approved "LRC Chair Review of Behavior Analysis Services Eligibility" form is in the record. | iBudget Handbook COMPLIANCE Review record to determine if there is a "LRC Chair Review of Behavior Analysis Services Eligibility" form also known as the "LRC BASE" form present covering the entire period of review (this may require review of 2 forms). Verify Behavior Assistant Services have been checked/marked in the Requested Services table. Determine the "Behavior Assistant Services" section of the form is complete, indicates "approved", dated and signed by the APD Regional Behavior Analyst or designee. Compare current APD Regional Behavior Analyst or designee signature date to previous year signature date to determine if a lapse occurred between annual reviews. ***In instances where there was a lapse in obtaining a signed LRC Chair Review of Behavior Analysis Services Eligibility form or the provider is still waiting for annual renewal – the provider must show due diligence efforts taken to obtain the necessary approval. This must be in the form of documented communications with the WSC, Behavior Analyst, APD Regional Office, or other entities as necessary. Efforts to obtain the Behavior Analysis Services Eligibility form should begin well in advance of the expiration date and continue on a frequent basis when not received by the expiration date. | 2) | Record did not contain a current approved LRC BASE form covering the period of review. LRC BASE form did not indicate approval for Behavior Assistant. LRC BASE form was not signed by the APD Regional Behavior Analyst or designee. APD Regional Behavior Analyst or designee signature dates on the LRC BASE form demonstrated a lapse in eligibility during the period of review. Provider documentation demonstrated timely efforts to obtain appropriate signed documentation from the Regional Behavior Analyst or designee, but through no fault of their own was unable to obtain requested documentation. *****Not Met but not calculated into score |
| 3 | The current Behavior Analysis Service Plan is in the record. | iBudget Handbook Rule 65G-4 F.A.C. COMPLIANCE | 1) | Record did not contain a current Behavior Analysis Service Plan. (B) |

| # | Performance Measure/Standard | Protocol | Not Met Reasons |
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| | | Review the record to locate the current Behavior Analysis Service Plan (BASP). • Look for the date on plan indicating date written or updated. • Dates indicated on LRC Behavior Plan review/approvals and Assistant approvals when applicable can assist with this determination. | |
| | | This standard is subject to identification of a potential billing discrepancy | |
| 4 | The provider maintains documentation of required monthly "supervision" of the Behavior Assistant by the supervising Behavior Analyst. | iBudget Handbook COMPLIANCE The Behavior Assistant must maintain evidence of required monthly "supervision" on a supervision log, showing the date, time started, and time ended with signatures of both the behavior assistant and the supervising behavior analyst. Ask the provider to describe method used to track and document required monthly supervision. Review BASP for the "description of Behavior Analyst monitoring of Behavior Assistants". Review Behavior Assistant supervision logs covering the entire period of review. Monthly supervision logs must contain at a minimum: | Provider documentation did not demonstrate evidence of required monthly "supervision" of the Behavior Assistant by the supervising Behavior Analyst. Provider documentation demonstrated evidence of required monthly "supervision" of the Behavior Assistant for some but not all months. Provider documentation demonstrated supervision was not conducted according to the monitoring plan identified in the BASP. Provider documentation demonstrated supervision logs were missing date of supervision for one or more dates. |
| | | Date Start and end time Signature of Behavior Assistant Signature of supervising Behavior Analyst Note: The Behavior Assistant must submit copies of supervision logs to the APD regional behavior analyst at the time of review or | 5) Provider documentation demonstrated supervision logs were missing start and/or end time one or more dates. 6) Provider documentation demonstrated supervision logs were missing signature of the Behavior Assistant. |

| # | Performance Measure/Standard | Protocol | Not Met Reasons |
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| | | when renewal of BAS is requested, otherwise continuation or renewal of BAS will be denied. | 7) Provider documentation demonstrated supervision logs were missing the signature of the Behavior Analyst. |
| 5 | A Quarterly Summary covering services provided and billed during the period under review is in the record. | iBudget Handbook COMPLIANCE The quarterly time period begins on the effective date of the Support Plan. | One or more Quarterly/Monthly Summaries were not in the record. One or more Quarterly/Monthly Summaries were not reflective of progress toward one or more Support Plan goals/outcomes. |
| | | Determine Support Plan effective date to determine Quarterly Summary timeframes. Determine if provider completes Monthly rather than Quarterly Summaries. Monthly Summaries in lieu of Quarterly Summaries are acceptable. Review each Quarterly (Monthly) Summary within the review period to determine minimum content is included: Description of the person's progress, or lack thereof, toward achieving each of the goals/outcomes identified on the Support Plan based service rendered. Description of the activities that took place during each quarter (month) of the Support Plan year that services were rendered. *Description of activities that took place during each quarter (month) of the Support Plan year for Behavior Assistant services will vary by person. Description could include but not be limited to social activities, special events, Baker Acts, police involvement, use of | 3) One or more Quarterly/Monthly Summaries did not include a description of activities that took place during each quarter/month. 4) One or more Quarterly Summaries were not aligned with the Support Plan effective date. |
| | | of the Support Plan year for Behavior Assistant services will vary by person. Description could include but not be limited to social | |

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| | | significant milestone, provide updates on any unresolved issues reported on a previous quarterly, etc. If the provider was not providing services at the time the last Quarterly (Monthly) Summary was due, score as N/A. | |
| 6 | The Annual Report covering services provided and billed during the period under review is in the record. | iBudget Handbook COMPLIANCE Review record to determine if there is an Annual Report present covering the entire period of review (this may require review of 2 Annual Reports). Review record to determine Support Plan effective date. • Determine if the Annual Report is a component of the third Quarterly Summary, ninth Monthly Summary (for those completing Monthly Summaries) or a separate document (which is acceptable). • The third Quarterly Summary or ninth Monthly Summary may serve as the Annual Report when a summary of the previous three quarters (or nine months) is included. • Determine date Annual Report was completed and provided to the Support Coordinator. • Annual Report must be completed and provided to the Support Coordinator at least 60 days prior to the Support Plan effective date. If the provider rendered services to the person for less than 12 months, the Annual Report would cover all months since services were initiated. | Annual Report was not in the record. (B) Annual Report was completed, but not at least 60 days prior to the Support Plan effective date. (B) Annual Report did not indicate a date of completion. (B) |

| # | Performance Measure/Standard | Protocol | Not Met Reasons |
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| | | If provider was not providing services to the person at the time the last Annual Report was due, score as N/A. | |
| | | This standard is subject to identification of a potential billing discrepancy | |
| 7 | The Annual Report covering services provided and billed during the period under review contains all required components. | iBudget Handbook COMPLIANCE Refer to Support Plan to determine the goals/outcomes addressed by Behavior Assistant Review record to determine Support Plan effective date. • Determine if the Annual Report is a component of the third Quarterly Summary, ninth Monthly Summary (for those completing Monthly Summaries) or a separate document (which is acceptable). • The third Quarterly Summary or ninth Monthly Summary may serve as the Annual Report when a summary of the previous three quarters (or nine months) is included. • Review Annual Report for a summary of the first three quarters (or nine months) of the Support Plan year which must include: • Description of the person's progress, or lack thereof, toward achieving personally determined goals/outcomes identified on the Support Plan specific to the service rendered. • Any pertinent information about significant events that occurred in the person's life during the previous year. *Examples of "any pertinent information about significant events that occurred in the person's life during the previous year" will vary by person but could include and not be limited to major milestone achieved, use of reactive strategies, BASP updates, significant | Current Annual Report was not in the record. Annual Report did not include a summary of the previous three quarters (or nine months) of the Support Plan year. Annual Report did not contain a summary of the person's progress toward achieving one or more personally determined goals/outcomes on the Support Plan. Annual Report did not contain any pertinent information about significant events that occurred in the person's life during the previous year. |

| # | Performance Measure/Standard | Protocol | Not Met Reasons |
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| | | event in the person's personal life that may have influenced daily activities, significant health events, change in residence, etc. If a provider has rendered services to the person for less than 12 months, the Annual Report would cover all months since services were initiated If the provider was not providing services to the person at the time the last Annual Report was due, score as N/A. | |
| 8 | The provider maintains accurate Service Authorization(s) covering services provided and billed during the period under review. | iBudget Handbook COMPLIANCE Service Authorizations are provided annually or more frequently as changes dictate. Review the Service Authorization for Behavior Assistant to ensure: • Service Authorizations are available to cover all services provided and billed during the period under review. • The Service Authorizations are in approved status; • The Service Authorizations indicate the correct rate (e.g. agency, solo, geographic, non-geographic, Monroe rates). Review Claims data to determine rate billed: ❖ Refer to the current APD Provider rate table as needed. WSCs and service providers must verify the Service Authorizations are correct based on the amount, duration, frequency, intensity, and scope authorized for the service in the iBudget system. If corrections are needed the service provider should immediately contact the WSC for resolution. | Service Authorizations were not present in the record. One or more Service Authorizations were not present in the record. One or more Service Authorizations were not in approved status. One or more Service Authorizations did not indicate the correct rate. |

| # | Performance Measure/Standard | Protocol | | Not Met Reasons |
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| | | Consider provider's documented due diligence in securing corrected Service Authorizations when incorrect Service Authorizations are received or updates are in process. | | |
| 9 | Behavior assistant services are limited to a maximum of 32 quarter-hours per day. | iBudget Handbook COMPLIANCE Review claims data for dates of service billed in excess of 32 quarter hours. • Maximum billable units per day cannot exceed 32 quarter hours Review claims data for dates of service billed in excess of 24 but less than 32-quarter hours. • Individuals requiring over 24 quarter-hours per day must have monthly reviews by the LRC chair or designee. Review total documented units on each Service Log for the entire period of review to determine if documented units exceeded 32- quarter hours (8 hrs.) on any date. Individuals requiring over 24 quarter-hours per day must have monthly reviews by the LRC chair or designee. Refer back to protocol on #1 if necessary if the provider combines several service dates into one billing cycle. | 2) | Documentation demonstrated provider billed in excess of 32 units of service. (B) Documentation demonstrated provider billed in excess of 24 units per date of service without documented monthly LRC chair/designee review. (B) |
| 10 | The Providers documentation indicates service provided is directly related to the achievement of an outcome on the person's current support plan. | iBudget Handbook PERSON CENTERED PRACTICE Review Support Plan(s) for Behavior Assistant goals/Behavior Analysis related goals/outcomes. Review the Outline of the Behavior Assistant's routine and/or duties described in the BASP. | 2) | Provider did not have a copy of the Support Plan(s) or documented due diligence to obtain a copy. Provider documentation did not demonstrate provider awareness of the current Support Plan goals. |

| # | Performance Measure/Standard | Protocol | | Not Met Reasons |
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| | | Behavior Assistants provide direct implementation of services as outlined in the Individual Behavior Program. Review content in Service logs to determine if the Behavior Assistant is following the outline as described in the BASP. Determine if service being provided shows a direct relationship to the outcome/goal on the person's Support Plan(s). Consider "overall" documentation for the period of review. If there are only isolated occurrences of documentation not relating to a goal score as "met". | 3) | Provider documentation did not demonstrate a direct relationship to the achievement of one or more goals on the person's Support Plan. |
| 11 | The Provider is in compliance with billing procedures and the | iBudget Handbook COMPLIANCE | 1) | Provider documentation demonstrated provider is a solo but billed the agency rate. (B) |
| | Medicaid provider agreement. | Provider bills the appropriate rate: Solo vs. Agency Geographic, non-geographic, Monroe County rate An agency or group provider for rate purposes is a provider that has 2 or more employees to carry out the enrolled service(s). A | , | Provider documentation demonstrated provider billed the geographic rate for services rendered in a non-geographic area. (B) Provider documentation demonstrated |
| | | provider that hires only subcontractors to perform waiver services is not considered an agency provider for rate purposes. | | services were provided in the school system. (B) Provider documentation demonstrated |
| | | Determine if provider had at least two employees to carry out the enrolled service(s) during the period of review. | , | provider billed the Monroe County rate for services not rendered in Monroe County. (B) |
| | | Determine if payroll tax is withheld from employees' wages by their employer. | 5) | Provider documentation demonstrated the provider is not considered an agency for rate purposes but billed the agency rate. |
| | | Review provider payroll to confirm withholding of the following taxes: • Federal income tax withholding • The employee's portion of Medicare tax and employee's portion of Social Security tax (FICA) | 6) | (B) Service is not being rendered in accordance with the Handbook. (B) |

| # | Performance Measure/Standard | Protocol | Not Met Reasons |
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| | | Employer's Federal Unemployment Tax Act (FUTA) Review Claims data to determine rate billed Refer to the current APD Provider rate table as needed. | |
| | | Review 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 rate. (Days per week/month, Q/H per day/week, etc.) Behavior Assistant services cannot be provided in a school setting | |
| | | If service is being routinely rendered at a frequency less than or more than the Service Authorization, score as Met and add a discovery. | |
| | | This standard is subject to identification of a potential billing discrepancy | |
| 12 | The Provider Bills for services after services are rendered. | iBudget Handbook COMPLIANCE Provider is not to bill for services prior to rendering. Review Claims data for date billed. Review dates on each Service Log. Compare date of service on Service Log to "claim billed date" in claims. | Provider documentation demonstrates the provider billed for services prior to rendering on one or more dates during the period under review. |

| # | Performance Measure/Standard | Protocol | Not Met Reasons |
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| | | Determine if services were rendered prior to billing for each date of service during the period of review. | |
| 13 | Training for parents, caregivers, and staff on the Behavior Analysis Service Plan is documented. | iBudget Handbook Rule 65G-4 F.A.C. COMPLIANCE Review the current Behavior Analysis Services Plan Ask the provider to explain the method of documenting this training. Determine who is currently working with the person: direct support staff, family, other caregivers Refer to the section of the BASP that includes "Description of performance-based training for persons implementing procedures". Review provider documentation to determine if individuals identified have been trained on the Behavior Analysis Service Plan 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. | Provider documentation did not demonstrate training for parents/other caregivers identified as integral to the Behavior Analysis Service Plan. Provider documentation did not demonstrate training for direct support staff identified as integral to the Behavior Analysis Service Plan. Provider documentation demonstrated training for some, but not all direct support staff identified as integral to the Behavior Analysis Service Plan. Provider documentation demonstrated training for some, but not all parents/other caregivers identified as integral to the Behavior Analysis Service Plan. |
| 14 | The provider documents ongoing efforts to assist the person/legal representative to know about rights. | iBudget Handbook Rule 65G-2 F.A.C., Chapter 393 F.S. PERSON CENTERED PRACTICE | Provider documentation did not demonstrate efforts to assist the person/legal representative to know about rights. |

| # | Performance Measure/Standard | Protocol | | Not Met Reasons |
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| | | Ask the provider to describe method of assisting the person and when applicable the legal representative to know about their rights and responsibilities as related to this service. Review provider documentation supporting stated methods for provider efforts to assist the person/legal representative to know about rights on an ongoing basis. Review available Service Logs, Quarterly/Monthly Summaries, Annual Report and/or other provider documentation demonstrating efforts to support the person, and when applicable the legal representative to know about rights. *Examples of efforts to assist the person/legal representative to know about rights will vary by person and frequency of service. Information could include, but not be limited to specific rights restrictions identified on behavior plan, impact of behaviors on others rights, right to privacy, education on Informed Consent, right to personal possessions and effects, right to participate in the development of IP and BASP, right to know who sees records (confidentiality), especially regarding behavior incidents. | 2) | Provider documentation demonstrated efforts to assist the person/legal representative to know about rights but not on an ongoing basis. |
| 15 | The provider documents ongoing efforts to ensure the person's physical health needs are addressed. | iBudget Handbook PERSON CENTERED PRACTICE Ask the provider to describe method used to gain and document knowledge of the person's physical health information relevant to the service provided. • Ask the provider how information related to physical health is maintained and updated on an ongoing basis. • Review record for documentation supporting stated method. • Documentation may include intake forms, stand-alone forms, Service Logs, Quarterly/Monthly Summaries, Annual Report, | 2) | Provider documentation did not demonstrate efforts to gather information about the person's physical health needs. Provider documentation demonstrated knowledge of the person's physical health needs but not ongoing efforts to address identified needs. Key and critical physical health information was absent from the record. |

| # | Performance Measure/Standard | Protocol | Not Met Reasons |
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| | | and other provider documentation demonstrating efforts in this area. *Key/critical physical health information will vary by person, service, frequency, and intensity of service. Information could include, but not be limited to diagnosis, certain environmental factors, medication related information, food allergies, medical/physical/emotional conditions influencing intervention techniques and other key pieces of information critical to maintaining the person's physical health, and relevant to the service provided. | |
| 16 | The provider documents ongoing efforts to ensure the person's behavioral/emotional health needs are addressed. | iBudget Handbook PERSON CENTERED PRACTICE Ask the provider to describe method used to gain and document knowledge of person's behavioral/emotional health information relevant to the service provided. • Ask the provider how information related to behavioral/emotional health is maintained and updated on an ongoing basis. • Review record for documentation supporting stated method. • Documentation may be found in Service Logs, Quarterly/Monthly Summaries, Annual Report, intake forms, stand-alone forms, or other available provider documentation. *Key/critical behavioral/emotional health information will vary by person, service, frequency, and intensity of service. Information could include, but not be limited to diagnosis, certain environmental factors, medication and related information, Behavior Plans, Safety Plan, police involvement, emotional well-being (stress, anxiety, depression, grief, other emotional issues, or diagnosis) and other | Provider documentation did not demonstrate efforts to gather information about the person's behavioral/emotional health needs. Provider documentation demonstrated knowledge of the person's behavioral/emotional health needs but not ongoing efforts to address identified needs. Key and critical behavioral/emotional health information was absent from the record. |

| # | Performance Measure/Standard | Protocol | Not Met Reasons |
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| | | information critical to maintaining the person's behavioral/emotional health and relevant to the service being provided. | |