FBA, BSP & CIP Process

This resource outlines the role of the ODP/BSASP, BS, and the SC in the SSD/ BS FBA Plan Development process and can be used to monitor the progress of the plan development.

- **Acronyms in this document**

  - **BP:** Business Partner
  - **BS:** Behavioral Specialist
  - **BSASP:** Bureau of Supports for Autism and Special Populations
  - **BSP:** Behavioral Support Plan
  - **BSS:** Behavioral Specialist Service
  - **CIP:** Crisis Intervention Plan
  - **CR:** Critical Revision
  - **DBO:** Desired Behavioral Outcome
  - **FBA:** Functional Behavioral Assessment

  - **GAS:** Goal Attainment Scale
  - **HCSIS:** Home and Community Services Information System
  - **ODP:** Office of Developmental Programs
  - **PM:** Provider Mailbox RA-basprovidersupprt@pa.gov
  - **RO:** Regional Office [Rep]
  - **SC:** Support Coordinator
  - **SSB:** Systematic Skill Building
  - **SSD:** Specialized Skill Development

- **To review/complete <u>before</u> the first Critical Revision:**

  - ☐ Prior to developing plans, **the BS** needs to complete all <u>required trainings</u> on MyODP.

  - ☐ If *SSD/BS FBA Plan Development* has been authorized/ billed for in the past, **the BS** should instead update the FBA. *SSD/BS FBA Plan Development* should not be added to the ISP in these instances. If it is added to the plan, the plan will be rejected.

  - ☐ If **the BS** does not have access to HCSIS to enter the BSP and CIP, they need to request the correct rights from their agency's HCSIS BP Administrator. To prevent a delay in clinical review, they can submit the BSP/ CIP using the <u>Sample BSP HCSIS Screen Template doc</u>. This document will not be accepted for any other reason. If this document is used, the *SSD/BS FBA Plan Development*, *Direct* and *Consult* services cannot be authorized for billing until the BSP/ CIP is entered into HCSIS.

- **SC CREATES FIRST CR:** *Adds SSD/ BS FBA Development*

  - ☐ **SC, team** and **participant** work to identify a BS provider.

  - ☐ **SC** completes a CR to add *SSD/ BS FBA Plan Development* (96156) to the ISP for a 60-day time period and submits for ODP/BSASP review. (Note: **SCs** are able to ask for extensions, if needed).

  - ☐ **RO** approves (but does not authorize) the service and then notifies the **SC.**

  - ☐ **SC** notifies the **BS** that the *SSD/ BS FBA Plan Development* service has been approved, and they can begin the plan development.

Within 60 days from the SSD/ BS FBA Plan Development service start date, the BS:

☐ **Conducts the FBA for each behavioral concern:** (a) working with the participant, team and others who know the participant best to collect data, (b) reviewing the FBA with the team, (c) developing a BSP and CIP based on the FBA, (d) developing datasheets and GAS charts for each behavioral outcome/ BS goals/ objective and (e) ensuring if restrictive procedures are warranted, the plan is submitted to the agency's Human Rights Team for approval.

☐ **Enters the BSP and CIP in the corresponding section in HCSIS, which includes:** (a) checking the BSP restrictive indicator stating "Yes, the BSP is restrictive" if the Human Rights Team has approved a restrictive plan for the Behavioral Outcome, (b) entering the following information in for each behavioral outcome/ BS goal: hypothesis, behavioral outcome, antecedent strategies, replacement or alternative strategies, consequence strategies and means of monitoring, (c) entering information into the before, during and after sections of the CIP.

    ☐ **BS emails the SC the following with the notification that BSP/CIP was entered into HCSIS:** (1) FBA summary, (2) GAS chart(s): one for each DBO, (3) name of BS who wrote FBA, BSP, CIP, and GAS charts, (4) BS email address, (5) if BS used the Sample BSP HCSIS Screen Template doc, and (6) the requested hours for SSD/ BS Consult and Direct (including frequency and duration)

    ☐ **SC adds the following in the ISP > Service Details > SSD/ BS FBA Plan Development service > "Comments" section:** (1) name of BS who wrote FBA, BSP, CIP, and GAS charts and (2) BS email, (3) if BS submitted the BSP/ CIP using the Sample BSP HCSIS Screen Template doc.

    ☐ **SC emails notification of BSP/ CIP submission to the PM and copies the BS and assigned RO. SC attaches the** (1) FBA Summary, (2) BS GAS charts, (3) requested hours for SSD/ BS Consult and Direct (including frequency and duration), and (4) the Sample BSP HCSIS Screen Template doc, if applicable.

    * Hours are approved with consideration of frequency (which should be consistent with the authorization frequency in the service details of the ISP, typically delivered multiple times per week). If hours are approved with the request being multiple days a week, it is expected they are provided in that frequency and not al in one day. Best Practice for quality and effective services is not to provide al hours in one day.

Once the assigned BSASP clinical rep completes the review, they send a status notification email with the Clinical Review Checklist attached to the SC, BS Provider and assigned RO:

HOURS

☐ **Rejected:** The requested number of *SSD/ BS Direct* and/or *Consult* hours are not justified. The BS must provide additional information to justify this request or reduce the hours requested within 7 business days of this email.

☐ **Approved:** The requested number of hours of *SSD/BS Direct* and/or *Consult* as listed above, are approved.

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PLAN

☐ **Rejected:** Revisions are necessary before the BSP/CIP can be approved. Details on revisions can be found on the attached clinical BSP/CIP review checklist. Revisions must be completed by the <mark>BS</mark> within 7 business days of the date of this email.

*Once BS completes the revisions, <mark>BS</mark> sends confirmation to the <mark>SC. SC</mark> will then alert the <mark>clinical rep</mark> who completed the checklist, to prompt another review.

☐ **Approved:** The BSP/CIP are approved. No revisions are needed and the <mark>BS</mark> has been confirmed to be qualified. Please submit the DBOs in the BSP into HCSIS as the BS's goals/objectives.

*If BSP/CIP was submitted on the Sample HCSIS Screen Template doc, <mark>BS</mark> needs to enter the BSP/CIP into HCSIS within 7 business days. Then send confirmation of completion to the <mark>SC.</mark> The <mark>SC</mark> will then email the <mark>PM</mark> to confirm completion. *SSD/BS Plan Development*, *Direct* and *Consult* **cannot be approved until the BSP/CIP is in HCSIS.**

Once the hours and the BSP/ CIP both receive an "approved" status, the <mark>SC</mark>*:*

- **CREATES SECOND CR:** *Adds goals/objectives and Direct/Consult services*
  ☐ <mark>SC</mark> adds the approved <mark>BS</mark> goals and objectives on the HCSIS goals screen, making sure they match the BS GAS charts and DBOs in the BSP, verbatim. (Each DBO should have a matching BS goal/ Objective).
  ☐ <mark>SC</mark> adds *SSD/ BS Direct and Consult* services to the ISP and ensures (a) the correct BS goals/objectives are linked and (b) the hours match the hours approved by clinical in the BSP/CIP approval email.
  ☐ <mark>SC</mark> submits the CR for ODP/BSASP review.

  IF THE ABOVE ARE CORRECT:
  ☐ <mark>RO</mark> approves and authorizes all BS services (*SSD/BS FBA Plan Development, Direct* and *Consult*).

  ☐ <mark>RO</mark> emails the <mark>SC</mark> and clinical rep to notify them that the BS services are approved/ authorized and *SSD/ BS Direct* and *Consult* can begin.

  ☐ <mark>SC</mark> notifies the <mark>BS</mark> that the services have been approved and authorized. Services can begin.

  IF ANY OF THE ABOVE ARE INCORRECT OR THE BSP/CIP IS NOT IN HCSIS:
  ☐ The plan must be rejected and revisions made and or BSP/CIP must be entered into HCSIS before the BS services can be approved and authorized.