

Participant Name:

Plan of Care Year _____ thru _____

Behavioral Health and Non-Complex Tasks Review

Part I – Behavioral Health Needs Review

Two of the three sets of Criteria i. MUST be met with documentation presented to verify

Criteria i.1.

One if the following is present:

- Behavioral procedures developed by a Licensed Mental Health Professional (LMHP) and specific to the individual are a part of the individuals Plan of Care and include specific prevention, intervention and teaching strategies (these procedures are either actively monitored with revision and training as needed by the professional who authored them OR the individual was discharged from services by that professional after a period of stability and the professional recommendation included need for maintenance of the procedures to assure stability over time and prevent future occurrences)
- The individual is actively engaged in a behavioral health treatment service and the professional(s) providing treatment has required that staff present follow specific instructions on how best to teach the individual or assist the individual to use their coping skills/therapy homework

The following is verified through documentation submitted:

- The procedures and/or therapeutic instructions require coaching, support or intervention at least on a daily basis
- The procedures and/or therapeutic instructions involve more than simple redirection or prompting

Criteria i.2.

One of the following is present:

- Physical intervention beyond simple touch prompt or redirect is required on a routine basis (at least weekly)
- The individual's environment must be carefully structured based upon professionally driven guidance/assessment to avoid behaviors problems or minimize symptoms as evidenced by all of the following:
 - Detailed description of the "structure" requirements is outlined in the plan
 - The requirements are accompanied by professional opinion that these are necessary
 - The "structure" is more complex than a simple preference for a routine from the individual's perspective (i.e., this is NOT met simply because an individual wants a certain order of activities in his/her daily life)

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Criteria i.3.

One of the following is present:

- Behavior resulting in substantial harm to self and/or others is present such that at least once a week one of the following occurs:
 - If the individual typically shares supports or lives with others (roommate or family), he/she has to be separated in some manner from others in the home and/or is not able to share supports
 - The individual is unable to go to work/school and/or participate in his/her community (this can include being kicked out of options due to the behavioral health issue/symptoms noted; OR avoidance of activities outside of the home because of the high frequency when these are attempted)
 - The individual goes to work/school but has to be separated in some manner from others in the work/school area
- Behavioral health symptoms are present at such a severity such that at least once a week one of the following occurs:
 - If the individual typically shares supports or lives with others (roommate or family), he/she has to be separated in some manner from others in the home and/or is not able to share supports
 - The individual is unable to go to work/school and/or participate in his/her community (this can include being kicked out of options due to the behavioral health issue/symptoms noted)
 - The individual goes to work/school but has to be separated in some manner from others in the work/school area

AND

One of the following MUST be required and provided and documentation presented to verify

Criteria ii.

- “Higher credentialed” direct support staff as evidenced by one of the following:
 - Staff with higher education/training such as college coursework in a human services field, bachelor’s degree in human services field or other documented education related to behavioral health or wellness
 - Specialized licensing/credentialing such as Registered Line Technician (ABA) or NADD DSP credentialing
 - Advanced training is needed to support the severe behavioral health symptoms (this is detailed in the information submitted and the provider will either assist the staff in securing it or has documentation of the training the staff has received previously)
 - Significant work experience with dual diagnosis (behavioral health and IDD) will be required such as experience working in programs supporting individuals with dual

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diagnosis like DNP or North Lake Stabilization Unit, psychiatric aide experience, OR significant personal experiences supporting a loved one with dual diagnosis

- Higher qualified supervisors as evidenced by one of the following AND the expertise is NOT available through other professionals/services (i.e., this is not a substitute for accessing the needed professional services/treatment but is needed to assure implementation of professional recommendations and/or to liaison with professionals providing direct treatment; if the individual needs behavioral health services these should be secured and this is not a substitute for those services when needed):
 - Provider agency has on staff or is imminently hiring supervisor with at least Master's degree in related field
 - Specialized licensing such as BCBA/LMHP

Part II – Non-Complex Medical Tasks Review

Both of the following criterion MUST be required and provided and documentation presented to verify

Criteria i.

Individuals must require at least two of the following non-complex nursing tasks:

- Suctioning of a clean, well-healed, uncomplicated mature tracheostomy in an individual who has no cardiopulmonary problems and is able to cooperate with the person performing the suctioning (excludes deep suctioning);
- Care of a mature tracheostomy site;
- Removing/cleaning/replacing inner tracheostomy cannula for mature tracheostomy;
- Providing routine nutrition, hydration, or medication through an established gastrostomy or jejunostomy tube (excludes naso-gastrostomy tube).
- Clean intermittent urinary catheterization;
- Obtaining a urinary specimen from a port of an indwelling urinary catheter;
- Changing a colostomy appliance
- Ensuring proper placement of nasal cannula (excludes initiation/changing of flow rate);
- Capillary blood glucose testing
- Simple wound care (including non-sterile/clean dressing removal/application);
- Other delegable non-complex tasks as approved by OCDD

Criteria ii.

- Documented evidence that home health/skilled nursing agencies cannot provide the service via other available options, such as the Medicaid State Plan (attach documented evidence).

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Submitted by : _____ Date: _____

(Provider Agency Personnel)

Reviewed by : _____ Date: _____

(Support Coordinator) Required Documentation attached: Yes No

Recommended by : _____ Date: _____

(LGE Med Cert)

Criteria Met

Criteria Not Met

_____ Date: _____

*SORC Chair Signature

State Office Review Committee Comments: _____

*"Criteria" determination based on recommendation from designated State Office clinical staff.