



Division Directive Number
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Title: Enrollment of New Providers

Applies to: Regional Offices

Purpose:

1. To describe the process Regional Offices use to enroll new providers requesting a contract to provide services through the Department of Mental Health/Division of Developmental Disabilities.
2. To prescribe consistent standards for the enrollment, training, and certification process to assure that providers possess the necessary skills, philosophy, and qualifications to be successful.

Definitions:

Certification: A process used by the Division of Developmental Disabilities to review and approve specified providers for participation and funding through the Home and Community Based Medicaid Waiver program. Certification provides deemed status for licensure so both credentials are not required. Certification is granted for a 2-year period.

Community Employment: Competitive work, in an integrated work setting, with ongoing support services for individuals with severe disabilities for whom competitive employment either has never been possible, or has been interrupted as a result of the disability. The service must be based on a supported employment assessment and must be prescribed in the individual service plan.

Group Home: Services include providing care, supervision, and skills training in activities of daily living, home management, and community integration. The services are provided to groups of recipients in group homes, residential care centers and semi-independent living situations (clustered apartment programs) licensed or certified by DMH (licensure, certification and accreditation all meet the requirements of 45 CFR Part 1397).

Independent Living Skills Development: Services provided to enable individuals to increase their independent functions. These services may be provided to individuals or to groups and may be provided either on-site in a center based setting, in the community, or in the individuals home as differentiated by the three distinct components. The components are Day Services, which is provided in a stand-alone licensed or certified day program facility; Community Integration, which is provided in the community; and Home Skills Development, which is provided in the individuals home. This category of service is different from Personal Assistance as specific outcomes in the individual service plan are required.

Individualized Supported Living (ISL): ISL services provide individualized supports, delivered in a personalized manner, to individuals who live in homes of their choice; no more than four individuals may share a residence. Services are designed to assist individuals in acquiring, retaining, and improving the self-help,

socialization, and adaptive skills necessary to reside successfully in home and community-based settings; may also include assistance with activities of daily living and assistance with instrumental activities of daily living. The residence (house or apartment) is a private dwelling owned or leased by at least one of the individuals residing in the home and/or by someone designated by one of those individuals such as a family member or legal guardian.

License: Written notification that a residential facility or day program complies with rules and standards of care under the provisions of applicable licensing requirements.

Medicaid Waiver: The Missouri Department of Mental Health's Division of Developmental Disabilities (Division of DD) administers five 1915(c) Home and Community Based Medicaid Waiver programs for individuals with developmental disabilities. The five waivers are the Comprehensive Waiver, Missouri Children with Developmental Disabilities Waiver (MOCDD or Sara Jian Lopez Waiver), Community Support Waiver, Autism Waiver, and the Partnership for Hope Waiver.

Personal Assistance: Personal Assistant services include assistance with any activity of daily living (ADL) or instrumental activity of daily living (IADL). Personal assistance may also include general supervision and protective oversight. The Personal Assistant may directly perform some activities and support the individual in learning how to perform others.

Plan of Correction: A written document outlining the provider's strategies to address any areas of non-compliance with applicable certification standards reported through the certification survey report.

Provider Improvement Plan: Written outcome-based strategies outlining actions formulated from the integration or synthesis of information and issues gathered utilizing the Action Plan Tracking System (APTS), Customer Information Management, Outcomes, and Reporting system (CIMOR), as well as other available monitoring data. Improvement Plans are written for the purpose of increasing performance above current levels, overall system improvement, or to put processes into place to prevent an issue from developing into a more serious situation. These plans are only required under the criteria in the Provider Improvement Plan section of Division Directive [4.080 - Integrating Quality Functions](#).

Provisional Certificate: An initial certificate granted for a period not to exceed one year to a new provider or service, a converted agency or provider, or an existing provider adding a waived service.

Respite Care, In-Home: Support provided on a short-term basis to individuals unable to care for themselves because of the absence, or need for relief, of those persons normally providing the care.

Respite Care, Out-of-home: Out of home respite care consists of temporary care provided outside the home in a licensed or accredited Residential Care Facility (RCF) for a period of no less than 24 hours by trained, qualified personnel, on an intermittent basis. The purpose of respite care is to provide temporary relief to the customary caregiver.

Shared Living: Shared living is an arrangement in which an individual(s) with a disability chooses to live with an individual, couple, or a family in the community to share their life experiences together. A shared living home could be a single person, a college student, single parents, empty nesters or a two-parent family with children or a person could live with an individual in their home, who wants to share their life with an individual with a disability. Shared living can be provided in the individual's home (Companion Services) or in the home of the caregiver (Host Home Services)

Unmet needs: A pattern or trend identified from a collection of individual service plans.

The above mentioned services are a partial listing. A comprehensive listing can be located at <http://dmh.mo.gov/docs/dd/sec13ServiceDescriptiondraft.pdf>.

I. Enrollment Process

The Regional Office will assure that potential providers understand that during this process the Division of DD will be determining qualifications and ability to provide the services as described. The Regional Director will assign staff to implement and oversee this process.

During this process one of the following will occur:

- The Division of DD determines the potential provider meets the threshold for the rating of the application, fully understands the expectations/standards for providers, has sufficient skills and/or experience, and is prepared to successfully meet the requirements outlined. The Division of DD approves the provider to begin the process.
- The Division of DD determines the potential provider lacks sufficient skills/experience/background to provide the service. The potential provider is informed of this in writing.
- The provider fails to complete the process as outlined. The potential provider is informed in writing that the contract is denied.
- The provider voluntarily withdraws during any phase of this process.

Potential new providers that are nationally accredited will be deemed certified, but shall complete this enrollment process.

Beginning this process does not guarantee providers will successfully complete enrollment and/or be issued a contract or a certificate. Nor does it guarantee consumers will choose to receive services with the provider.

A. Application

1. The Contract Provider Enrollment Application and Business Proposal form is located on the Missouri Department of Mental Health Division of Developmental Disabilities website at <http://dmh.mo.gov/docs/dd/applicationinformation.doc>. Applicants are to be directed to this web site where they can complete the application and submit to the Regional Office. Instructions for completion of the application packet are maintained on the web site.
2. Supporting documentation, as indicated in the application, that cannot be included electronically will need to have hard copies sent to the respective Regional Office along with a hard copy of the application and business proposal.
3. Applications should not be submitted to the Regional Office for review until all necessary information and supporting documentation is gathered and included in the application packet.

Applications that are submitted that are missing components may be denied without further action by the Regional Office.

4. When complete applications are received by the Regional Office, they will be reviewed to ensure all requirements are met. Designated Regional Office staff will score the application using a standardized scoring system. The scoring system evaluates the application based on Division philosophy and priorities; applicant business practices; service definition and contract requirements; the support needs of individuals served by the Division, and best practice. Scoring structure is reflected below:

<u>SECTION II – CERTIFIED, ACCREDITED AND RELATED SERVICES SCORING</u>	
Business Plan, Experience and Expertise (from Section 1)	5 points
General Philosophy	10 points
Challenging Behaviors	6 points
Medical Supports	6 points
Co-Occurring Conditions	6 points
Staff Experience and Expertise	4 points
Section II Grand Total	37 points
Minimum points required to be approved for pursuit of a contract if all other requirements are met	25 points

<u>SECTION III – PROFESSIONAL AND THERAPEUTIC SERVICES SCORING</u>	
Business Plan, Experience and Expertise (from Section 1)	5 points
General Philosophy	4 points
Staff Experience and Expertise	4 points
Section III Grand Total	13 points
Minimum points required to be approved for pursuit of a contract if all other requirements are met	9 points

<u>SECTION IV – NON-TREATMENT SUPPORT SERVICES SCORING</u>	
Business Plan, Experience and Expertise (from Section 1)	5 points
Staff Experience and Expertise	4 points
Section IV Grand Total	9 points
Minimum points required to be approved for pursuit of a contract if all other requirements are met	
<ul style="list-style-type: none"> • Assistive technology, Personal Electronic Device, Dental and Transportation • Environmental Accessibility Adaptations and Specialized Medical 	8 points 6 points

5. A brief summary of the review, the rating and a recommendation is written by the designated staff and given to the Regional Director for consideration.
6. The Regional Director determines approval or denial of the application. If the Regional Director recommends approval, the application is routed to the Division Director or designee for final review. If recommendation is to not approve, a copy of the written decision is sent to the Division Director or designee, and to the appropriate DD Assistant Director or DD Deputy Director.
7. The Division Director or designee determines final approval of the application and returns the packet to the Regional Office. The applicant is notified in writing of the decision.

8. Designated Regional Office staff explain the remaining process requirements to the potential provider which include:
 - a. Attending all sessions of the DMH approved Provider Enrollment Process training and orientation.
 - b. Completing all assignments in the DMH approved Provider Enrollment Process including submission of a Policy and Procedure Manual which includes, but is not limited to the following:
 - i. Admission Criteria (if any).
 - ii. Discharge Criteria (if any).
 - iii. Copy of admission agreement (if any) between consumers/family and the agency.
 - iv. Required training provided to employees by the agency.
 - v. Policy on Abuse and Neglect of consumers including mandatory reporting and legal consequences; includes the definition of abuse, neglect and misuse of funds consistent with 9 CSR 10-5.200.
 - vi. Policy on Individual Rights.
 - vii. Individual Grievance Procedure.
 - viii. Policy regarding limitations on individual rights (specifying which rights can/cannot be limited).
 - ix. Policy on due process procedure when there are limitations of rights of individuals supported; includes external advocacy contacts for individuals, person's right to appeal, and the appeal process.
 - x. Policy regarding behavioral crisis and behavioral support/behavior management.
 - xi. Policy regarding research related to individuals.
 - xii. Policy and procedure for addressing emergencies and disasters.
 - xiii. Policy regarding death of an individual.
 - xiv. Policy and procedure for infection control and prevention.
 - xv. Policy on employee background screening consistent with 9 CSR 10-5.190.
 - xvi. Policy on use of restraint and time-out, consistent with the Division's policy.
 - xvii. Policy and procedure addressing medication administration, storage and disposal.
 - xviii. Policy and procedure on self-administration of medication.
 - xix. Human resource policies for employees with regard to care provided to individuals.
 - xx. HIPAA/confidentiality.
 - c. All staff completing all mandated trainings: First Aid, CPR, Positive Behavioral Support, Abuse and Neglect, Confidentiality, Medication Administration, Person Centered Planning, as well as training on Missouri Quality Outcomes (ISL and Day Services).
 - d. The applicant's progress will be tracked by designated Regional Office staff.

B. Training

1. Approved applicants will be scheduled for the new provider training.
 - a. Applicants who are required to attend the full day training will complete a pre-training assignment as provided by the Regional Office at time of approval notification. This assignment must be completed prior to attendance of the provider training. Through completing this assignment, the applicant will develop a provider notebook containing various directives, tools, and guidelines that must be present at the training.

- b. Applicants for the following services must attend the full day training: Personal Assistant, Respite, Independent Living Skills Development, Residential Habilitation, Independent Supported Living, Community Employment, Shared Living, Community Specialist, Case Management, and Homemaker Service Quality I.
 - c. Applicants for the following services must attend the first half of the training: Counseling, Behavior Therapy, Occupational Therapy, Speech Therapy, Physical Therapy, Recreation Services, and Applied Behavior Analysis.
 - d. Applicants of the following services are not required to attend the training: transportation, durable medical equipment supplies, assistive technology, home modification and adaptive equipment, interpreting, nutritional evaluation, dental, medical and psychiatric evaluations.
2. Designated Regional Office staff will:
 - a. Conduct training using the DMH/Division of Developmental Disabilities Systems and Philosophy Curriculum.
 - b. Assess applicant's understanding and commitment to providing supports and services within the mission, vision and values of the Division and Department during the training.
 - c. Discuss any concerns with the Regional Director.
 3. Training must be documented and progress tracked.
 4. The potential provider may withdraw at any time in the process or the Regional Director may determine that the provider is not meeting expectations and deny a contract.

C. Certification and Contract Procurement

1. Upon completion of all items indicated in "A" and "B" above, the Regional Director or Designee will notify the Licensure and Certification Unit that the applicant is ready to pursue provisional certification.
2. Certification
 - a. The Licensure and Certification Unit (L&C) staff will conduct a survey of all residential habilitation, individualized supported living, and day services to determine if requirements are met for provisional certification. The provisional certification visit will include a review of:
 - i. Policies and procedures;
 - ii. Facility/environmental safety (This could be postponed for an ISL if site is not secured and all other requirements are met to obtain a contract. Once a site is chosen, then a site review will occur prior to individuals moving to the home.);
 - iii. Verification of an approved fire/safety inspection by an inspector from the State Fire Marshal's office for on-site day services and residential habilitation for four or more individuals;
 - iv. Personnel; and
 - v. Staffing patterns sufficient to begin providing supports and services.
3. Contract procurement
 - a. The provider must meet with designated DMH staff to develop the agency budget.
 - b. Upon the provider's successful completion of training and all requirements, Designated Regional Office staff will request a contract to be issued by DMH Contracts and Procurement
 - a. Evidence that the provider application has been approved by the Division Director must be submitted along with request for contract.
 - c. DMH Contracts and Procurement will issue a contract to the provider. The contract is not executed until all appropriate signatures are obtained.

- d. Once the contract is executed, L&C will issue a provisional certificate for a time frame not to exceed one year.

D. The provider must enroll as a Medicaid provider with the state Medicaid agency prior to receiving a contract through the Department of Mental Health.

E. Providing Services

Prior to supporting individuals (before people move in or receive supports from this provider) the following steps must be completed:

1. Provider must submit an approved staffing schedule for the first week of providing supports. This must include the names of staff that are current in all required trainings of First Aid, CPR, Positive Behavioral Support, Abuse and Neglect, Confidentiality, Person Centered Planning, Medication Administration as well as training on Missouri Quality Outcomes (ISL and Day Hab).
2. Provider must submit the process for providing back-up staff during times of shortage.
3. The ISL budget review is completed.

At any time after provisional certification has been awarded, a follow-up visit may be conducted.

II. Criteria to Deny a Contract

A. Based on information gathered during the Enrollment Process, a Regional Director may decide to terminate the process with a provider. The decision is based on identified and documented concerns that may arise in any phase of the process. A contract may be denied for:

1. Failure to submit a complete application containing all required documents;
2. Falsification of any components of the application;
3. Inability to meet the minimum rating threshold;
4. Concerns noted of philosophical viewpoints not in agreement with Department's mission and Division's guiding principles, and/or evidence of attitude or values in conflict with following established requirements or regulations;
5. Inability to provide assurance of financial viability;
6. Presence of disqualifying background check;
7. Termination from previous state employment;
8. Termination from any previous job that included care of persons (i.e. child care, disabilities, elderly);
9. Poor references are obtained regarding the applicant;
10. Inability to complete requirements; or
11. Inability to reach compliance with provisional certification.

B. The Regional Director will notify the Division Director or Designee in writing of decision to terminate the process and deny a contract with specific rationale for the decision. The Regional Director will notify the provider that the Regional Office will not proceed with certification, licensure or contract. Depending on the issues preventing the application from being approved, the Regional Director may prohibit the applicant from obtaining a contract with the Division at a later date. The letter will describe the issues identified during the Enrollment Process and whether the applicant has been permanently disqualified from obtaining a contract.

The Regional Director's decision to deny a contract to an applicant is final. Furthermore, the decision prohibits the applicant from applying for a contract in a different region with the Division of Developmental Disabilities.

III. Quality Enhancement

- A. The Division's Quality Enhancement Unit or their designee shall review this process at least annually and update/revise as needed.
- B. The Regional Office will track and report to the Division's Quality Enhancement Unit the following information:
 - 1. Number of applications received;
 - 2. Numbers approved;
 - 3. Number denied; and
 - 4. Number successfully completing the enrollment process and awarded a contract.
- C. The Licensure and Certification Unit will track and report to Division Quality Enhancement the following:
 - 1. Number of provisional surveys conducted;
 - 2. Number of providers earning provisional certification;
 - 3. Number of plans of correction;
 - 4. Denials of provisional certification; and
 - 5. Conditional certification and denial of certification after the first year provisional certificate.

Authority:

Missouri DD Medicaid Waiver Manual <http://dmh.mo.gov/dd/manuals/waivermanuals.htm>

9 CSR 45-5.060 Procedure to Obtain Certification <http://www.sos.mo.gov/adrules/csr/current/9csr/9c45-5.pdf>

9 CSR 10 Missouri Department of Mental Health General Program Procedures

<http://www.sos.mo.gov/adrules/csr/current/9csr/9c10-5.pdf>

Division of Developmental Disabilities Community Services Contract <http://dmh.mo.gov/docs/dd/POSContract.pdf>