

# Southeast Missouri Autism Project Service Directory Fiscal Year 2023



The Office of Autism Services was established in 2008 (633.225 RSMo) to provide leadership in program development for children and adults with autism spectrum disorders, to include the establishment of program standards and coordination of program capacity.

# Southeast Missouri Autism Project (SEMAP) Directory Contents

SΕN	/IAP Funding, Areas & Providers	3
SEN	1AP Services	4
A	ssessment	5
Α	SD Training	e
A	Applied Behavior Analysis (ABA)	7
	ABA Consultation & Intervention	7
	Registered Behavior Technician	
	Community Inclusion	
C	Counseling	10
	Pay Habilitation Services	11
E	mployment	13
	Pre-employment Services-ILS	14
	Career Planning	
	Prevocational Services	
	Job Development	
_	Supported Employment	
	amily Resource Services	
	amily Resource Services Phone Support	
	Ausic Therapy	
	arent Training	
	espite	
	ocial Skills Groups	
	ocial Skills: Curriculum Based	
	ocial Skills: Speech/Language Pathology	
S	peech Implementer	33
	peech Augmentative-Alternative Communication (AAC) Assessment	
T	elehealth	34
T	herapeutic Camps	37
	Interactive Arts Camps	37
	Camp EMBRACE	
	Camp SOCIAL	
_	Skills Training Camps	
	ransition Planning	
Т	ransportation	30

# **SEMAP Funding, Areas & Providers**

## Blue Sky Community Services: \$65,029

2245 Old Toll Road Jackson, MO 63755 Phone: 573-204-9097 Fax: 855-313-1583

Cape Girardeau-Gerhardt location

Phone: 537-332-0030

Center for Autism & Behavioral Services location

Phone: 573-803-3383 Fax: 833-919-2851

#### Easterseals Midwest: \$\$1,099,833

611 N Fountain St.

Cape Girardeau, MO 63701

Phone: 573-339-9300

Phone: 573-778-9131

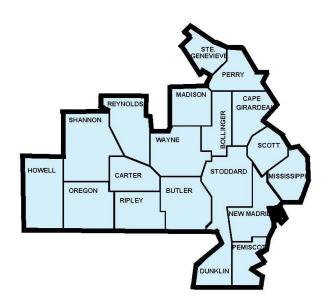
Toll Free Phone: 800-200-2119 Fax: 573-339-7964

#### Southeast Missouri State University Autism Center: \$436,451

611 N Fountain Cape Girardeau, MO 63701 Phone: 573-986-4985

Sikeston Center Phone: 573-471-2008

Fax: 573-986-4994



## **SEMAP Services**



The Office of Autism Services was established in 2008 (633.225 RSMo) to provide leadership in program development for children and adults with autism spectrum disorders, to include the establishment of program standards and coordination of program capacity.

Office of Autism Services

Improving lives THROUGH supports and services THAT FOSTER Self-determination.

MISSOURI DIVISION OF

DEVELOPMENTAL

#### Assessment

#### **Service Description**

Specialized Autism Assessment services are conducted for individuals who have already been evaluated and received an appropriately documented ASD diagnosis, are enrolled with the Division of Developmental Disabilities, and enrolled in the Autism Projects. An Assessment:

- Helps the provider develop recommendations for specialized autism services that meet each individual's unique needs;
- Helps the provider identify and understand the unique capabilities, strengths, and needs of each individual (this information is the basis for services and/or intervention planning;
- Is used to further develop and modify Individual Support Plans;
- Includes observation of the individual in relevant environments and face-to-face interviews with the individual, parents, and/or other caregivers; and
- Establishes a baseline of skills that can be used to measure progress over time.

This service may cover an **Assessment for Intervention Planning** as described in Chapter 4 of <u>Missouri Best Practice Guidelines for Screening, Diagnosis, and Assessment.</u> An Assessment for Intervention Planning requires collaboration with family members and other appropriate professionals as indicated to identify and prioritize appropriate interventions to be addressed based on family concerns, functioning, and access to resources as well as clinical factors, intervention history, and prior assessment results.

#### **Provider Requirements**

Staff providing this service should have knowledge of Missouri Best Practice Guidelines and specialized autism services in the region, bachelor's degree with a minimum of 1 year of direct experience in providing related services for persons with autism (experience must have been obtained within the last 5 years), and autism assessment training so that the assessment provided is within the scope of the staff's training and experience (ADOS and/or behavioral analytic assessment, VB-MAPP, ABLLS, etc.). In addition to the above requirements, staff providing an **Assessment for Intervention Planning** under this service should meet requirements for training, licensing, and experience as detailed in Chapter 4 of Missouri Best Practice Guidelines for Screening, Diagnosis, and Assessment.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE (Department of Elementary and Secondary Education), Medicaid, Medicaid Waiver, private insurance, or local supports.

#### Provider Reporting Service Code & Unit Information

Autism Assessment: 19F001

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 1 Assessment

Maximum units of Service: 1 unit per year

#### **Service Documentation**

The service provider shall maintain service documentation including results of assessment (including observations and baseline of skills that can be used to measure progress over time), notes concerning intervention planning, referral and recommendations for specialized autism services. The provider shall submit a report to the Support Coordinator at the conclusion of the assessment that includes but is not limited to:

- Enrolled individual's name, birth date, and DD identification number;
- Name of Provider Agency;

- Name, title, credentials of all team member(s) involved in the assessment;
- Description of instruments and/or methods used for assessment (e.g., VB-MAPP or ABLLS-R, ADOS, FBA, CELF-Pre, CELF-5, PLAI-2, language sample, observation and interview details, etc.); and
- Results of the assessment, recommendations for intervention planning, specialized autism services, and referrals for further assessment (results and outcomes should be incorporated into ISP).

#### Assessment FY23 Provider Information Table

-Provider	*Required	Age	Frequency	Location
Blue Sky Community Services	Yes	All	Initial & as needed	Site, Home, Community, Telehealth
Easterseals Midwest	No	All	As needed	Site
SEMO University Autism Ctr.	Yes	All	As needed	Home, Community, Site, Telehealth
*Required: Consult with the p	rovider conc	erning	the type of assessment	they perform.

## **ASD Training**

#### **Service Description**

This service provides Specialized ASD Training to staff, providers, educators, and others who provide natural supports to individuals with Autism Spectrum Disorder (ASD) and their families. This service may include:

- Teaching participants about ASD and effective strategies for interacting with individuals with ASD, and
- Teaching specific strategies that have been individualized to support the needs of the individual with ASD and the family.

#### **Provider Requirements**

At a minimum, staff providing this service will have specialized training for ASD and a bachelor's degree with a minimum of 1 year of direct experience in providing related services for persons with autism. The experience must have been obtained within the last 5 years. In lieu of experience, staff will have at least 100-240 hours of competency-based Autism Training consistent with contemporary and emerging best practices, additional training classes of 20+ hours initially, and annual recertification courses as may be required.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### Provider Reporting Service Code & Unit Information

Autism Training Individual: 942A0H Autism Training Group: 943A0H

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

#### **Service Documentation**

The service provider shall maintain service documentation that includes but is not limited to:

- Enrolled individual's name, birth date, and DD identification number; and
- Date of each session with a complete description of:
  - The topic of instruction, individual goals (incorporated into ISP), and group goals (if 943A0H group);
  - Summary of participation and progress towards individualized goal(s) in the ISP & provider's plan; and

• Location, and name, title and signature of the staff facilitating the session.

Service documentation will be submitted on a monthly basis to the Support Coordinator and Individual/Parent/Guardian/Designated Representative.

#### **ASD Training FY23 Provider Information Table**

Provider	*Required	Prerequisites	Age	<b>Duration Frequency</b>	Setting	Location
Blue Sky	No	None	All	Individualized	Individual, Group	Site, Home, Community,
						Telehealth
Easterseals	No	35B001,	All	Individualized	Individual, Group	Site, Community, Home,
		35B00T				Telehealth
SEMO UAC	Yes	None	All	Individualized	Individual, Group	Site, Home, Community,
						Telehealth

<sup>\*</sup>Required: Some providers require this service for the initial plan or initial services. For subsequent amendments and annual plans, the Support Coordinator, individual/family, provider(s), and other planning team members work together to revise the plan to address the support needs at that time.

## Applied Behavior Analysis (ABA)

#### **Service Description**

Behavior Analysis Services, provided by Board Certified Behavior Analysts (BCBAs), Assistant Behavior Analysts (BCaBAs), and Registered Behavior Technicians (RBTs), are designed to help individuals who are exhibiting behavioral challenges to acquire functional skills in their homes and communities and/or to prevent hospitalizations or out-of-home placements. A large body of research has shown the successful use of ABA-based procedures to reduce challenging behavior and increase appropriate skills for individuals with intellectual disabilities, autism and related disorders.

#### **ABA Services** may include

- ABA Consultation & Intervention
- Registered Behavior Technician

#### ABA Consultation & Intervention

#### **Service Description**

ABA Consultation & Intervention may be available when there are significant or complex challenges that require advanced expertise and problem solving to respond to the needs of an individual with ASD. ABA Consultation & Intervention may include but is not limited to functional behavior assessment, recommendations for environmental modification, implementation of behavioral strategies and/or plans, and referrals for assistive technology or other services.

#### **Provider Requirements**

ABA Consultation & Intervention is provided by a BACB certified and MO licensed BCBA, BCBA-D, or BCaBA supervised by BCBA or BCBA-D.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### **Service Documentation**

Service Documentation should follow the licensure, registration, and professional standards required by the Behavior Analyst Certification Board at <a href="http://www.bacb.com/">http://www.bacb.com/</a>. Intervention goals should be incorporated into ISP. The service provider shall maintain service documentation that includes but is not limited to:

- Enrolled individual's name, birth date, and DD identification number;
- Date, purpose, and complete description of service (FBA, consultation, or intervention and progress); and
- Location; and name, title, and signature of the facilitating staff.

Service documentation will be submitted on a monthly basis to the Support Coordinator and Individual/Parent/Guardian/Designated Representative.

#### Provider Reporting Service Code & Unit Information

ABA Consultation & Intervention: 491611

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

#### ABA Consultation & Intervention FY23 Provider Information Table

Provider	Required	Prerequisites	Age	Duration	Frequency	Location
Blue Sky	No	19F001	All	Individualized	Individualized	Site, Home, Community,
						Telehealth
Easterseals	No	35B001,	All	Short term episodic	Individualized	Site, Home, Community,
		35B00T				Telehealth
SEMO No		19F001	All	Individualized	Individualized	Site, Home, Community,
						Telehealth

#### Registered Behavior Technician

#### **Service Description**

The RBT (Registered Behavior Technician) is a paraprofessional who practices under the close, ongoing supervision of a BCBA or BCaBA, (hereafter referred to as "Supervisor"). The RBT is primarily responsible for the direct implementation of skill-acquisition and behavior-reduction plans developed by the Supervisor. The RBT may also collect data and conduct certain types of assessments (e.g., stimulus preference assessments). The RBT does not design intervention or assessment plans. It is the responsibility of the Supervisor to determine which tasks an RBT may perform as a function of his or her training, experience, and competence. The Supervisor is ultimately responsible for the work performed by the RBT.

#### **Provider Requirements**

Technicians who provide direct implementation of ABA services under the supervision of a licensed provider must be credentialed by the Behavior Analyst Certification Board as a Registered Behavior Technician TM (RBT). The supervisory relationship must be documented in writing, and the licensed supervisor is responsible for the work performed by the RBT.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports. See Telehealth limitations under

#### **Service Documentation**

Service Documentation should follow the licensure, registration, and professional standards required by the Behavior Analyst Certification Board at <a href="http://www.bacb.com/">http://www.bacb.com/</a>. Intervention goals should be incorporated into ISP. Service provider shall maintain service documentation that includes but is not limited to:

- Enrolled individual's name, birth date, and DD identification number;
- Date and complete description of service (goals, intervention and progress); and
- Location; and name, title, and signature of the facilitating and supervising staff.

Service documentation will be submitted on a monthly basis to the Support Coordinator and Individual/Parent/Guardian/Designated Representative.

#### Provider Reporting Service Code & Unit Information

Registered Behavior Technician: 491640

Unit of Service: 15 minutes

#### Registered Behavior Technician FY23 Provider Information Table

Provider	Required	Prerequisites	Age	Duration	Frequency	Location
Blue Sky	No	19F001	All	Individualized	Individualized	Site, Home, Community
Easterseals	No	35B001,	All	Short term episodic	Individualized	Site, Home, Community
		35B00T				
SEMO	No	19F001,	All	Individualized	Individualized	Site, Home, Community
		491611				

## **Community Inclusion**

#### **Service Description**

Community Inclusion, available to individuals with Autism Spectrum Disorder (ASD) of all ages, is designed to empower individuals to access community services, resources, activities, and programs and to provide them with opportunities to integrate within the community. Parent and staff involvement may be necessary for increased effectiveness of the program.

#### Community Inclusion:

- Helps individuals build social networks,
- Helps individuals develop appropriate behavior for successful integration within the community, and
- Addresses specific needs and challenges to promote individuals' successful integration within the community.

#### **Provider Requirements**

Staff providing this service will have specialized training for ASD and a high school diploma or equivalent with a minimum of 1 year of direct experience in providing related services for persons with autism. The experience must have been obtained within the last 5 years. In lieu of experience, staff will have at least 40-140 hours of competency based Autism Training consistent with contemporary and emerging best practice and an additional 20+ hours annually of autism training consistent with contemporary and emerging best practices.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### Provider Reporting Service Code & Unit Information

Community Inclusion Individual: 52A00H Community Inclusion Group: 53A00H

Unit of Service: 15 minutes

#### **Service Documentation**

The service provider shall maintain service documentation including detailed progress notes per date of service and monthly progress notes associated with Community Inclusion objectives incorporated into the ISP. A monthly progress report will be submitted to the Support Coordinator and Individual/Parent/Guardian/Designated Representative.

**Community Inclusion FY23 Provider Information Table** 

Provider	*Required	Prerequisites	Age	Duration	Frequency	Setting
Easterseals	No	35B001,	All	Individualized	Individualized	Individual, Group
		35B00T				
SEMO	No	19F001	All	Individualized	Individualized	Individual

<sup>\*</sup>Required: Some providers require this service for the initial plan or initial services. For subsequent amendments and annual plans, the Support Coordinator, individual/family, provider(s), and other planning team members work together to revise the plan to address the support needs at that time.

## Counseling

#### **Service Description**

Missouri Autism Project (MAP) counseling services, provided by a licensed or provisionally licensed psychologist, counselor, or social worker may include but are not limited to:

- Goal oriented counseling to maximize strengths and reduce maladaptive behavior and/or functional deficits that interfere with an individual's personal, familial, vocational, and/or community adjustment;
- Initial assessment, psychological testing, comprehensive treatment planning, and periodic outcome evaluation;
- Direct implementation of therapy with the individual, family, and/or groups; and
- Coordination with family members/caretakers, staff, and other professionals.

Generally MAP counseling includes but is not limited to:

- **Counseling** sessions aimed at reducing anxiety and addressing mental health, behavioral, social, familial, or other related issues with individuals with an Autism Spectrum Disorder (ASD).
- **Psychotherapy**, which may include cognitive-behavioral, interpersonal, and other types of talk therapy that helps the individual work through their problems.
- Cognitive Behavior Therapy: Cognitive behavioral interventions (CBIs) designed to change negative or
  unrealistic thought patterns and behaviors with the aim of positively influencing emotions and life functioning.
  CBIs are comprised of multiple interventions that are uniquely crafted for each individual and his/her needs.
  The intervention process focuses on informing individuals about their emotional issues, assisting them in
  recognizing bodily responses, and organizing alternative responses to negative thoughts and feelings (see
  <a href="http://autismguidelines.dmh.mo.gov/documents/Interventions.pdf">http://autismguidelines.dmh.mo.gov/documents/Interventions.pdf</a>).
- Family therapy is defined as the treatment of family members as a family unit rather than individual clients/patients. When Family Therapy is provided, the session is billed as one service (one family unit), regardless of the number of individuals present at the session. A family may be defined as biological, foster, adoptive, or other family configuration.
- **PCIT** (Parent-Child Interactive Therapy) is an evidenced based behavioral family intervention focusing on the development of parenting competence to manage children's challenging behavior such as defiance and

aggression. This model teaches parents to utilize play-based activities to socially reinforce positive behavior along with traditional behavioral management skills. Therapists coach parents via "bug in the ear" so that the child experiences their parent as the expert managing their behavior rather than the therapist.

#### **Provider Requirements**

The professional providing services under this section must be a licensed or provisionally licensed psychologist, counselor, or social worker in accordance with RSMo Chapter 337. In addition, these professionals must be appropriately certified, practice within their scope of training and experience, and have additional training focused on effective strategies for interacting with individuals with ASD and their families, discerning their special needs, and developing and implementing their individualized treatment plans.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports. This service is not available to children who are eligible for psychology/counseling services reimbursed under the Healthy Children and Youth (EPSDT) program nor adults when state plan psychology services are appropriate to meet the individual's and/or family's need.

If insurance only covers a limited number of sessions to be authorized for families and the family requires additional sessions to meet their goals, appropriate documentation of the need and request for more sessions should be submitted to the insurance company. If the insurance company refuses more sessions, the following documentation needs to be submitted with the authorization request for additional sessions through the regional Autism Project:

- Copy of the written request, form, etc. to the insurance company requesting additional sessions
- Copy of the insurance company's denial documentation that includes the reason for the denial

#### <u>Provider Reporting Service Code & Unit Information</u>

Counseling Individual/Family/PCIT: 35C00H

Counseling Group: 36C00H

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

#### **Service Documentation**

The service provider shall maintain service documentation including detailed progress notes per date of service and monthly progress notes associated with counseling objectives incorporated into the ISP. A monthly progress report will be submitted to the Support Coordinator.

Counseling FY23 Provider Information Table for Counseling

Provider	Required	Prerequisites	Age	<b>Duration Frequency</b>	Setting	Location
SEMO	EMO No 19F001		All	Individualized	Individual/Family/PCIT,	Community, Site,
				Group	Telehealth	

#### Day Habilitation Services

#### **Service Description**

Day Habilitation (DH) services focus on skill acquisition/development, retention/maintenance to assist the individual in achieving maximum self-sufficiency. DH services are designed to assist the individual to acquire,

improve and retain the self-help, socialization and adaptive skills that enhance social development and develop skills in performing activities of daily living and community living.

Services may also be used to provide supported retirement activities. Activities and environments are designed to foster the acquisition of skills, building positive social behavior and interpersonal competence, greater independence and personal choice. Activities should be appropriate to the setting and occur in the most natural setting possible to maximize transference of skill acquisition.

Fundamental skills are a foundation for further learning, such as etiquette in a public setting, recognition of money, proper clothing attire for the time and setting, answering phone, etc. Examples of DH services include, but are not limited to, utilizing etiquette skills at a restaurant, checking out a book at a library, mailing a letter, exchanging money for purchases, etc. This should not only occur in the facility, but on a regular basis in the community to use in a real life situations.

DH services differ from the PA (Personal Assistant) services in that a PA may directly perform activities or may support the individual to learn how to perform ADL's (Activities of Daily Living) and Instrumental Activities of Daily Living (IADL's) as part of the service. DH services include all personal assistance needed by the individual. Individuals who receive Group Home or ISL (Individualized Support Living), or Shared Living may receive this service; their group home or ISL budget will clearly document no duplication in service.

DH services do not provide basic childcare (a.k.a. "baby sitting"). When services are provided to children the ISP (Individualized Support Plan) must clearly document that services are medically necessary to support and promote the development of independent living skills of the child or youth, and are over and above those provided to a child without disabilities.

The ISP must document how the service will be used to reinforce skills or lessons taught in school, therapy, or other settings, and neither duplicates or supplants the services provided in school, therapy or other settings. The ISP must also clearly document the service is not supplanting the responsibilities of the primary caregiver. ISPs must include outcomes and action steps individualized to what the participant wishes to accomplish, learn and/or change.

The UR (Utilization Review) Committee, authorized under 9 CSR 45-2.017, has the responsibility to ensure all services authorized are necessary based on the needs of the individual and ensures that DH Services are not utilized in lieu of basic childcare that would be provided to children without disabilities. DH programs serving children should not co-mingle with programs serving adults at the same time in the same space. If an individual has a child of their own, supporting them to learn parenting skills may be appropriate but not as a DH service. These skills should be provided in the natural environment under a stand-alone service such as ISD (Individualized Skill Development) or as a part of a residential service.

DH services are provided at a stand-alone licensed or certified day program facility, which is not physically connected to the participant's residence. Costs for transportation of individuals from their place of residence to the day program site are not included in the DH rate, and waiver transportation may be provided and separately billed. Transportation costs related to the provision of DH services in the community are included in the service rate and may not be billed separately.

Group size (staffing ratio) can be no larger than six (6) and applies to activities at a facility or in the community. The group size should be appropriate for the individual and activity. [Example: Based on the activity, an individual may do well in a group of six (6), but for another activity where a higher level of support or supervision is required

or when going out in the community, a smaller group size may be more appropriate.] Individualized support must be provided within a group setting. [Example: A group of people could be participating in an activity and a staff person may go from person to person in the group and provide personal support while maintaining super vision, guidance, and reinforcement to the entire group.]

#### **Day Habilitation Service Limitations**

This service may only be requested through SE Missouri Autism Project (SEMAP) if the individual has been denied a waiver and the service is not available through Medicaid, DESE, local SB40 services or other resources.

#### **Day Habilitation Service Provider Requirements**

See Day Habilitation Service Provider Requirements in the Home & Community Based Waiver manual.

#### Description of Staff's Specialized Autism Training

Blue Sky staff who support individuals with autism receive specialized training to assist in effectively supporting individuals with autism. These include but are not limited to:

- Teaching Skill Acquisition
- Addressing Challenging Behaviors
- Behavior Skills Training

#### **Day Habilitation Service Documentation**

Service provider must maintain service documentation described in Section C of the <u>DD Waivers Manual</u> including detailed progress notes per date of service and monthly progress notes associated with objectives listed in the ISP. A progress report will be submitted to the Support Coordinator by the 15<sup>th</sup> of the month following the conclusion of the service.

#### Blue Sky Community Services Code & Unit Information

Day Habilitation Group: 52001 S Unit of Service: 15 minutes

Maximum Units of Service: 32 Units per day (8 hours)

## **Employment**

The Life Course Outcomes Research Program Employment Fact Sheet published 8/31/15, found at <a href="https://drexel.edu/autismoutcomes/publications-and-reports/publications/Employment-Outcomes-of-Young-Adults-on-the-Autism-Spectrum/">https://drexel.edu/autismoutcomes/publications-and-reports/publications/Employment-Outcomes-of-Young-Adults-on-the-Autism-Spectrum/</a>, reports

Compared to their peers with other types of disabilities, young adults with autism had the lowest rate of employment. While 58% of those on the autism spectrum ever worked during their early 20s, over 90% of young adults with emotional disturbance, speech impairment, or learning disability ever worked, as well as 74% of young adults with intellectual disability.

According to the Disability Benefits Help webpage at <a href="https://www.disability-benefits-help.org/working-ability/autism">https://www.disability-benefits-help.org/working-ability/autism</a>,

The Social Security Administration recognizes that autism limits the types of activities and interests of autistic people and can make it difficult for people with autism or autistic spectrum disorders to perform work if it is not within their narrow interests, even if that work is purely physical in nature.

Specialized ASD Employment Services funded through the Missouri Autism Projects are designed to enable Missouri residents enrolled in the projects to attain the highest level of independence and autonomy in the most integrated competitive employment setting and with a job matched to the individual's interests, strengths, priorities, abilities, and capabilities.

Please note that Autism Project Employment Services vary in each Autism Project Region, depending upon the Regional Parent Advisory Council's recommendations, but may include:

- Pre-employment Services-ILS (independent living skills)
- Prevocational & Intensive Follow-Along Employment Services
- Career Planning
- Prevocational Services
- Job Development
- Supported Employment

#### Pre-employment Services-ILS

#### **Service Description**

Key components of Pre-employment Services, provided by an employee consultant, include:

- **Employment Access Training**—an individualized pre-employment skill-building service designed to support individuals and promote independence.
- **Soft Skills Training**—a pre-employment service that focuses on training "soft skills" that are crucial for workplace productivity. Soft skills are the non-technical skills and abilities required to function in a specific employment environment such as: delivering information or services to customers and co-workers; working effectively as a member of a team; and understanding and adapting to the cultural norms of the workplace.

#### **Provider Requirements**

At a minimum, staff providing this service will have specialized training for ASD and a high school diploma or equivalent with a minimum of 1 year of direct experience in providing related services for persons with autism. The experience must have been obtained within the last 5 years. Or, in lieu of experience staff will have at least 100-140 hours of competency based Autism Training and additional training classes of 20+ hours initially and annual recertification courses.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### **Provider Reporting Service Code & Unit Information**

Pre-employment ILS Individual: 580300 Pre-employment ILS Group: 580500

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

#### **Service Documentation**

The service provider shall maintain service documentation including detailed progress notes per date of service and monthly progress notes associated with pre-employment objectives incorporated into the ISP. A monthly progress report will be submitted to the Support Coordinator and Individual/Parent/Guardian/Designated Representative.

**Pre-employment Services ILS FY23 Provider Information Table** 

Provider	Required	Prerequisites	Age	Duration	Frequency	Setting	Location
Easterseals	No	35B001,	14+	Typically 2-4	1-3 times	Individual,	Community,
		35B00T		hr sessions	per wk	Group	Site, Telehealth

### Career Planning

#### **Service Description**

Career planning is a person-centered, comprehensive employment planning and support service. It provides consultative, evaluative assistance to enter into, or advance in, competitive employment or self-employment. It is a focused, time-limited service engaging a participant in self-discovery, identifying a career direction and developing a plan for achieving competitive, integrated employment at or above the state's minimum wage. The outcome of this service is documentation of the participant's stated career objective and a career plan used to guide individual employment support.

Career planning includes but is not limited to:

- Activities that are primarily directed at assisting an individual with identification of an employment goal; and
- A plan to achieve this goal (e.g., job exploration, job shadowing, informational interviewing, assessment of interests, labor market research, vocational and job related discovery on asset development) that are associated with performing competitive work in community integrated employment.
- Work specific review of assistive technology is a billable activity.

Providers of this service may coordinate, evaluate and communicate not only with the individual, but also with their caregivers, their support team, employers and others who can assist with discovering an individual's skills, abilities, interests, preferences, conditions and needs. This support and evaluation should be provided to the maximum extent possible in the presence of the individual and should be conducted in the community, but completion of activities in the home or without the presence of the individual should not be precluded.

- If an Autism Project participant is employed, career planning may be used to explore other competitive employment career objectives that are more consistent with the person's skills and interests, or to explore advancement opportunities in his or her chosen career.
- Career planning should be reviewed and considered as a component of an individual's person-centered services and support plan, no less than annually, more frequently as necessary, or as requested by the individual.
- These services should be designed to support successful employment outcomes consistent with the individual's goals.
- Career planning may include social security benefits support, training, consultation and planning.
- The setting for the delivery of services must be aligned with the individualized need and is the most conducive in developing a career objective and a career plan.
- Transportation costs for career planning services are included in the unit rate, but costs for transporting to and from the residence are not included.
- PCA may be provided to support an individual while receiving this service, but may not comprise the entirety of the service.

Career planning may not include services available under a program funded under section 110 of the Rehabilitation Act of 1973 and its amendments or section 602(16) and (17) of the Individuals with Disabilities Education Act (20 U.S.C. 1401(16 and 17)). Therefore, the case record for any individual receiving this service must

document the individual is not eligible for, unable to access, exhausted services or otherwise inapplicable for the aforementioned programs as outlined in an interagency memorandum of understanding between Vocational Rehabilitation and the Division of Developmental Disabilities.

#### **Career Planning Service Limitations**

Career Planning is intended to be time-limited. Services should be authorized through person- centered employment planning based upon individualized assessed need not to exceed 32 units per day or 240 quarter hour units of services within an annual support plan. Additional units may be approved by the Division's Regional Director or designee in exceptional circumstances.

#### **Career Planning Service Provider Requirements**

This service can be provided by an employment services provider agency. The agency must be certified by the Department of Mental Health (DMH) or accredited by Commission on Accreditation of Rehabilitation Facilities (CARF), The Council on Quality and Leadership (CQL) or Joint Commission, to provide career planning services. The agency must have a DMH contract and comply with training requirements outlined within the contract.

#### <u>Career Planning Service Documentation</u>

Autism Project program standards call for Career Planning service documentation to be consistent with Career Planning service documentation funded by a waiver. An individual's ISP may include any combination of services, but service documentation according to 13 CSR 70-3.030(2)(A)6 requiring a begin and end time for services reimbursed according to time spent in service delivery will clearly show no duplication or overlap in the time of the day the service is provided, and the place of service must match the billing code.

ISP's will include outcomes/goals, with criteria, and supported by data to demonstrate progress and on which to base changes in strategy.

Outcomes are expected in a completed career plan/discovery profile to guide ongoing support needs to include:

- An identified career path and profile which includes the individual's needs, interest, strengths, natural supports and characteristic of potential work environments.
- A plan specifying actions necessary to achieve the individual's career goals.

Providers must maintain service documentation described in Section C of the <u>Developmental Disabilities (DD)</u>
<u>Waivers Manual</u>, including detailed progress notes per date of service and monthly progress notes associated with objectives.

Individuals and support coordinators will revise the ISP during the annual plan development meeting to be reflective of the new service definitions. The ISP will fully implement the revised service definitions within 18 months of waiver approval.

#### Blue Sky Community Services Code & Unit Information

Career Planning Individual: T2019

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

Prevocational Services
Service Description

Prevocational Services provide one-to-one learning and group experiences to further develop an individual's general, non-job task specific skills that are needed to succeed in paid employment in competitive, integrated community settings. Services are expected to occur over a defined period of time with specific and measurable outcomes to be achieved, as determined by an individualized assessed need through an ongoing person-centered planning process.

Services are intended to develop and teach general skills that lead to competitive and integrated employment including, but not limited to:

- Ability to communicate effectively with supervisors, co-workers and customers;
- Generally accepted community workplace conduct, hygiene and dress;
- Workplace problem solving skills and strategies;
- Use of strategies to include assistive technology, for task attendance and completion;
- Asset development and financial literacy;
- General workplace safety; and
- Mobility and motor skills training.

Prevocational services should enable each individual to attain the highest level of independence and autonomy in the most integrated competitive employment setting and with a job matched to the individual's interests, strengths, priorities, abilities, and capabilities.

Participation in prevocational services is not a required pre-requisite for supported employment services provided under the waiver. Prevocational services should only be authorized when an individual is otherwise unable to directly enter the general workforce as a result of an underdeveloped or undeveloped general, non-job task specific skill(s).

Prevocational services include activities that are not primarily directed at teaching skills to perform a particular job, but at underlying habilitative goals (e.g., attention span, motor skills, interpersonal relations with co-workers and supervisors) that are associated with building skills necessary to perform competitive work in community integrated employment.

Services must be provided in a community workplace setting or at a licensed, certified or accredited facility of a qualified employment service provider. The setting for the delivery of services must be aligned with the individualized assessed need and that which is most conducive in developing the specific and measurable outcomes contained within the individual support plan (ISP). Services cannot be provided within an individual's residence. Prevocational services can be provided in small groups not exceeding four (4) individuals at a time. The decision to provide services in a group setting must be based on individualized assessed need and be supported in the person-centered plan as being the most autonomous setting which facilitates the highest levels of individual learning.

Volunteering for personal reasons (e.g. community service) not related to employment pathways would not be considered a Prevocational task. Prevocational can also include use of strategies to include assistive technology for improving task attendance and task completion and informal discussion related to assess development and financial literacy.

Outcomes are expected to include an individualized plan containing:

- Identification of the skills being developed
- Action steps and planning to include a timeline and steps necessary to achieve the outcome

- Progress measure on the skills being developed for the outcome(s) identified
- Ongoing development needed to be prepared for employment

Vocational services, not covered through the Southeast Missouri Autism Projects, are services that teach job task specific skills required by a participant for the primary purpose of completing those tasks for a specific facility-based job and are not delivered in an integrated work setting through supported employment. The distinction between vocational and pre-vocational services is that prevocational services, regardless of setting, are delivered for the purpose of furthering habilitation goals that will lead to greater opportunities for competitive and integrated employment and career advancement at or above minimum wage. These goals are described in the individual's person-centered services and support plan and are designed to teach skills that will lead to integrated competitive employment.

- A person receiving prevocational services may pursue employment opportunities at any time to enter the general work force.
- Individuals participating in prevocational services may be compensated in accordance with applicable Federal laws and regulations and the provision of prevocational services is always delivered with the intention of leading to permanent integrated employment at or above the minimum wage in the community.
- All prevocational service options should be reviewed and considered as a component of an individual's personcentered services and supports plan no less than annually, more frequently as necessary or as requested by the individual.
- These services and supports should be designed to support successful employment outcomes consistent with the individual's goals.
- Personal assistance may be a component of prevocational services, but may not comprise the entirety of the service.
- Transportation costs for prevocational services are included in the unit rate, but costs for transporting to and from the residence are not included.
- Prevocational services may include volunteer work, such as volunteer learning and training activities that prepare a person for entry into the paid workforce. Volunteering is an industry specific term with specific rules and regulations governed through the US Department of Labor (DOL) Fair Labor Standards Act and Wage and Hour Laws. Any limitations on location or duration of volunteer work are established through DOL.
- Prevocational services must comply with 42 CFR §440.180(c)(2)(i).

Prevocational services provided under the Autism Projects may not include services available under a program funded under section 110 of the Rehabilitation Act of 1973 and its amendments or section 602(16) and (17) of the Individuals with Disabilities Education Act (20 U.S.C. 1401(16 and 17)). Therefore, the case record for any individual receiving this service must document the individual is not eligible for, unable to access, exhausted services or otherwise inapplicable for the aforementioned programs as outlined in an interagency memorandum of understanding between Vocational Rehabilitation and the Division of Developmental Disabilities.

#### **Prevocational Service Limitations**

Prevocational services must be authorized based upon individual need but is not to exceed 2,080 quarter hour units per plan year. Additional units or monthly increments beyond 12 months must be pre-authorized by the Division's Regional Director or designee.

#### **Prevocational Services Provider Requirements**

This service can be provided by an employment services provider agency. The agency must be certified by DMH or accredited by CARF, CQL or Joint Commission, to provide Prevocational services. The agency must have a DMH

contract and comply with training requirements outlined within the contract. Additional units or monthly increments beyond 12 months for Autism Project Prevocational Services must be recommended by the planning team and pre-authorized by the Division's Regional Director or designee.

#### Blue Sky Community Services Code & Unit Information

Prevocational Services Individual: H2025 Prevocational Services Group: H2025HQ

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

#### **Prevocational Service Documentation**

Autism Project program standards call for Prevocational service documentation to be consistent with Prevocational service documentation funded by a waiver. An individual's ISP may include any combination of services, but service documentation according to 13 CSR 70-3.030(2)(A)6 requiring a begin and end time for services reimbursed according to time spent in service delivery will clearly show no duplication or overlap in the time of the day the service is provided, and the place of service must match the billing code.

ISP's will include outcomes/goals, with criteria, and supported by data to demonstrate progress and on which to base changes in strategy.

Providers must maintain service documentation described in Section C of the <u>Developmental Disabilities (DD)</u> <u>Waivers Manual</u>, including detailed progress notes per date of service and monthly progress notes associated with objectives.

Individuals and support coordinators will revise the ISP during the annual plan development meeting to be reflective of the new service definitions. The ISP will fully implement the revised service definitions within 18 months of waiver approval.

#### Job Development

#### **Service Description**

Job development is a support service to facilitate competitive work in an individual integrated work setting. The service must be identified in the individual's service plan based upon an individualized assessed need which promotes the greatest degree of integration, independence and autonomy.

Job development services are the supports to individuals who, because of the disabilities, will need assistance with obtaining individual competitive or customized employment in an integrated work setting in the general workforce at or above the state's minimum wage, at or above the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals without disabilities.

The outcome of this service is the acceptance of an employment offer in a job that meets personal and career goals. Job development services may include:

- Application completion assistance with the individual,
- Job interviewing activities with the individual,
- Completion of task analysis with or without the presence of the individual based upon individualized need, and/or
- Negotiation with prospective employers and education of prospective employers of their role in promoting full

inclusion with or without the presence of the individual based upon individualized need.

- Consultation with prospective employers on the use of assistive technology to promote greater autonomy and independence in the potential workplace.
- Consultation and negotiation of work hours, wages and earnings.

Outcomes are expected in a completed job retention plan to guide ongoing support needs to include:

- The completed job development monthly report describing the job search activities and results of business outreach activities with the fidelity; and, any ongoing supports needed to fully secure a job offer in an employment setting of the individual's choosing.
- Summary of additional, amended or modified implementation strategies which maximize competitive integrated employment opportunities, independence, natural supports, career pathways and any identified potential associated risks.
- The completed job placement implementation plan of secured employment to include job title, wages, projected average number of hours to be worked weekly and recommended implementation strategies for paid/natural supports regarding unmet needs (i.e. personal assistance, transportation, skill acquisition, employment onboards, workplace, integration, etc.)

Additional Information about Job development services:

- Job development services must be provided in a manner that promotes integration into the workplace and interaction between individuals and people without disabilities in those workplaces while maintaining the individual's rights of dignity, privacy and respect.
- Job development should be reviewed and considered as a component of an individual's person-centered services and supports plan, no less than annually, more frequently as necessary, or as requested by the individual
- This service should be designed to support a successful employment outcome consistent with the individual's assessed goals, needs, interests and preferences.
- An individual's autonomy and independence to perform employment with the least amount of restrictions must be supported through the person-centered planning process.
- Job development activities are limited to potential employers who would compensate at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals without disabilities.
- Transportation for the implementation of Job Development is included in the rate.

#### **Job Development Service Limitations**

Job development is intended to be time-limited. Services should be authorized through person-centered employment planning based upon individualized assessed need not to exceed 240 quarter hour units of services within an annual support plan. Additional units may be approved by the Division's Regional Director or designee in exceptional circumstances.

Job development provided through Missouri Autism Projects may not include services available under a program funded under section 110 of the Rehabilitation Act of 1973 and its amendments or section 602(16) and (17) of the Individuals with Disabilities Education Act (20 U.S.C. 1401(16 and 17)). Therefore, the case record for any individual receiving this service must document the individual is not eligible for, unable to access, exhausted services or otherwise inapplicable for the aforementioned programs as outlined in an interagency memorandum of understanding between Vocational Rehabilitation and the Division of Developmental Disabilities.

#### **Job Development Provider Requirements**

This service can be provided by an employment services provider agency. The agency must be certified by DMH or accredited by CARF, CQL or Joint Commission, to provide job development services. The agency must have a DMH contract and comply with training requirements outlined within the contract.

#### Job Development Service Documentation

Autism Project program standards call for Job Development service documentation to be consistent with Job Development service documentation funded by a waiver. A waiver individual's ISP may include any combination of services, but service documentation according to 13 CSR 70-3.030(2)(A)6 requiring a begin and end time for services reimbursed according to time spent in service delivery will clearly show no duplication or overlap in the time of the day the service is provided, and the place of service must match the billing code.

ISP's will include outcomes/goals, with criteria, and supported by data to demonstrate progress and on which to based changes in strategy. Providers must maintain service documentation described in Section C of the <a href="Developmental Disabilities">Developmental Disabilities</a> (DD) Waivers Manual, including detailed progress notes per date of service and monthly progress notes associated with objectives.

Individuals and support coordinators will revise the ISP during the annual plan development meeting to be reflective of the new service definitions. The ISP will fully implement the revised service definitions within 18 months of waiver approval.

#### Blue Sky Community Services Code & Unit Information

Job Development Individual: H0038

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

## Supported Employment

#### **Service Description**

Supported employment is a support service to facilitate competitive work in an integrated work setting. The service must be identified in the individual's service plan based upon an individualized assessed need which promotes the greatest degree of integration, independence and autonomy. Models of supported employment may include individual support or group support such as community business-based work groups and or mobile crews.

Individual and group services are defined separately below.

For those individuals whose assessed need supports self-employment, Supported Employment may include services and supports that assist the individual in achieving self-employment through the operation of a business. However, Medicaid funds may not be used to defray the expenses associated with starting up or operating a business. Assistance for self-employment may include:

- Aide to the individual in identifying potential business opportunities;
- Assistance in the development of a business plan, including potential sources of business financing and other assistance in developing and launching a business; and
- Identification of the supports that are necessary for the individual to operate the business.

#### **Individual Supported Employment**

Individual Supported Employment services are the ongoing supports to individuals and their employers who, because of their disabilities, need intensive on-going support to maintain a job in competitive or customized employment, or self-employment. Their job is in an integrated work setting in the general workforce at or above the state's minimum wage, at or above the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals without disabilities. The outcome of this service is sustained paid employment at or above the minimum wage in an integrated setting in the general workforce, in a job that meets personal and career goals.

Individual Supported Employment services may include:

- On-the-job training in work and work-related skills; i.e., job coaching to facilitate the acquisition and ongoing performance of the essential functions of the job, and the facilitation of natural supports (i.e., fading).
- Ongoing supervision and monitoring of the person's performance on the job; i.e., evaluating self-maintenance strategies, work production and the effectiveness of natural supports (i.e., fading) which promote the greatest degree of inclusion, integration and autonomy.
- Training in related skills needed to retain employment; i.e., supporting and facilitating strategies which promote attendance and social inclusion in the workplace based upon individualized assessed need such as using community resources and public transportation.
- For those individuals whose individualized assessed need supports self-employment, Individual Supported Employment may include services and supports that assist the participant in achieving self-employment through the operation of a business; however, Medicaid funds may not be used to defray the expenses associated with starting up or operating a business. Assistance for self-employment may include ongoing assistance, counseling and guidance once the business has been launched.
- Assistance with reporting and managing earnings with Social Security and Medicaid

Outcomes are expected to include a monthly retention plan to include:

- Description of the results of the professional observation and assessment of the individuals and the needed paid/unpaid supports to sustain employment
- A summary of implementation strategies to maximize employment, independence, natural supports, job performance and identified potential risk(s) with reduction of paid supports
- Training delivered to the individuals to implement the strategies with fidelity and collect data to
  determine effectiveness of the strategies that will assist the individual with independence and reduction
  of paid services.

#### **Small Group Supported Employment**

Group supported employment is services and training activities provided in regular community business and industry settings for groups of two (2) to four (4) workers with disabilities. Small group employment support does not include services provided in facility based work settings or non-integrated work settings (i.e., settings which physically and socially isolate individuals from other employees). Examples include mobile crews and other community business-based workgroups employing small groups of workers with disabilities in integrated competitive employment in the community. The outcome of this service is sustained paid employment, work experience leading to further career development and transition to individual integrated community-based employment for which an individual is compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals

without disabilities. An annual review must occur to determine if the employment setting optimizes, but does not regiment, individual initiative, autonomy and independence in making employment choices.

Small Group Supported Employment may include:

- On-the-job training in work and work-related skills; i.e., job coaching to facilitate the acquisition, and ongoing performance, of the essential functions of the job and the facilitation of natural supports (i.e., fading).
- Ongoing supervision and monitoring of the person's performance on the job; i.e., evaluating self-maintenance strategies, work production and the effectiveness of natural supports (i.e., fading) which promote the greatest degree of inclusion, integration and autonomy.
- Training in related skills needed to retain individual integrated community-based employment; i.e., supporting and facilitating strategies which promote attendance and social inclusion in the workplace based upon individualized assessed need such as using community resources and public transportation.

#### Additional information about Supported Employment services

- Supported employment services must be provided in a manner that promotes integration into the workplace and interaction between individuals and people without disabilities in those workplaces while maintaining the individual's rights of dignity, privacy and respect.
- All Supported Employment service options should be reviewed and considered as a component of an
  individual's person-centered services and supports plan no less than annually, more frequently as necessary, or
  as requested by the individual.
- These services and supports should be designed to support successful employment outcomes consistent with the individual's assessed goals, needs, interests and preferences.
- Small Group Supported Employment is not appropriate for individuals who demonstrate the capacity, ability and interest to work independently.
- An individual's autonomy and independence to perform employment with the least amount of restrictions must be supported through the person-centered planning process.
- Individuals must be compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals without disabilities.

#### **Supported Employment Service Limitations**

Supported Employment provided through Missouri Autism Projects may not include services available under a program funded under section 110 of the Rehabilitation Act of 1973 and its amendments or section 602(16) and (17) of the Individuals with Disabilities Education Act (20 U.S.C. 1401(16 and 17)). Therefore, the case record for any individual receiving this service must document the individual is not eligible for, unable to access, exhausted services or otherwise inapplicable for the aforementioned programs as outlined in an interagency memorandum of understanding between Vocational Rehabilitation and the Division of Developmental Disabilities.

Supported Employment supports do not include payment for supervision, training, support and adaptations typically available to other workers without disabilities filling similar positions in the business or otherwise covered under the Americans with Disabilities Act.

- Personal Assistance may be a component of an individual's employment retention support plan for assistance with activities of daily living and instrumental activities of daily living. However, Personal Assistance may not be used in lieu of Supported Employment services as defined above.
- Transportation costs are not included in the supported community employment fee, but specialized transportation is available as a separate service if necessary.

Federal Financial Participation is not claimed for incentive payments, subsidies, or unrelated vocational training expenses such as the following:

- Incentive payments made to an employer to encourage or subsidize the employer's participation in a supported employment program; or
- Payments that are passed through to users of community employment programs.

#### **Supported Employment Provider Requirements**

This service can be provided by an employment services provider agency. The agency must be certified by DMH or accredited by CARF, CQL or Joint Commission to provide Supported Employment services. The agency must have a DMH contract and comply with training requirements outlined within the contract.

#### **Supported Employment Service Documentation**

Autism Project program standards call for Supported Employment service documentation to be consistent with Supported Employment service documentation funded by a waiver. An individual's ISP may include any combination of services, but service documentation according to 13 CSR 70-3.030(2)(A)6. requiring a begin and end time for services reimbursed according to time spent in service delivery will clearly show no duplication or overlap in the time of the day the service is provided, and the place of service must match the billing code.

ISP's will include outcomes/goals, with criteria, and supported by data to demonstrate progress and on which to base changes in strategy.

Providers must maintain service documentation described in Section C of the <u>Developmental Disabilities (DD)</u>
<u>Waivers Manual</u>, including detailed progress notes per date of service and monthly progress notes associated with objectives.

Individuals and support coordinators will revise the ISP during the annual plan development meeting to be reflective of the new service definitions. The ISP will fully implement the revised service definitions within 18 months of waiver approval.

#### Blue Sky Community Services Code & Unit Information

Supported Employment Individual: H2023

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

## Family Resource Services

#### **Service Description**

Family Resource Services, provided by trained professionals, are designed to support families and their loved ones with Autism Spectrum Disorder (ASD) in a variety of settings. Providers of family resource services promote integrated support and collaboration within the individual's community. Please note there is a separate definition and Service code for Family Resource Services Phone Support.

Family Resource Services may include but are not limited to:

• Observations within the school setting, consultations with teachers, participation in Individualized Education Program (IEP);

- Observations within other settings such as residential settings, job sites, colleges, daycare centers, and day programs, and consultations with respective community service providers; and
- Workshops for siblings (aka Sib Shops) that are designed to obtain peer support and education within a safe and interactive environment facilitated by a trained professional.

#### **Provider Requirements**

Staff providing this service will have specialized training for ASD and a bachelor's degree with a minimum of 1 year of direct experience in providing related services for persons with autism. The experience must have been obtained within the last 5 years. Or, in lieu of experience:

- Staff will have at least 100-240 hours of competency based Autism Training and additional training classes of 20+ hours initially and annual recertification courses, or
- This service may be provided by a licensed or provisionally licensed mental health professional if supervised by a licensed mental health professional with a minimum of 2 years of direct experience (obtained within the last 5 years).

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### Provider Reporting Service Code & Unit Information

Family Resource Services: 35B001

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

#### **Service Documentation**

The service provider shall maintain service documentation including detailed progress notes per date of service and monthly progress notes associated with objectives in the ISP. A monthly progress report will be submitted to the Support Coordinator.

#### Family Resource Services FY23 Provider Information Table

Provider	*Required	Prerequisites	Age	<b>Duration Frequency</b>	Setting	Location
Blue Sky	No	None	All	Individualized	Individual	Home, Site, Community, Telehealth
Easterseals	Yes	None	All	Individualized	Individual	Home, Site, Community, Telehealth
SEMO	Yes	None	All	Individualized	Individual	Home, Site, Community, Telehealth

<sup>\*</sup>Required: Some providers require this service for the initial plan or initial services. For subsequent amendments and annual plans, the Support Coordinator, individual/family, provider(s), and other planning team members work together to revise the plan to address the support needs at that time.

## Family Resource Services Phone Support

#### **Service Description**

Phone Support is provided by a trained professional after the initial assessment has occurred and a habilitative relationship has been established. It is intended to help children and adults with Autism Spectrum Disorder (ASD) and their families. Phone support is defined as an individualized consultation on a current family situation or immediate need, is substantive in nature, and is relevant to providing support to families about ASD-related issues. Phone support has practical importance, value, or effect, is substantial in amount or quantity, and is

essential in meeting the needs of the families. **Phone support is not leaving a voice mail, notifying a family about** an event or activity, or calling a family for the sole purpose of soliciting enrollment in services.

#### **Provider Requirements**

Staff providing this service will have specialized training for ASD and a bachelor's degree with a minimum of 1 year of direct experience in providing related services for persons with autism. The experience must have been obtained within the last 5 years. In lieu of experience:

- Staff will have at least 100-240 hours of competency based Autism Training and additional training classes of 20+ hours initially and annual recertification courses, or
- This service may be provided by a licensed or provisionally licensed mental health professional if supervised by a licensed mental health professional with a minimum of 2 years of direct experience (obtained within the last 5 years).

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports. This service should not exceed 425 units per year, per family. Service limits may be exceeded, if authorized by the regional office. Providers should provide sufficient justification and documentation for requests to exceed service limits.

#### Provider Reporting Service Code & Unit Information

Family Resource Services Phone: 35B00T

Unit of Service: 15 minutes

Maximum units per year: 425 units

#### **Service Documentation**

Service provider shall maintain service documentation including detailed progress notes per date of service and monthly progress notes associated with objectives listed in the ISP. A monthly progress report will be submitted to the Support Coordinator.

#### Family Resource Services Phone FY23 Provider Information Table

Provider	*Required	Prerequisites	Age	Duration	Frequency	Location
Blue Sky	No	None	All	Individualized	Individualized	Site, Home, Community
Easterseals	Yes	None	All	Individualized	Individualized	Home, Site, Community
SEMO	Yes	None	All	Individualized	Individualized	Home, Site, Community
Autism						
Center						

<sup>\*</sup>Required: Some providers require this service for the initial plan or initial services. For subsequent amendments and annual plans, the Support Coordinator, individual/family, provider(s), and other planning team members work together to revise the plan to address the support needs at that time.

## **Music Therapy**

#### **Service Description**

Specialized Autism Music therapy is a service designed to treat autism and/or other developmental disabilities through various modalities and is performed by a Certified Music Therapist. Music Therapy involves the use of

music to address non-musical objectives such as communication skills, social skills, cognitive skills, and gross/fine motor skills. Therapists use music and music activities in an interactive manner (instrument playing, singing, movement to music, etc.) to address areas of need. Individuals may be seen in one-on-one or small group sessions at the discretion of the therapist. In order for individuals to get the most out of music therapy, therapists may apply techniques families learn in parent training and may provide the family with assignments and activities to be completed in the home. Family participation may help to ensure generalization and maintenance of skills and interventions for individuals.

#### **Provider Requirements**

Service provider shall be recognized as an "MT" (Music Therapist) with a minimum of 1 year of direct experience in providing related services for persons with autism. The experience must have been obtained within the last 5 years. An "MT" (Music Therapist) must possess the following:

- Four year degree in Music Therapy from an accredited university;
- Six month internship from an accredited intern site; and
- Certified Board Music Therapist Inc. (CBMT).

In lieu of experience, staff will have at least 100-140 hours of Competency based autism training and additional training classes of 20+ hours initially and annual recertification courses.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### Provider Reporting Service Code & Unit Information

Music Therapy Individual: 512A0H Music Therapy Group: 512A2H Unit of Service: 15 minutes

#### **Service Documentation**

The service provider shall maintain service documentation including detailed progress notes per date of service and monthly progress notes associated with Music Therapy objectives incorporated into the ISP. A monthly progress report will be submitted to the Support Coordinator and Individual/Parent/Guardian/Designated Representative.

#### Music Therapy FY23 Provider Information Table

Provider	Required	Prerequisites	Age	Duration	Frequency	Setting	Location
Easterseals	No	35B001,	All	Varies	Weekly or	Individual,	Site, Community,
Midwest		35B00T,			Biweekly	Group	Home, Telehealth
		94201A &					
		94200A					

Easterseals Midwest Prerequisite: Parent Training is required, including workshops, modeling sessions and coaching sessions.

## **Parent Training**

**Service Description** 

This service shall include the provision of training and consultation with parents and caregivers of individuals with Autism Spectrum Disorder (ASD). Trainings may include but are not limited to the following:

- Understanding an Autism Spectrum Disorder (ASD) Diagnosis;
- Discerning which treatment opportunities might be best for a child and family (per Missouri Autism Guidelines Initiative http://autismguidelines.dmh.mo.gov/.
- Developing behavior and communication strategies to support individuals with ASD at home and in the community, addressing challenging behavior patterns and setting up positive behavior supports, and evaluating the effectiveness of strategies and treatments;
- Understanding a child's/adolescent's sensory and motor strengths and barriers and setting up healthy activities that will be successful for a child and family (i.e. Sensory Diet);
- Understanding the role of speech, language, and auditory processing in everyday interactions and identifying what to do when a child does-not understand what he/she hears; and
- Developing strategies for social skills acquisition.

#### **Provider Requirements**

At a minimum, staff providing this service will have a bachelor's degree with a minimum of 1 year of direct experience (obtained within the last 5 years) in providing related services for persons with ASD. In lieu of experience, staff will have at least 100-140 hours of competency based Autism Training and additional training classes of 20+ hours initially and annual recertification courses.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### Provider Reporting Service Code & Unit Information

Parent Training Individual: 94200A Parent Training Group: 94200H

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

#### **Service Documentation**

The service provider shall maintain service documentation including detailed progress notes per date of service and monthly progress notes associated with Parent Training objectives incorporated into the ISP. A monthly progress report will be submitted to the Support Coordinator.

#### **Parent Training FY23 Provider Information Table**

Provider	*Required	Prerequisites	Age	Duration Frequency	Setting	Location
Blue Sky	No	None	All	Individualized	Group, Individual	Site, Home, Community, Telehealth
Easterseals	Yes	35B001, 35B00T	All	Individualized	Group, Individual	Site, Home, Community, Telehealth

<sup>\*</sup>Required: Some providers require this service for the initial plan or initial services. For subsequent amendments and annual plans, the Support Coordinator, individual/family, provider(s), and other planning team members work together to revise the plan to address the support needs at that time.

## Respite

#### **Service Description**

Respite services, which provide a break for parents/guardians, are safe and age-appropriate for individuals with Autism Spectrum Disorder (ASD) and are supervised and provided by staff trained to support individuals with ASD.

#### **Provider Requirements**

Staff providing this service will have specialized training for ASD and a high school diploma or equivalent with a minimum of 1 year of direct experience in providing related services for persons with autism. The experience must have been obtained within the last 5 years. Provider is trained in CPR /First Aid. In lieu of experience, staff will have:

- 1. At least 40 hours of competency based Autism Training and additional training classes of 20+ hours initially and annual recertification courses, or
- 2. Extensive ABA training; Autism and Communication training specific to information processing, social communication deficits training, attention and executive functioning training; Crisis Intervention training; Positive Behavior Supports training; Abuse and Neglect training; will have oversight by a Coordinator with a bachelor's degree with specialized autism training and 1 year of direct experience in providing related services for persons with autism; and for group there will be a ratio of 1 staff per two clients.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### Provider Reporting Service Code & Unit Information

Respite Individual: 440400 Respite Group: 440500 Unit of Service: 15 minutes

#### **Service Documentation**

The Service provider shall maintain service documentation including detailed progress notes per date of service and monthly progress notes associated with Respite objectives incorporated into the ISP. A monthly progress report will be submitted to the Support Coordinator.

#### **Respite FY23 Provider Information Tables**

Provider	Required	Age	Duration	Frequency	Setting	Location
Blue Sky	No	All	Individualized	Individualized	Group,	Site,
Community					Individual	community,
Services						home

**Terms:** In-home respite must be arranged in advance. Parent or guardian must RSVP for prescheduled site-based and community-based group respite.

Provider	*Required	Age	Duration	Frequency	Setting	Location
Easterseals	Yes	All	Individualized	Individualized	Group,	Site, community,
Midwest					Individual	home

**Prerequisites:** 35B001 and 35B00T Family Resource Services. **Terms:** In-home respite must be arranged in advance. Parent or guardian must RSVP for prescheduled site-based and community-based group respite.

\*Required: Some providers require this service for the initial plan or initial services. For subsequent amendments and annual plans, the Support Coordinator, individual/family, provider(s), and other planning team members work together to revise the plan to address the support needs at that time.

Provider	ider Required Age		Duration	Frequency	Setting	Location
SE MO State University	No	2-6	Varies; usually 3-4	Monday –	Individual	Site
Autism Center			hours	Friday		

## Social Skills Groups

#### **Service Description**

The Social Skills Groups for individuals with Autism Spectrum Disorder (ASD) are designed to provide participants with opportunities to acquire valuable skills they need to successfully interact with their others. The service helps to increase individuals' social awareness and improve their ability to make friends and develop the skills necessary to successfully integrate in a variety of social settings.

#### **Provider Requirements**

At a minimum, staff providing this service will have a high school diploma or equivalent with a minimum of 1 year of direct experience in providing related services for persons with autism. The experience must have been obtained within the last 5 years. Or, in lieu of experience, staff will have at least 40-100 hours of competency based Autism Training and additional training classes of 20+ hours initially and annual recertification courses.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### Provider Reporting Service Code & Unit Information

Social Skills Groups: 15100H

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

#### **Service Documentation**

The service provider shall maintain service documentation including detailed progress notes per date of service and monthly progress notes associated with objectives listed in the ISP. A monthly progress report will be submitted to the Support Coordinator and Individual/Parent/Guardian/Designated Representative.

#### Social Skills Groups FY23 Provider Information Table

Provider	*Required	Prerequisites	Age	Duration	Frequency	Location
Easterseals	Yes	35B001,	All	1-2 hours	Varies by location	Site, Community,
		35B00T				Telehealth
SEMO	Yes	19F001	All	6-24 weeks	Weekly	Site, Community,
						Telehealth

<sup>\*</sup>Required: Some providers require this service for the initial plan or initial services. For subsequent amendments and annual plans, the Support Coordinator, individual/family, provider(s), and other planning team members work together to revise the plan to address the support needs at that time.

## Social Skills: Curriculum Based

#### **Service Description**

Curriculum Based Social Group for individuals with ASD is highly structured with curriculum-based measureable outcomes for the group and the individual. Curriculum-based measurement encompasses an assessment methodology that can be used with individuals to develop goals, benchmarks, and objectives. In addition to monitoring the progress of individuals with ASD, Curriculum-based Social Skills services provide a process by which practitioners can examine data and make meaningful decisions about the overall effectiveness of their instruction. Curriculum-based Social Skills services provides participants with opportunities and systematic support to acquire valuable skills to successfully interact with others, to increase social awareness, to improve the ability to make friends, and to develop the skills necessary to successfully integrate in a variety of social settings. The Group Leader meets with the parent and child to assess the needs of the individual and set group goals. Staff also meets with the parent periodically (at least quarterly but more often if necessary) to report progress. Typically, groups are designed based on age, grade and/or skill level.

#### **Provider Requirements**

Typically the Social Skills Group Leader is:

- A licensed or provisionally licensed mental health professional in accordance with RSMo Chapter 337 who also
  has additional training related to ASD that is focused on effective strategies for interacting with individuals with
  ASD, discerning their special needs, and developing and implementing their individualized treatment plans, or
- A Behavior Analyst Certification Board (BACB) certified and MO licensed BCBA, or a BCBA-D.

At a minimum, staff providing this service will have:

- A Bachelor's degree with a minimum of two years of direct experience (obtained within the last 5 years) in providing related services for persons with ASD;
- At least 100-140 hours of competency based Autism Training and additional training classes of 20+ hours initially and annual recertification courses; or
- Formal specific training in an Office of Autism Services approved Social Skills curriculum program that is evidence-based (for example PEERS®), or a social skills curriculum with credible fidelity.

Typically, the Assistant Group Leader is either a Registered Behavior Therapist (RBT) or a bachelor's level specially trained assistant.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### **Provider Reporting Service Code & Unit Information**

Social Skills Curriculum Based: 15103H

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

#### **Service Documentation**

The service provider shall maintain service documentation that includes but is not limited to:

- Enrolled individual's name, birth date, and DD identification number;
- Date of each session with a complete description of:
  - The topic of instruction and group goal(s);
  - Summary of participation and progress towards individualized goal(s) listed in the ISP; and

• Location, and name, title and signature of the staff facilitating the session.

Service documentation will be submitted to the Support Coordinator Individual/Parent/Guardian/Designated Representative on a monthly basis.

#### Social Skills Curriculum Based FY23 Provider Information Table

Provider	Required	Prerequisites	Age	Duration	Frequency	Location
Blue Sky	No	19F001	All	1-3 hours	Varies per group	Site, Community,
Community						Telehealth
Services						
Easterseals	No	35B001,	Varies	1.5-3 hrs	7-14 wkly sessions	Site, Home, Community,
		35B00T				Telehealth
SEMO UAC	No	19F001	All	1-3 hrs	Varies per group	Site, Community,
						Telehealth

## Social Skills: Speech/Language Pathology

#### **Service Description**

Speech Language Pathology Services are for individuals with ASD that have speech, language, or hearing impairments and may include consultation provided to families, other caretakers, and service providers.

#### **Provider Requirements**

This service is provided by a licensed speech language pathologist (CCC-SLP) in accordance with RSMo 345.050.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### <u>Provider Reporting Service Code & Unit Information</u>

Speech Language Pathology Individual: 73001H Speech Language Pathology Group: 73002H

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

#### **Service Documentation**

Speech Therapy providers must maintain service documentation including detailed progress notes per date of service and monthly progress notes associated with objectives listed in the ISP; and a written evaluation done at least annually to establish need for service. The need for this therapy must be determined in a speech/language evaluation conducted by a certified audiologist or a state certified speech therapist, prescribed in the clinician's assessment for intervention planning (according to <a href="Autism Spectrum Disorders">Autism Spectrum Disorders</a>: Missouri Best Practice Guidelines for Screening, Diagnosis, and Assessment), or prescribed by a physician. The evaluation and/or prescription must be kept on file. A monthly progress report will be submitted to the Support Coordinator and Individual/Parent/Guardian/Designated Representative.

#### Social Skills Speech Language Pathology FY23 Provider Information Table

Provider	Required	Prerequisites	Age	<b>Duration Frequency</b>	Setting	Location
SEMO	No	19F001	All	Individualized	Individual, Group	Home, Site, Community,
						Telehealth

## Speech Implementer

#### **Service Description**

A Speech Implementer, practicing under the close supervision of a licensed Speech-Language Pathologist, will:

- Treat identified clients following a treatment plan developed by the speech-language pathologist;
- Assist in directing client treatment activities;
- Assist with the preparation and administration of treatment materials;
- Do other related work as required for clients who may also present with articulation, fluency, voice, language, communication and /or related disorders; and
- Design interventions for clients at risk for the above conditions as assigned by the supervising SLP.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### **Provider Requirements**

The Speech Implementer will provide services in accordance with the education, registration and supervision standards for a "Speech-language pathology assistant" as described in RSMo 345.015(12).

#### Provider Reporting Service Code & Unit Information

Speech Implementer: 73010H Unit of Service: 15 minutes

#### **Service Documentation**

Speech Therapy providers must maintain service documentation including detailed progress notes per date of service and monthly progress notes associated with objectives listed in the ISP; and a written evaluation done at least annually to establish need for service. The need for this therapy must be determined in a speech/language evaluation conducted by a certified audiologist or a state certified speech therapist, prescribed in the clinician's assessment for intervention planning (according to <a href="Autism Spectrum Disorders: Missouri Best Practice Guidelines for Screening, Diagnosis, and Assessment">Assessment</a>), or prescribed by a physician. The evaluation and/or prescription must be kept on file. A monthly progress report will be submitted to the Support Coordinator and Individual/Parent/Guardian/Designated Representative.

#### Speech Implementer FY23 Provider Information Table

Provider	Required	Prerequisites	Age	Duration	Frequency	Setting	Location
SEMO	No	15100H, 73001H,	All	Individ	lualized	Individual	Home, Community,
		or 51030H					Site

## Speech Augmentative-Alternative Communication (AAC) Assessment

#### **Service Description**

The purpose of an AAC assessment is to identify the strengths and weaknesses within an individual with the intent of bridging discrepancies between their current communication (if any) and future communication needs. AAC assessment is completed under the direct supervision of a Speech Language Pathologist for which a client is referred by a physician or other healing arts practitioner (operating within their scope of practice under state law). Information gathered from AAC Assessment(s) will be used to identify a client's abilities/requirements for AAC

which can then enhance Treatment Planning across settings and providers. Communication Partners (e.g., family, daycare, etc.) may also require training including using the device as a two-way means to communicate.

Research documents that skilled AAC users show communicative competence in four interrelated areas: 1) Linguistic (native language), 2) Operational (use and maintenance of the device), 3) Social and 4) Strategic (the latter two of which reflect knowledge & judgment in communication interaction).

#### **Provider Requirements**

Supervising staff providing this service shall be a Licensed Speech Therapist per RSMo 345.050, or certified in accordance with provisional licensing per RSMo 345.022 and supervised by a Licensed Speech Therapist.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### Provider Reporting Service Code & Unit Information

AAC Assessment: 15100H Unit of Service: 15 minutes

#### **Service Documentation**

The service provider shall maintain service documentation including methods used for assessment, results of assessment, and notes concerning intervention, referral and recommendations. The provider shall submit a typewritten report to the Support Coordinator and Individual/Parent/Guardian/Designated Representative by the 15<sup>th</sup> of the month following the conclusion of the assessment that includes but is not limited to:

- Enrolled individual's name, birth date, and DD identification number;
- Name of Provider Agency
- Name, title, credentials of all team member(s) involved in the assessment;
- Description of instruments and methods used for assessment; and
- Results of the assessment, recommendations, and referrals for further assessment.

#### **AAC Assessment FY23 Provider Information Table**

Provider	Required	Prerequisites	Age	Duration	Frequency	Setting	Location
SEMO	No	Referral (see description)	All	Indivi	dualized	Individual	Home, Community, Site

#### **Telehealth**

#### **Service Description**

Missouri Autism Project (MAP) Telehealth services are specialized autism services provided via internet audio/visual platforms and are subject to both *Service* and *Telehealth Provider Requirements*, *Service Limitations*, *Service Documentation*, etc. described in this directory.

#### **Provider Requirements**

Providers of services via telehealth must have established policies and procedures that will address:

- Express consent obtained for telehealth service delivery from participants served and their guardian.
- Process for trouble-shooting and repairing any device or internet problems experienced by the participant during the delivery of the service. Service delivery provider secures appropriate special equipment or software

and determines there is access to internet with sufficient bandwidth to support audio/video conferencing both at the site of the participant served and the provider.

- Process to ensure privacy during the delivery of service and of any records maintained if recording of session is
  possible, including antivirus software with Health Insurance Portability and Accountability Act (HIPAA)
  safeguards and secure audio/video platforms.
- Process for evaluating the benefits of telehealth as a service modality for each participant.

#### **Service Limitations**

Missouri Autism Project Telehealth services may not be provided concurrently with other waiver services. Only the Telehealth code should be used for *Provider Reporting* of services provided via Telehealth. This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

All of the following limits apply to the participant's plan year. No more than 75% of total authorized service units may be done through telehealth. All telehealth services may only be delivered in real time.

If the delivery of the service would otherwise occur by the Qualified Health Care Professional demonstrating or implementing a strategy directly, then a competency trained on-sight implementer must be present for the remote therapist to work through. The Qualified Health Care Professional must include in the plan for services the local assistance that will be accessed if emergencies occur during the delivery of the ABA services via telehealth. The local assistance agencies or individuals must have given prior consent to serve as the emergency assistance, must have been competency trained in the plan and must be readily available any time this assistance might be required during the delivery of the ABA services.

The functional behavioral assessment must include specific assessment of the benefits and risks of service through telehealth. If telehealth is chosen as a part of the service package, the choice of telehealth modality should be made based on needs of the participant served, not the ease of the service provider. This need of the participant must be included in the documentation of this evaluation and should be part of the participant's records when chosen as part of the service plan.

#### Provider Reporting Service Code & Unit Information

Telehealth: See below table Unit of Service: 15 minutes Unit Limit: 3,200 units per year

#### **Service Documentation**

Telehealth providers are required to keep a complete medical record including audio and video recordings of a telehealth service provided to a participant and follow applicable state and federal statutes and regulations for medical record keeping and confidentiality in accordance with 13 CSR 70-3.020 and 13 CSR 70-3.030 as described in the <a href="Developmental Disabilities Waivers Manual">Developmental Disabilities Waivers Manual</a>. This includes detailed progress notes per date of service and monthly progress notes associated with objectives listed in the ISP and the individual BSP. Written data shall be submitted to DMH staff as requested.

## Telehealth: FY23 Provider Table

Telehealth Service Code	Specialized Autism Telehealth Services	SE Provider
Service Code		
19F001T	Assessment	Blue Sky
		SEMO UAC
0.42.4011.T	ACD Tracing a landicide of	Blue Sky
942A0HT	ASD Training Individual	Easterseals
		SEMO UAC
0424011	ASD Training Crown	Blue Sky Easters eals
943A0HT	ASD Training Group	SEMO UAC
401611T	ABA Consultation & Intervention	Blue Sky Easters eals
491611T	ABA Consultation & Intervention	SEMO UAC
25,000,11	Course oling Ladividual	
35C00HT	Counseling Individual	SEMO UAC
36C00HT	Counseling Group	SEMO UAC
58050HT	Employment: Career Planning Individual	BlueSky
57031JT	Employment: Prevocational Services Individual	BlueSky
57031ST	Employment: Prevocational Services Group	BlueSky
58081HT	Employment: Job Development Individual	BlueSky
58060HT	Employment: Individual Supported Employment	Blue Sky
580300T	Pre-employment ILS Individual	Easterseals
580500T	Pre-employment ILS Group	Easterseals
		Blue Sky
35B001T	Family Resource Services	Easterseals
		SEMO UAC
512A0HT	Music Therapy Individual	Blue Sky
		Easterseals
512A2HT	Music Therapy Group	Bl ue Sky
	того такру стеар	Easterseals
		Bl ue Sky
94200AT	Parent Training Individual	Easterseals
94200HT	Parent Training Group	Blue Sky
3 1200111	r arene rranning er eap	Easterseals
15100HT	Social Skills Groups	Easterseals
		SEMO UAC
		Blue Sky
15103HT	Social Skills: Curriculum Based	Easterseals
		SEMO UAC
73001HT	Social Skills: SLP Individual	SEMO UAC
46100HT	Transition Planning	Blue Sky

## Therapeutic Camps

#### **Service Description**

Therapeutic summer camps, held in various camp settings, are available to eligible individuals. Qualified and trained professionals facilitate the camps, using interventions designed to help individuals develop and practice social and executive functioning skills, integrate into the community, and generalize the use of acquired skills. Camp activities include but are not limited to crafts, games, karaoke, swimming, cooking, and music.

#### **Provider Requirements**

At a minimum, lead staff providing this service will have a bachelor's degree with a minimum of 1 year of direct experience in providing related services for persons with autism. The experience must have been obtained within the last 5 years.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### Provider Reporting Service Code & Unit Information

Therapeutic Camps: 51030H Unit of Service: per day

#### **Service Documentation**

The service provider shall maintain service documentation including detailed progress notes per date of service and monthly progress notes associated with objectives listed in the ISP. A progress report will be submitted to the Support Coordinator and Individual/Parent/Guardian/Designated Representative by the 15<sup>th</sup> of the month following the conclusion of the service.

#### **Interactive Arts Camps**

Camps will include art, music, musical theatre and multi arts. Camps will be integrated with various disability diagnosis and individuals with no diagnosis. Camps will be offered based on interest and age. The focus will be on social skills, communication and community integration.

#### Therapeutic Camps FY23 Provider Information Table

Provider	Required	Prerequisites	Age	Duration	Frequency	Setting	Location
SEMO	No	None	5-21	½ day	4 summer	Group	Site
					sessions		

#### Camp EMBRACE

Camp EMBRACE is an inclusive partial day camp that has traditional activities for individuals, ages 5-12 and is held in the spring/summer. Children ages 5 to 12 may enroll in one week sessions. These camp experiences include community activities and outings. This camp will focus on educating peer campers about creating inclusive spaces for their friends with autism and empowering children with autism to facilitate inclusivity. Announcements will be made for registration and enrollment in Camp EMBRACE in the early spring. All activities will be supervised by a camp director, counselors, community volunteers, and practicum students.

#### Therapeutic Camps FY23 Provider Information Table

Provider Required Prerequisites Age Dur	n Frequency Setting Location
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SEMO	No	None	5-12	One week	Annually	Group	Community, Site
021110			J	One week	,aa,	C. Cup	community, site

## Camp SOCIAL

Camp Social is a one-week partial-day intensive treatment summer camp that is facilitated by a Speech and Language Pathologist who uses evidence-based cognitive behavioral and social cognition interventions to help individuals develop and practice social and executive functioning skills. Camp Social will be held in the Spring/Summer. Announcements will be made for registration and enrollment for Camp SOCIAL in early spring.

Therapeutic Camps FY23 Provider Information Table

Provider	Required	Prerequisites	Age	Duration	Frequency	Setting	Location
SEMO	No	None	10-	Partial day for one wk	Annually	Group	Community, Site
			16				

### Skills Training Camps

Skills Training Camp is a partial-day camp, which may be held as a standalone day, or up to 4 days in succession. Skills Training Camps are designed for children, ages 3-6, consisting of group skill building sessions. Trained professionals promote an inclusionary group experience for children and provide them with opportunities to develop targeted social skills that are needed to be successful in a group setting. Announcements will be made for registration in early spring.

**Therapeutic Camps FY23 Provider Information Table** 

Provider	Required	Prerequisites	Age	Duration	Frequency	Setting	Location
SEMO	No	None	12 months -	Individualized	Multiple times	Group	Community,
			6 years		yearly		Site

## **Transition Planning**

#### **Service Description**

Transition Planning is a set of coordinated activities that aim to:

- Improve the functional achievement of individuals with Autism Spectrum Disorder (ASD);
- Promote individuals' successful movement from childhood to adulthood;
- Promote success in employment, post-secondary education, relationship building, and daily and independent living skills; and
- Assure seamless transition from pediatric to adult medical/clinical care.

A multi-disciplinary team partners together to collect strength-based information and a transition plan is developed that documents the individual's unique needs, abilities, strengths, motivations, preferences, and interests with appropriate focus given to extraordinary needs or conditions of support. Additionally, barriers to successful learning, interactions, and performance are identified, and strategies are developed to address the barriers.

#### **Provider Requirements**

The lead clinician shall be a licensed clinician (psychologist, or health or mental health professional) with advanced training and clinical experience in the treatment of ASD and related neurodevelopmental disorders, including knowledge about typical and atypical development and experience with the variability within the ASD populations.

Depending on the strengths and challenges of the individual with ASD, the multi-disciplinary team may include but is not limited to masters and doctoral level clinicians, occupational therapist, behavior analyst, speech therapist, and/or medical doctor.

#### **Service Limitations**

This service may only be requested if the service is not available via DESE, Medicaid, Medicaid Waiver, private insurance, or local supports.

#### **Provider Reporting Service Code & Unit Information**

Transition Planning: 46100H

For this service provided via Telehealth, review Telehealth section for additional service specifications and code.

Unit of Service: 15 minutes

#### **Service Documentation**

The service provider shall maintain service documentation including results of assessment (including observations and baseline of skills that can be used to measure progress over time), notes concerning intervention planning, referral and recommendations for specialized autism services. The provider shall submit a typewritten report to the Support Coordinator and Individual/Parent/Guardian/Designated Representative by the 15<sup>th</sup> of the month following the conclusion of the assessment. The report shall include but is not limited to:

- Enrolled individual's name, birth date, and DD identification number;
- Name of Provider Agency;
- Name, title, credentials of staff member(s) performing assessment;
- Description of instruments and methods used for assessment (e.g., VB-MAPP or ABLLS-R, ADOS, observation and interview details); and
- Results of the assessment, recommendations for intervention planning, specialized autism services, and referrals for further assessment.

**Transition Planning FY23 Provider Information Table** 

Provider	Required	Age	Duration	Frequency	Prerequisites	Location
Blue Sky	No	19F001	13+	Individualized	Annually	Site, Home, Community,
Community						Telehealth
Services						

## **Transportation**

#### **Service Definition**

Transportation is reimbursable when necessary for an individual to access Autism Project Employment and Day Habilitation services, (community services, activities and resources specified by the ISP plan). Transportation under the Autism Project shall not supplant transportation provided to providers of medical services under the state plan as required by 42 CFR 431.53, nor shall it replace emergency medical transportation as defined at 42 CFR 440.170(a) and provided under the state plan. State plan transportation in Missouri is provided to medical services covered under the state plan, but not to Autism Project services, which are not covered under the state plan. Transportation is a cost effective and necessary part of the package of community services, which prevent institutionalization.

A variety of modes of transportation may be provided, depending on the needs of the individual and availability of services. Alternatives to formal paid support will always be used whenever possible. A unit is one per month.

#### **Provider Requirements**

See the <u>Home & Community Based Waiver manual</u>.

#### Blue Sky Community Services Code

Transportation: H2023

#### **Service Limitations & Service Documentation**