**Procedure No.**: I.C.4.PR.004 **Issue Date**: April 1, 2017

**Subject**: **DDS Behavioral Services Program (DDS BSP)** **Effective Date**: Upon release

**Section**: Children’s Services **Approved**:/s/Jordan A. Scheff/SLT

**Policy Statement**

The goal of the DDS Behavioral Services Program is to identify and support children eligible for the program to receive the supports they need to remain at home with their families. Early identification of children, who have intellectual disability and who also have emotional, behavioral, or mental health needs, allows for early intervention resulting in better outcomes for both the child and his or her family.

1. **Purpose**

The purpose of this procedure is to establish a consistent approach and process for the administration of the Department of Developmental Services Behavioral Services Program (DDS BSP).

1. **Applicability**

This procedure applies to all individuals eligible for DDS who meet the BSP Eligibility Criteria(See I.C.4.PR.004 Attachment A Eligibility Criteria for DDS Behavioral Services Program), their families or guardians, and to DDS staff and qualified providers who provide BSP services.

1. **Definitions**

**Behavioral Services Program (BSP)** means an in-home program available to individuals ages 8 to 21 with intellectual disability who have been diagnosed with a serious and persistent mental disorder as defined in the most recent edition of the American Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders and as evidenced by a current psychological or psychiatric assessment. The disorder must result in the impairment of the individual which substantially interferes with, or limits, his or her functioning in family or community activities. BSP funding and services end when an individual reaches his or her 21st birthday.

**DDS Director of Psychological Services** means the DDS employee who coordinates BSP services statewide, including supporting the BSP case management supervisors, coordinating in-service training for stakeholders and chairing the Children’s Services Committee.

**DDS Regional Helpline** means case management assistance to identify resources available in the community, in DDS, and in other state agencies for those individuals and their families, who do not have a DDS case manager.

**Individual** means a child or adolescent ages 8 to 21 with intellectual disability who is eligible for admission to the BSP program.

1. **Implementation**
2. **BSP Application and Eligibility Process**
3. To apply to DDS BSP, an individual’s parent or guardian should call the DDS Regional Helpline or the individual’s DDS case manager, if assigned.
4. Prior to beginning the BSP application process, an individual’s DDS eligibility must be verified by a DDS case manager. If an individual’s eligibility for DDS has not been determined, then the individual’s parent or guardian shall apply for eligibility to the DDS Eligibility Division with the assistance of the DDS Regional Helpline or a DDS case manager.
5. Prior to beginning the BSP application process, the DDS Regional Helpline or the individual’s DDS case manager, if assigned, shall determine if the individual has: (1) a pending Department of Children and Families (DCF) petition alleging neglect or abuse; (2) an open Child Protective Services (CPS) case that is the subject of a pending investigation with DCF; (3) an open DCF Family Assessment Response (FAR); or (4) an open case with DCF’s Juvenile Justice Office. Eligibility for DDS BSP shall not be granted if any of these conditions apply.
6. If an individual has a diagnosis of autism spectrum disorder, then services from the DDS Behavioral Services Program (BSP) may only be accessed after the individual’s parent or guardian applies for any benefits available to the individual under the Medicaid Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services available to Medicaid-eligible children through the Department of Social Services (DSS). The Regional Helpline case manager or an assigned DDS case manager shall direct the individual’s parent or guardian to apply for (1) Medicaid EPSDT state plan services through DSS, and (2) any services provided through the family’s private insurance, if applicable. If these services are exhausted or otherwise not available, the individual's parent or guardian may apply for DDS BSP services.
7. The Regional Helpline case manager or an assigned DDS case manager shall assist the individual’s family or guardian to understand the admission criteria for DDS BSP and to complete the DDS BSP application. (See I.C.4.PR.004 Attachment A Eligibility Criteria for DDS Behavioral Services Program)
8. When the individual’s BSP application is completed, including all required documentation, the Regional Helpline case manager or an assigned DDS case manager shall send it to the DDS Director of Psychological Services or the Director’s designee.
9. The DDS Director of Psychological Services or the Director’s designee shall review all completed applications for DDS BSP eligibility to determine an individual’s provisional eligibility for BSP services.
10. If an individual’s provisional eligibility has been determined, a DDS case manager or DDS clinician (i.e., a licensed or non-licensed Behavior Modification Program Specialist, Developmental Specialist 1 or 2, Post-Doctoral Fellow, Psychologist, Supervising Psychologist 1 or 2, or the Director of Psychological Services) shall visit the individual and his or her family in their home, to confirm the recommendation for the individual’s eligibility for BSP services. The recommendation of the DDS case manager or DDS clinician shall be given to the DDS Director of Psychological Services, or the Director’s designee, for final eligibility determination.
11. If the individual is determined eligible for DDS BSP:
	1. The DDS Director of Psychological Services, or the Director’s designee, shall send a BSP eligibility determination letter to the individual’s parent or guardian, with copies of the letter sent to the appropriate region for inclusion in the individual’s case file.
	2. If BSP funding is not available at the time of determination, the individual’s name shall be placed on the DDS BSP waiting list.
	3. When BSP funding becomes available to the individual, a DDS case manager shall be assigned.
12. If an individual is determined not to be eligible for DDS BSP, the DDS Director of Psychological Services, or the Director’s designee, shall send a letter to the individual’s parent or guardian, with copies of the letter sent to the appropriate region for inclusion in the individual’s case file. This letter shall include instructions on how to request a Commissioner’s level review of eligibility for DDS BSP.
13. **Intake Process When Case Management Services and BSP Funding Are Available**
14. The individual’s DDS case manager shall meet with the individual and his or her family to review the BSP Family Handbook.
15. The case manager shall assist the individual’s family to complete all necessary and applicable intake paperwork including, but not limited to, (1) Medicaid State Plan services (HUSKY, Title XIX) application; (2) DSS Notice of Liability to Applicant or Recipient of Care or Support or Legally Liable Relative form; (3) DDS BSP Parent or Guardian Agreement; (4) signed consent to share the individual’s records; and (5) Home and Community Based Services (HCBS) Waiver enrollment form.
16. The case manager shall facilitate the completion of an individual’s Level of Need (LON) Assessment and Individual Plan (IP). An individual’s funding and services shall be based on the individual’s needs and provided at an appropriate level within the department’s budgeted appropriations.
17. **Implementation Process When Case Management Services and BSP Funding Are Available**
18. If an individual needs respite services immediately, the case manager shall submit a request to the regional Planning and Resource Allocation Team (PRAT), which shall determine BSP funding availability based upon information provided by the Commissioner or the Commissioner’s designee.
19. Based upon the individual’s LON Assessment; IP; the individual’s eligibility for and availability of medically necessary Medicaid state plan services; and the availability of medically necessary services paid for by private insurance; a BSP funding request shall be completed and submitted by the case manager to the case management supervisor. The case management supervisor shall submit the request to the regional PRAT. The regional PRAT shall determine funding availability based upon information from the Commissioner, or the Commissioner’s designee.
20. When an individual’s BSP funding has been approved and the individual’s budget has been developed, therapeutic and behavioral services shall be obtained through a DDS qualified provider with required data collected as outlined in the individual’s behavior support plan. It is expected that the individual’s parent or guardian shall fully participate in all of the individual’s therapeutic and behavioral services.
21. The individual’s LON and IP shall be reviewed with the case manager and BSP team members every six months to reassess the need for BSP funding and services. Within 30-days of this review:
22. The case manager shall reduce an individual’s budget, as appropriate, if his or her specific needs have been met or have diminished;
23. The case manager shall modify the individual’s budget if his or her specific needs have changed; or
24. The case manager shall submit a funding request to the case management supervisor if the individual’s specific needs have increased. The case management supervisor shall review and submit the funding request to the regional PRAT for review and final funding decision.
25. **Children’s Services Committee**
26. The DDS Children's Services Committee shall discuss individuals’ complex cases of significant concern that have been referred to the DDS Director of Psychological Services or the Director’s designee. The committee shall recommend (1) clinical or behavioral strategies, and (2) alternative supports including community resources for these complex cases.
27. The Children's Services Committee shall be chaired by the DDS Director of Psychological Services or the Director’s designee. The membership of the committee shall include the DDS Deputy Commissioner or the Deputy Commissioner’s designee, a DDS Psychologist, a DDS case manager, a DDS case management supervisor and a liaison for DDS Planning and Resource Allocation Teams. Assistant Regional Directors for Individual and Family Support Services, DDS Regional Directors and the DDS Legal Director or the Legal Director’s designee also may be members of the committee. Other members of the committee may include representatives of the Office of the Child Advocate; Department of Children and Families; Department of Education’s Bureau of Special Education; and a parent of a child who has intellectual disability.
28. **References**

None.

1. **Attachments**

I.C.4.PR.004 Attachment A [Eligibility Criteria for DDS Behavioral Services Program](http://www.ct.gov/dds/lib/dds/dds_manual/ic4/ic4pr004_attachment_a_bsp_eligibility_criteria.docx)

I.C.4.PR.004 Attachment B [DDS BSP Application](http://www.ct.gov/dds/lib/dds/dds_manual/ic4/ic4pr004_attachment_b_bsp_application.docx)

I.C.4.PR.004 Attachment C [DDS BSP Parent or Guardian Agreement](http://www.ct.gov/dds/lib/dds/dds_manual/ic4/ic4pr004_attachment_c_bsp_parent_or_guardian_agreement.docx)

I.C.4.PR.004 Attachment D [DDS BSP Family Handbook](http://www.ct.gov/dds/lib/dds/dds_manual/ic4/ic4pr004_attachment_d_bsp_family_handbook.docx)