

Provider Notice

To: IBHS Providers
From: Daniel Eisenhauer, Director of Operations
Date: January 4, 2023
Subject: IBHS 23-100 IBHS Performance Standards and Best Practices

PerformCare has developed the Performance Standards and Best Practices for Intensive Behavioral Health Services (IBHS) document to outline PerformCare expectations for the provision of IBHS treatment. IBHS providers should reference this guide to fully understand PerformCare's core philosophy surrounding the delivery of effective IBH Services. Recurrent themes throughout the document include the importance and benefits of using a strengths-based approach to treatment, individualizing treatment approaches, collaborating with family members and natural supports, and assisting the Member with building a strong foundation for continued wellness and recovery.

The IBHS Performance Standards and Best Practices should be used in addition to PerformCare Policies and Procedures and the Office of Mental Health and Substance Abuse Services (OMHSAS) regulatory guidance for the provision of IBHS.

Thank you for your continued commitment to improving the overall well-being of our Members.

If you have any questions, please feel free to contact your PerformCare Account Executive.

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Performance Standards and Best Practices
for Intensive Behavioral Health Services (IBHS)

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Definitions

ABA	Applied Behavior Analysis is the design, implementation, and evaluation of environmental modifications, using behavioral stimuli and consequences to produce socially significant improvement in human behavior or to prevent loss of attained skill or function by including the use of direct observation, measurement, and functional analysis of the relations between environment and behavior.
Assessment	A face-to-face process that includes evaluation of the behavioral health, medical, psychological, social, developmental, and educational factors important to the Member. This must occur within, or include information from, the home, school, and community
Assistant BC-ABA	Assistant Behavior Consultation-Applied Behavior Analysis consists of assisting an ABA clinician providing behavior analytics for Behavior Consultation - ABA; and providing face-to-face interactions.
BA	Behavior Analyst provides clinical direction of services, development and revision of the ITP, and consultation with the treatment team. The BA is also able to complete a functional analysis.
BC	Behavior Consultation provides behaviorally based interventions in the home, school, and community.
BC-ABA	Behavior Consultation-Applied Behavior Analysis, uses the principles of ABA to develop and revise the ITP, provide consultation to the treatment team, and is responsible for the clinical direction of services.
BHRS	Behavioral Health Rehabilitation Services was the system of care for children’s home, school, and community services in Pennsylvania from approximately 1984 to 2021. BHRS is no longer offered and has been replaced by IBHS.
BHT	Behavior Health Technician provides individual assistance that is designed to improve skill development, assist in managing difficult situations, and eliminate behaviors that are disruptive or problematic in the home, school, and community.
BHT-ABA	Behavioral Health Technician-Applied Behavior Analysis applies ABA interventions as specified in the individual treatment plan, collects data, and works to increase adaptive functioning in the home, school, and community.
Caregiver	An individual that is in charge of the Member at the time treatment is being provided. At various times this can include the parent(s), teacher, daycare staff, community setting staff, or others.
CASSP	Child and Adolescent Service System Program. In Pennsylvania, the children’s behavioral health service delivery should be guided by the principles found at the following website: https://www.dhs.pa.gov/Services/Mental-Health-In-PA/Pages/CASSP.aspx
EBT	Evidence-based treatment refers to treatment that is supported by scientific evidence. That is, studies have been conducted and extensive research has been documented on a particular treatment, and it has proven to be successful.

FBA	Functional Behavior Assessment is a series of observations that takes place over a period of time in order to directly observe the antecedents and variables that produce the behaviors of concern. Observations occur in all settings, typically include standardized measures, and interviews of multiple people.
IBHS	Intensive Behavioral Health Services support children, youth, and young adults with mental, emotional, and behavioral health needs. IBHS offers a wide array of services that meet the needs of these individuals in their homes, schools, and communities. IBHS has three categories of service: <ol style="list-style-type: none"> 1. Individual IBHS Evidence Based Treatment 2. Applied Behavior Analysis (ABA) IBHS 3. Group Services IBHS
ITP	The Individual Treatment Plan is a strengths-based Member-specific plan that outlines goals and objectives to address identified skill deficits, targeted behaviors, areas that will be a focus of treatment, current rates of behavior (baseline), as well as desired outcome of treatment efforts.
Member	Refers to an individual that is under the age of 21 and receiving services from PerformCare.
MT	Mobile Therapy is a service that provides individual and family therapy within the home or community.
Recovery	An individual’s personal experience of accepting the diagnosis of a mental health disorder, obtaining the necessary treatment, feeling empowered, building a strong support system, and increasing hope for the future.
Resiliency	An individual’s inner capacity to withstand adversity and meet life's challenges. The individual feels competent and capable of managing problems and issues and demonstrates a level of optimism about the future.
Treatment Team	Typically consists of the Member, professionals working with the Member, parent/guardian, as well as community and natural supports.
Written Order	Usually, the first step in obtaining IBHS services, this is a written recommendation outlining presenting issues, specific IBHS clinicians that may be needed, and the number of clinician hours that will likely be required to achieve success.

Background

Behavioral Health Rehabilitative Services (BHRS) started in Pennsylvania in approximately 1984 under The Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program. EPSDT is the child health component of Medicaid that allowed BHRS to develop and deliver mental health treatment for children and youth in the home, community, and school. Tens of thousands of children's behavioral health needs were met via the provision of BHRS treatment. During this time, treatment knowledge improved, evidence-based treatments were developed, and a more standardized approach to the overall behavioral health treatment of children was established. As such, in 2021, BHRS was replaced with a different treatment model, Intensive Behavioral Health Services, or IBHS.

When considering the focus on the system of care that IBHS provides, several advantages become evident. Initiation of the IBHS model allows for standardization and improvement in the delivery of services by establishing minimum requirements, addressing gaps in care that routinely occurred with BHRS, and begins with a strengths-based framework from which individualized treatment can be provided. The implementation of IBHS encourages providers to develop and deliver treatment that is backed by research (e.g., evidence-based treatment), embraces Applied Behavior Analysis (ABA) treatment as the current "gold standard" for the treatment of autism and other diagnoses, and aspires to meet the behavioral health needs of children and youth more fully and appropriately in Pennsylvania. IBHS also establishes staff supervision and training requirements which, in theory, should improve the overall quality of care and continued development of qualified IBHS clinicians.

To ensure that the core philosophy and commitment to Member care is met or exceeded, PerformCare has prepared the following summary. More detailed information regarding specific requirements can be found in PerformCare Policies and Procedures; while regulatory information can be referenced in Title 55, Chapters 1155 and 5240 (2019), of the PA code.

Individual IBHS

Individual IBHS is a strengths-based approach to the treatment of behavioral health disorders. Individual IBHS works to provide intensive services in a multitude of settings and allow the Member an opportunity to further develop skills and reduce or eliminate unwanted or disruptive behaviors. The goal of Individual IBHS is to teach the Member and caregiver specific plans and interventions that will allow the Member to use these skills to independently self-regulate; as well as assist the caregiver in reinforcing these skills in order to better manage challenges. Individual IBHS works with the strengths of the Member and family and looks to bolster these resources while simultaneously eliminating behaviors that interfere with effective daily functioning. Various types of treatment can be provided via Individual IBHS, and these are listed below.

Behavior Consultation (BC)

The role of the BC is to provide the clinical direction and treatment interventions to the treatment team and teach the Member and other involved caretakers how to implement interventions. The BC develops and regularly reviews the ITP. The BC should provide expert consultation within the home, school, and community to assist team members address a multitude of behaviors. The BC is responsible to ensure that all interventions are implemented correctly and consistently and uses observable data in order to refine treatment interventions.

The BC is further responsible for ensuring that interventions are applied with consistency and fidelity, as well as monitor outcome information.

Mobile Therapist (MT)

The MT can function as a lead clinician, similar to an outpatient therapist, however MT services are provided in the home and community. The MT often uses a combination of individual and family therapy to introduce the Member to more adaptive coping skills, practice social skills, more effectively manage emotions, or improve communication patterns. Often the MT can address a myriad of concerns and is able to use various therapeutic techniques to help the Member and family. The MT is responsible for the development of the ITP as well as the interventions that will be used to achieve treatment goals and positive outcomes. The MT ensures that all treatment team members (e.g., parent; teacher) can fully implement ITP interventions in order to standardize the approach to treatment. PerformCare expects that the MT uses evidence-based treatments or techniques to facilitate change.

Behavioral Health Technician (BHT)

The BHT provides direct assistance to the Member in learning, using, and practicing the skills that are being developed. The BHT can work with the Member in the home, community, and school so that standardization of treatment occurs in all settings. The BHT works intensively to implement interventions that are defined in the ITP, allows the Member opportunities to practice these skills, and ensures that caregivers can provide the same intervention. The BHT maintains frequent contact with the lead clinician to quickly determine treatment revisions that may need to occur, relay the success of each intervention, progress made, and conscientiously collects data for team analysis.

Evidence-Based Treatments (EBT)

Evidence-based treatments use well-researched models to provide treatment for specific behaviors or symptoms. Each EBT has developed treatment protocols, outcome measures, and system to ensure fidelity in the application of the treatment. Functional Family Therapy and Multisystemic Therapy are separate IBHS EBT level of care; while Specialized In-Home Treatment Program is considered a Best Practice treatment, and all are offered within the PerformCare network. Other EBT packages such as Cognitive Behavioral Therapy, Trauma Focused-Cognitive Behavior Therapy, Behavioral Therapy, and Attachment Based Family Therapy may be utilized within IBHS and delivered by the MT.

IBHS - Applied Behavior Analysis (ABA)

ABA is a type of treatment that is based in Behavioral Therapy. Clinicians use basic tenets of both Operant (e.g., behavioral contingency, reinforcement schedules, discriminative stimuli, differential reinforcement, overcorrection, response cost) and Classical Conditioning (e.g., systematic desensitization, reciprocal inhibition, repeated exposure, response prevention) to foster treatment gains or eliminate non-preferred behaviors. ABA clinicians manipulate environmental factors that may be sustaining, provoking, or inhibiting a behavior to affect change. ABA can also be used to assist with sensory integration, communication difficulties, and language acquisition. ABA can be an effective

treatment for Members who have been diagnosed with an autism spectrum disorder (ASD) but can also be used to help Members with other types of behaviors or symptoms.

ABA-services offered through IBHS can include Behavior Analytic, Behavior Consultation-ABA, Assistant Behavior Consultation-ABA, and Behavioral Health Technician-ABA, all of which are briefly described below.

Behavior Analytic (BA)

The BA is able to effectively develop and apply ABA interventions, provide direction to the treatment team, and can function as the clinical lead. The BA is able to complete all tasks associated with the BC-ABA role (see below) but can also complete a functional analysis in order to further refine and revise ABA interventions.

Behavior Consultation - Applied Behavior Analysis (BC-ABA)

The BC-ABA is generally utilized in complex cases with behavioral concerns or when there is a constellation of behavioral concerns. PerformCare expects that after careful observation, data analysis, and case conceptualization, the BC-ABA develops specific ABA treatment protocols that will significantly impact behavior. BC-ABA collaborates with the treatment team, develops the ITP using all of the information collected, and ensures that the caregiver and/or support staff, such as a BHT-ABA, are able to consistently implement the intervention.

Additional responsibilities of the BC-ABA include ensuring fidelity to treatment plans, providing education and training on behavioral techniques, monitoring progress, defining, and measuring outcomes, as well as ITP revisions based on Member response to intervention.

Assistant Behavior Consultation - Applied Behavior Analysis (Assistant BC-ABA)

The Assistant BC-ABA role consists primarily of assisting an ABA clinician providing BA or BC-ABA treatment and providing face-to-face interactions with the Member. The Assistant BC-ABA can further inform ITP development and/or revisions, as well as implement interventions that fall within the scope of credentials held by the individual providing Assistant BC-ABA treatment.

Behavioral Health Technician - Applied Behavior Analysis (BHT-ABA)

The BHT-ABA provides individual assistance to the Member by applying ABA interventions as outlined in the ITP. The BHT-ABA is expected to methodically apply ABA interventions and observe, monitor, and record behavioral information (e.g., behavioral frequency, antecedents, behavioral responses, duration of behavioral responses, reinforcers, successful interventions, self-management skills), and convey the data to the lead clinician. The BHT-ABA provides direct support to the Member and caregivers, in skill development and the transfer of skills.

Individual IBHS and IBHS-ABA within an ABA Center

Center-based treatment is an ABA treatment that occurs in a community-like setting and employs ABA staff, as per regulations. The goals of center-based treatment are to facilitate skill development using ABA interventions within a community-like setting. For some Members, skill acquisition is not able to occur within the home, thus the Member comes to the center for a

brief period of time to learn foundational skills that can then allow treatment within the home to proceed. Such Members may require additional assistance from Individual IBHS or IBHS-ABA to work one-to-one with the Member while attending a center. The Individual IBHS or IBHS-ABA staff assist center-based staff with ITP implementation. Individual IBHS or IBHS-ABA staff providing treatment within the center must follow all regulatory guidance and PerformCare Policies and Procedures while providing treatment within a center. In general, the provision of Individual IBHS or IBHS-ABA within a center should be strategic, time-limited, and focused on goal attainment. Upon successful skill attainment, IBHS staff begin to decrease time spent providing treatment in the center and work to transfer skills and treatment to the home or school.

IBHS - Group Services

IBHS-Group Services is treatment that occurs in a structured setting located in the school, community, or community like setting and allows for skill development in a group format. Group Services can provide a variety of interventions that target different therapeutic skills such as coping skills to reduce anxiety, social skills to improve peer relations, or learning more effective communication techniques. Group Services provide an opportunity for Members to engage in supervised interactions with peers to practice these skills. PerformCare offers the following types of group services:

IBHS-Group Services

- After-School Program
- Intensive Day Treatment
- IBHS Group

IBHS-ABA Group Services

- Early Intensive Behavioral Intervention
- Enhanced Integrated Behavioral Services
- Stepping Stones
- IBHS ABA Group

WRITTEN ORDER

IBHS must be prescribed through a written order, which is a written summary of Member-specific information. Information is collected during a face-to-face interaction with the Member. The written order must be completed by a licensed physician, licensed psychologist, certified registered nurse practitioner or other licensed professional whose scope of practice includes the diagnosis and treatment of behavioral health disorders (e.g., LMFT, LCSW, LPC) and the prescribing of behavioral health services, including IBHS. A Best Practice Evaluation (BPE), which can be more comprehensive, may also serve as a written order but must meet the regulatory requirements for a written order for Individual IBHS, IBHS-ABA, and IBHS-Group Services.

Expectations for the written order/BPE include a cohesive summary of the clinical need, a valid behavioral health diagnosis that is listed in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders or International Classification of Diseases, and a description of the presenting symptoms and behaviors appropriate for IBHS treatment. PerformCare expects that the written order outlines initial treatment needs of the Member and the treatment need is stated

objectively. As an example, if a Member is displaying physical aggression, of moderate intensity, within the school and this is estimated to occur approximately ten times per week for fifteen minutes, an initial treatment objective may be to decrease physical aggression within the school to six times per week; with the objective to be elimination of this behavior. Similarly, this information can be stated in days per week, percentages of time, or other objective, observable measures. Regardless of how the treatment plan information is presented it must include baseline information, as well as the intensity, severity, and frequency of the targeted behaviors.

ASSESSMENT

An assessment for IBHS is a comprehensive, face-to-face, review of all relevant information about the Member, family, and community constellation. The assessment includes both historical (e.g., developmental history, medical history, adverse experiences, etc.) and current information regarding Member behavioral health need. The assessment is completed in-person, occurs across settings, and contains information from multiple sources. PerformCare expects that the assessment utilizes CASSP principles, be strengths-based, incorporate an objective measure to provide data for the treatment team, and fully describe the current behaviors and symptoms. An IBHS assessment must be completed for any of the three types of IBHS being requested and updated as needed.

The timeframe for completion, clinician qualifications, and information gathered must meet regulatory requirements. As required by sections 5240.21(c) (7) and 5240.85(c) (6) of the IBHS regulations and PerformCare Policies and Procedures the Member should be assessed across the home, school, and other community settings.

In addition to existing regulations PerformCare requires that an ABA assessment follow FBA format to more fully inform ITP development.

PerformCare conceptualizes an assessment as a way to provide a comprehensive understanding of the current behavioral health need and an opportunity to refine the recommendation provided within the written order. This can include adjusting the number of treatment hours per month, the type of treatment that is best suited to the clinical presentation (e.g., after assessment treatment team may determine Member does not require ABA IBHS, but would likely benefit from IBHS Individual), and the intensity of treatment hours in each setting. Please reference regulatory requirements and PerformCare Policies and Procedures for more detailed information related to the assessment process.

INDIVIDUAL TREATMENT PLAN (ITP)

Following completion of the IBHS assessment, the information collected must be translated into the ITP. The ITP should be completed in collaboration with the Member and caregiver(s), as well as other team members. The ITP should include measurable objectives and goals in order to track and monitor progress. ITP goals should incorporate existing Member and family strengths that can provide a foundation for effective treatment to build upon. PerformCare expects the ITP to include symptom reduction plans targeting undesirable or problematic behaviors (as identified during the assessment), to increase existing skills, and develop interventions for continued skill development. Please be aware that when restrictive procedures are utilized this must be included in the ITP. Similarly, anytime restrictive procedures are used PerformCare requires that a restraint reduction plan is developed and included in the ITP.

The primary objective of the ITP is to teach new skills, reduce undesirable behaviors while increasing prosocial actions, and improving overall adaptive functioning/quality of life. PerformCare expects that detailed information about implementing interventions are either included in the ITP, or available as a separate document, to provide continuity of care should staffing change (e.g., interventions should include sufficient detail that any staff person could implement immediately, or after a brief training period). Optimally a completed Individual IBHS and Group ITP includes evidence-based interventions. The ITP for ABA must include evidence based and well-researched interventions.

Additionally, the ITP should provide a detailed description of, and rationale for, all community activities requiring the assistance of IBHS staff. BHT, if applicable, can assist with transferring skills to the caregiver(s) in a community setting; however, the BHT should not usurp the role of the primary caregiver during any community activity. PerformCare believes that the caregiver is a key partner/participant in treatment and should be actively involved in all interventions. The ITP is considered a dynamic document, meaning that it is intended to be reviewed and revised based on Member performance, areas of opportunity, and any identified barriers to treatment efforts.

Ongoing team collaboration and regular team meetings are an important component of effective treatment. Beyond underscoring a strengths-based approach, consistent team meetings ensure that the Member, caregiver(s), and other involved systems (e.g., school, Children and Youth Services, Juvenile Probation, Targeted Case Management, ID Supports Coordinator) can provide meaningful feedback. The PerformCare Clinical Care Manager should be considered part of the treatment team. Team meetings should be utilized to discuss ITP goals, progress on these goals, gain consensus on how progress will be measured, and prioritize behaviors of concern. Team meetings also allow an opportunity to identify and resolve barriers to treatment, revise current ITP interventions, and most effectively complete discharge planning

CAREGIVER INVOLVEMENT

PerformCare strongly believes that caregiver (including school personnel) involvement is a critical component of treatment and essential to the long-term success of the Member's recovery and wellness. Providers should have clearly outlined policies detailing expectations for caregiver participation and work to maintain this engagement throughout treatment. Education and active involvement in treatment interventions should be ongoing, with the goal of fully transferring skills to the Member and caregiver.

Caregiver involvement can include participation with the IBHS treatment team, particularly in family sessions, maintaining engagement with therapy and/or consultative services, providing feedback to the treatment team regarding the efficacy of interventions and revisions that may be needed, and consistently using the techniques or therapeutic skills acquired. IBHS providers may include additional expectations.

ACTIVE DISCHARGE PLANNING

Active discharge planning should begin at the initiation of service, be discussed during team meetings, and planned for throughout the course of treatment. Discharge planning should include many factors such as the type of treatment that is beneficial for the Member, current behaviors and symptoms, ITP progress, and level of skill acquisition. Discharge discussions should respectfully consider the Member/caregiver perspective, beliefs, and treatment priorities. A target discharge date is required and should be established from information presented in the assessment and included in the ITP. The target discharge date may be fluid and may change based on Member progress but should be a regular discussion during team meetings.

SUMMARY

The different types of IBHS allow for an array of treatments that are individualized and specific to each Member. Many of the interventions offered via IBHS are EBTs, or use components of an EBT, to provide a more robust and efficacious treatment experience. IBHS uses a strengths-based and Member-centered approach where treatment teams are encouraged to build upon existing skills of the Member and caregiver to use as a foundation for additional treatment gains. IBHS allows for new skill acquisition and can significantly improve functional and adaptive capacity. In addition, IBHS encourages the treatment team to join with the Member and caregiver, uses objective measures to assess methodology, and frequently works to solve barriers that may be impacting treatment. IBHS also encourages providers to use current research and fully established EBTs, provides a distinct route for the provision of ABA treatment, and allows for the flexibility that is often needed for in-vivo treatment.