Effective July 15th, 2015, the Developmental Disabilities Program will be implementing a change in procedure regarding Behavior Support Services (BSS). Behavior Support Services exceeding 25 hours per year will be under additional scrutiny from the Regional Offices. For members who already have an approved Individual Cost Plan (ICP) that includes greater than 25 hours of BSS, this change will be effective at the beginning of the next fiscal year or if the team requests additional BSS hours than what is currently approved. The service must be addressing an assessed need in the member’s plan of care and come out of the current ICP. If additional funding is requested, a Temporary Service Increase (TSI) or urgent needs request may be made following established processes. A request does not guarantee approval.

Below you will find waiver and administrative rule language around Behavior Support Services, Positive Behavior Support Plans and Functional Behavior Assessments. Please note that a Functional Behavioral Assessment followed by a Positive Behavior Support Plan must be completed for members who engage in challenging behaviors. Also important to note is this service does not allow for direct care with an individual.

Once a team has made a decision to request additional BSS services and it works within the current cost plan, the Regional Manager may ask for documentation including but not limited to: how the initial 25 hours were used, assessed need, supporting data, what the team plans to accomplish with additional hours, functional behavior assessment and positive behavior support plan. It is responsibility of the BSS provider to ensure that additional hours have been approved prior to providing the service. Regional Managers will notify BSS providers of approvals. Denials will be routed to Central Office for review and reason for denial will be sent to the team.

For providers meeting qualifications using line d, (a person with a degree in applied behavior analysis, psychology, or special education who has provided documentation of training and experience in the use of the principles of applied behavior analysis in the habilitation of person(s) with developmental disabilities and the development of behavior support plans to the developmental disabilities program director) please follow the below instructions for approval of provider.

1. Submit to Regional Manager:
   a. Certified copy of transcripts and/or degree from an accredited university.
   b. Documentation of training and experience in the use of the principles of applied behavior analysis
   c. Documentation of the development of behavior support plans.

2. Regional Manager will review and submit information to DDP Bureau Chief with recommendations 3.

DDP Bureau Chief or designee will:
   a. Send a letter verifying they are qualified or not qualified (and why not if not qualified).
   b. Copy of the letter to regional office for their contract file.
   c. Copy of letter to DDP contract file.

Waiver Language

Service Definition (Scope):
The Behavioral Support Services include the following:
1. Designing behavioral assessments and functional analyses of behavior and interpreting assessment and evaluation results for staff and unpaid caregivers providing services to enrolled individuals.
2. Designing, monitoring and modifying written behavior intervention procedures and skill acquisition procedures. Written plans of intervention developed generally require the collection of data by staff or unpaid caregivers providing direct support. Decisions made in designing, monitoring and modifying behavior
intervention and skill acquisition procedures are generally based on the review and analysis of collected data.3. Training staff and unpaid caregivers in the implementation of formal and informal procedures designed to reduce problem behaviors and/or to increase appropriate behaviors.

4. Attending planning meetings for purpose of providing guidance and information to planning team members in the setting of appropriate goals and objectives for individuals who need Behavioral Support Services.

In general Behavioral Support Services offer appropriate assessment and intervention methods for use in unfamiliar situations and for a range of cases of all ages. Behavioral Support Services teaches others to carry out ethical and effective behavior interventions based on positive behavior supports. Behavioral Support Services staff may supervise the work of others who implement behavior interventions. All behavior intervention procedures developed by the Behavioral Support Services staff are in compliance with the Administrative Rules of Montana governing the use of Positive Behavioral Supports.

**Administrative Rule Language On Positive Behavior Support Plan**

**37.34.1412 POSITIVE BEHAVIOR SUPPORT: BEHAVIOR SUPPORT PLAN**

(1) The behavior support plan is a formal written plan to address needs identified in a person's plan of care and must be developed for all persons engaging in challenging behavior. A behavior support plan must be developed as required by ARM 37.34.1420(4). The behavior support plan must be based on a functional behavior assessment as described in ARM 37.34.1411.

(2) Behavior support plans:

(a) utilize the basic principles of human behavior and learning and the principles of applied behavior analysis; (b) emphasize the development of the functional alternative behavior using positive approaches, positive behavior intervention, and positive reinforcement procedures;

(c) use the least intervention possible;

(d) describe how to rearrange environments, alter curricula or tasks, and adjust schedules;

(e) are practical and appropriate for the settings where they will be implemented, for the person and for those who will implement the methods described;

(f) are evaluated through timely review of specific data on the progress and effectiveness of the procedure;

(g) identify functional alternative behavior that meets the same function as the challenging behavior;

(h) provide a clear and measurable procedure used to alter the challenging behavior;

(i) include a description of any restrictions necessary to protect the health and safety of the person, describe why the restrictions are necessary, and list the criteria for removing them; (j) include reactive strategies to ensure the safety of the person and others; and (k) are included in the person's plan of care.

(3) A behavior support plan must not include the use of seclusion, or the use of aversive, abusive or demeaning procedures, procedures that cause pain or discomfort except as provided for in the emergency procedures allowed for in ARM 37.34.1420.

(4) Use of the person's behavior support plan requires prior written consent from the following for approval:

(a) the person;

(b) the person's parent(s) if the person is under 18 years of age; and (c) the legal representative, if one has been appointed by the court.

(5) The person's planning team and the person's providers are responsible for the implementation of the person's behavior support plan.
(6) A behavior support plan must include appropriate measures for training and monitoring staff performance throughout the implementation of the behavior support plan.

**Administrative Rule Language on Functional Behavior Assessment**

37.34.1411 POSITIVE BEHAVIOR SUPPORT: FUNCTIONAL BEHAVIOR ASSESSMENT

(1) A functional behavior assessment is the gathering of information about a person's behavior based upon multiple information sources, including:
   (a) a review of the person's records;
   (b) personal observations;
   (c) interviews with support providers;
   (d) interviews with the person; and
   (e) interviews with others who have personal knowledge of the person.

(2) A functional behavior assessment must include:
   (a) a clear and measurable description of the challenging behavior, including frequency, duration, intensity, and severity of the behavior;
   (b) a clear description of the need to alter the behavior;
   (c) a clear description of medical, psychological, psychiatric, physiological, and environmental conditions in terms of how they may affect the occurrence of the challenging behavior;
   (d) the events, times, and situations that predict both the occurrence and the nonoccurrence of the challenging behavior and a description of the events immediately preceding and following the behavior;
   (e) summary statement(s) regarding the function(s) that may be maintaining the challenging behavior; (f) data confirming the function of the challenging behavior and the strategies for reducing or eliminating the challenging behavior;
   (g) functional alternative behavior that serves to meet the same function as the challenging behavior; and (h) a clear and measurable procedure that will be used to alter the challenging behavior.

**Administrative Rule Language on Provider Qualifications**

(a) a board-certified behavior analyst (BCBA);
(b) a family support specialist with an autism endorsement (FSS-AE);
(c) a person with an Institute for Applied Behavior Analysis (IABA) consultant certification; or
(d) a person with a degree in applied behavior analysis, psychology, or special education who has provided documentation of training and experience in the use of the principles of applied behavior analysis in the habilitation of person(s) with developmental disabilities and the development of behavior support plans to the developmental disabilities program director.