

DHHS26133 Scope of Work

Article 1

GENERAL ADMINISTRATIVE REQUIREMENTS

1.1 **Background.** The Department of Health and Human Services, Division of Services for People with Disabilities (“**DHHS/DSPD**”) seeks to provide time-limited peer support services to Persons and their families to help them remain in their home and community-based settings while waiting for Home and Community Based Services (“**HCBS**”). Peer support services will be provided by people with lived experience to help identify needs, provide support and guidance, navigate systems, and connect Persons and families to resources.

1.2 **Definitions.** In this contract, the following definitions apply:

“Corrective Action Plan” means a step-by-step plan of action developed by the Contractor to achieve specific outcomes to resolve deficiencies identified by DHHS with the Contractor’s service delivery or contract requirements.

“HCBS Waivers” means federal and state approved programs developed to meet the needs of Persons who prefer to receive long-term care services and support in their homes and communities as an alternative to institutional settings. DHHS/DSPD administers the following Home and Community Based Service Waivers: Community Supports Waiver, Community Transitions Waiver, Acquired Brain Injury Waiver, Physical Disabilities Waiver, and Limited Supports Waiver.

“Person” means an individual who has an Intellectual Disability, a Related Condition (“**ID.RC**”), an Acquired Brain Injury, also known as a Qualifying Acquired Brain Injury (“**ABI**”), or a Physical Disability (“**PD**”) as defined in Utah Administrative Code, Rule R539-1, and is eligible to receive services through DHHS/DSPD.

“Peer Mentor” means an individual who has lived experience with identifying needs, providing support and guidance, navigating systems, and connecting Persons and their families to resources. The lived experience is gained by the individual either being a person with ID.RC, ABI, or PD or a family member and caregiver to an individual with ID.RC, ABI, or PD.

“Staff” means any individual who is employed by the Contractor to provide services under this contract or who has access to Persons’ protected health information.

“UPI” means USTEPS Provider Interface. UPI is a web-based data system that is used by DHHS/DSPD employees and their contracted providers to assist in managing a Person’s services.

“USTEPS” means the web-based case management system used by DHHS/DSPD employees and contracted support coordinators for tracking eligibility, planning and services.

1.3 **Service Population.** Persons on the DHHS/DSPD waiting list who are referred to the Contractor by DHHS/DSPD for peer support services.

1.4 **General Contractor Qualifications.** The Contractor shall:

- (1) have a minimum of two years of experience in each of the following areas:
 - (A) working with families and individuals with various types of disabilities;
 - (B) providing Persons and their families with information and referral to resources that can be used by individuals with various types of disabilities living in the community;
 - (C) developing, coordinating, and providing information and training about disabilities, rights of people with disabilities, and available resources for people with disabilities;
 - (D) assisting individuals to understand, apply for, and maintain Social Security benefits, Medicaid benefits, Department of Workforce Services benefits, and Vocational Rehabilitation benefits;
 - (E) assisting individuals to understand and access mental health systems and resources; and
 - (F) coaching and providing skills-building to Persons and their families;
- (2) have knowledge of HCBS Waivers and DHHS/DSPD requirements for Persons to remain on the DHHS/DSPD wait list for services;
- (3) have the capacity to provide in-person services within the region(s) specified by the Contractor; and
- (4) have Staff that includes individuals with disabilities, or caregivers of family members with a disability, to provide peer support.

1.5 **Peer Mentor Staff Qualifications.** The Contractor shall ensure that Peer Mentor Staff:

- (1) are at least 18 years of age;
- (2) are individuals with ID.RC, ABI, or PD; or caregivers of a family member with ID.RC, ABI, or PD who have or are currently providing care to their family member with ID.RC, ABI, or PD;
- (3) complete the Contractor's peer support training and;

- (4) are certified as Family Peer Support Specialists prior to working with Persons, by completing the Family Peer Support Specialist certification at:
<https://sumh.utah.gov/education/certification/peersupportspecialists/>.

1.6 **Peer Mentor Staff Training Requirements.** The Contractor shall:

- (1) ensure training is created and conducted by professionals with knowledge of, and experience with Persons;
- (2) maintain written documentation of each Peer Mentor Staff's successful completion of each required training area, and ensure that an external reviewer can verify training completion;
- (3) ensure Peer Mentor Staff successfully complete and maintain compliance with training in the following areas within 30 days of employment, or before working alone with Persons:
 - (A) when to call 911 due to an emergency;
 - (B) the DHHS code of conduct;
 - (C) the legal rights of Persons that are relevant to the Peer Mentor Staff's responsibilities, and how the Americans with Disabilities Act relates to those rights;
 - (D) mandatory reporting requirements per Utah Code 62A-4a-403 and Utah Code 26B-6-205 related to actual or suspected abuse, neglect, exploitation, or maltreatment;
 - (E) confidentiality regarding the Person's private information that is shared only with individuals who need to know the information in order to provide support or professional treatment, to coordinate DHHS services, to ensure safety, or to conduct DHHS business, including the requirement that the Person's private information must be maintained and shared in compliance with Health Insurance Portability and Accountability Act ("**HIPAA**") regulations;
 - (F) the Contractor's policies, procedures, and plans that are relevant to the service the Peer Mentor Staff will be providing;
 - (G) introduction to DHHS/DSPD's philosophy, mission, and beliefs (dspd.utah.gov);
 - (H) ethics of peer support, including professional relationships, dual relationships, boundaries, and limits;

- (I) coaching and supporting Persons by using their lived experience in the following areas:
 - (i) assisting in identification of natural supports;
 - (ii) resource coordination;
 - (iii) family education and support;
 - (iv) family advocacy;
 - (v) crisis prevention;
 - (vi) stress management techniques; and
 - (vii) implementing action steps and celebrating success;
- (J) how to complete assessments that are identified or developed by the Contractor with Persons and their families to identify their needs, rate satisfaction with the Contractor's peer support service, and to evaluate success toward intended outcomes;
- (K) key resources that support Persons;
- (L) how to apply for the following benefits: (i) Social Security, (ii) Medicaid, (iii) Department of Workforce Services, and (iv) Vocational Rehabilitation; and
- (M) requirements for remaining on the waiting list for DHHS/DSPD services;
- (4) ensure Peer Mentor Staff who provide peer support services to Persons with an ABI successfully complete ABI training in the following areas before working alone with Persons who have an ABI:
 - (A) effects of brain injuries on behavior; and
 - (B) functional impacts of a brain injury.

1.7 **Policies and Procedures.**

- (a) Prior to providing services, the Contractor shall have in place, and be in compliance with, all its written policies and procedures pursuant to this contract. DHHS may review and require the Contractor to adjust its policies and procedures at any time. The Contractor shall maintain its policies and procedures and make it available to Staff and Persons.
- (b) The Contractor shall have personnel and operating policies and procedures to ensure adequate structure and organization that promotes service quality and capacity.

- (c) The Contractor shall have an external quality monitoring process. The Contractor shall cooperate with DHHS contract reviewers and the requirements of the DHHS Quality Management Team. If the DHHS reviewer identifies a deficiency that requires a Corrective Action Plan from the Contractor, the Contractor shall submit to the DHHS Quality Management Team a written Corrective Action Plan that responds to each identified deficiency according to the instructions provided by the DHHS reviewer. The Contractor shall submit the response within the required timeframes. The Contractor shall submit a revised Corrective Action Plan within five business days if the Contractor's response is determined unacceptable by the DHHS Quality Management Team. If a revised Corrective Action Plan is determined to be unacceptable by the DHHS Quality Management Team, the Contractor may receive sanctions pursuant to the terms of this contract. The Contractor may appeal sanctions to DHHS.

1.8 **Staff Records.** The Contractor shall maintain the following in each Staff's record:

- (1) the Staff's name, address, and telephone number;
- (2) the results of background screenings that have been completed through the DHHS Office of Background Processing;
- (3) a current and signed copy of the DHHS Provider Code of Conduct;
- (4) records of all successfully completed trainings; and
- (5) copies of all regular performance evaluations.

1.9 **Person Records.** The Person's records are the property of DHHS/DSPD. The Contractor shall maintain a separate record for each Person receiving services. The Person's record shall include the Person's:

- (1) name, address, phone number, birth date, and DHHS/DSPD personal identification number;
- (2) guardian, if applicable, including name, address, and phone number;
- (3) emergency contacts and instructions on how to contact them;
- (4) waiting list worker's name, email, and phone number;
- (5) written peer support service delivery and billing documentation that includes:
 - (A) the name of the Person;
 - (B) the name of the Contractor;
 - (C) the name of the Contractor's Peer Mentor Staff who delivered the peer support service;

- (D) the date and time the peer support service was provided;
 - (E) the amount of time spent delivering the peer support service;
 - (F) notes describing progress towards the Person's goals and peer support service satisfaction;
 - (G) the Person's pre and post assessment results; and
 - (H) the Person's peer support plan;
- (6) admission and discharge dates of peer support service from the Contractor;
 - (7) signed statement signed by the Person and the Person's legal guardian (if applicable) verifying that the Contractor both explained and provided them with a copy of its grievance policy and procedures; and
 - (8) medical information relevant to providing peer support services to the Person.
- 1.10 **Incident Reporting.** Incidents involving a Person during peer support service delivery are classified at two levels: critical and non-critical. Both critical and non-critical incidents require incident reports to be entered into UPI. The Contractor shall refer to the most current version of the DHHS Incident Reporting Guide for a detailed list of critical and non-critical incidents. The DHHS Incident Reporting Guide can be found on the DHHS Office of Licensing website at: <https://dlbc.utah.gov/home/office-of-licensing/human-services/>.
- 1.11 **Fatality Notification and Reviews.** The Contractor shall comply with the DHHS fatality review process and immediately furnish any information or documents requested by the DHHS Fatality Review Committee upon the death of a Person.
- 1.12 **UPI.** The Contractor shall have a current and active UPI account, comply with UPI requirements, and comply with electronic access and process changes as they develop. The Contractor shall:
- (1) ensure that access to UPI is granted only to Staff who need to know the information in UPI to provide or coordinate DHHS/DSPD services;
 - (2) conduct and document an annual review of all Staff with UPI access to ensure correct and current UPI access is given only to Staff who need it;
 - (3) complete the DHHS/DSPD form "0-9 USTEPS Provider Interface (UPI) Provider Company Designee Access Form" and complete the DHHS/DSPD "0-8 USTEPS Provider Interface (UPI) Individual User Access Form" for at least one Staff;
 - (4) accept or reject the DHHS/DSPD 1056 through UPI within 15 business days of the creation of a new or adjusted 1056;

- (5) if it rejects the 1056, coordinate with the DHHS/DSPD Peer Support Manager to either adjust the 1056, or transition services to a different Contractor;
- (6) use the UPI "Provider Organization" section to create and maintain a Contractor organizational group structure that restricts certain UPI users from seeing a Person's information if they are not required to provide or coordinate DHHS/DSPD services, including:
 - (A) verifying that UPI users are assigned to the appropriate organizational group(s) with their current email and notification preference;
 - (B) removing terminated Staff from the "Provider Organization" within one day of termination, and;
 - (C) removing a Person from the "Provider Organization" within one business day after the Contractor is no longer providing or coordinating services or payments on behalf of the Person;
- (7) notify the DHHS/DSPD USTEPS team (usteps@utah.gov) in writing within one business day after termination of Staff with UPI access.

Article 2

PEER SUPPORT - DHHS SERVICE CODE: WPS

2.1 **Service Requirements.** The Contractor shall:

- (1) meet face-to-face with the Person and their family (if applicable) to talk with the Person and complete a pre-assessment, identified or developed by the Contractor, to understand the Person's needs;
- (2) include questions in the pre-assessment to understand the Person's needs in the following areas:
 - (A) the Person's goals;
 - (B) Medicaid and Social Security benefits;
 - (C) Department of Workforce Services benefits;
 - (D) Vocational Rehabilitation benefits;
 - (E) family relationships;
 - (F) family stressors;
 - (G) natural supports;

- (H) communication and advocacy;
 - (I) medical providers and behavioral health needs and services;
 - (J) skills building needs;
 - (K) housing needs;
 - (L) employment needs; and
 - (M) resources needed to support independent living;
- (3) pair the Person or their family with a Peer Mentor Staff who has similar lived experience to the Person or their family;
 - (4) conduct monthly check-ins with the Person or their family to ensure the paired Peer Mentor Staff is meeting their needs and expectations;
 - (5) ensure the Peer Mentor Staff uses best practices and their lived experience to support the Person with their needs as identified in the Person's assessment;
 - (6) ensure supports recognize and promote the Person's strengths;
 - (7) assist the Person in accessing government, non-profit, and other community resources and benefits;
 - (8) have a written peer support plan that includes the goals the Contractor will assist the Person with, including timeframes for completion;
 - (9) meet face-to-face with the Person and their family (if applicable) to talk with the Person and complete a post-assessment, identified or developed by the Contractor, to assess the effectiveness of WPS;
 - (10) include questions in the post-assessment that address:
 - (A) outcomes from work on the identified needs from the pre-assessment;
 - (B) the Person's satisfaction with the WPS service and their Peer Mentor Staff; and
 - (C) the Person's evaluation of their assessed needs being met;
 - (11) refer to the Person's DHHS/DSPD waiting list worker for updates to their Needs Assessment Questionnaire when necessary; and
 - (12) have the capacity to provide in-person services.

2.2 **Limitations.** The Contractor and its Staff shall NOT:

- (1) loan, give money to, or make purchases for a Person, or allow the Person to loan, give money to, or make purchases for the Contractor and its Staff;
- (2) provide services prior to receiving an approved 1056, nor for services in excess of the approved 1056;
- (3) be a Social Security representative payee for any Person receiving WPS from the Contractor;
- (4) be, or become, the legal guardian of any Person receiving WPS from the Contractor;
- (5) pair a Peer Mentor Staff with a Person if the Peer Mentor Staff is a family member or caregiver of the Person; and
- (6) provide any services that duplicate those available to the Person through the Utah Medicaid State Plan, Vocational Rehabilitation, or State Department of Education.

Article 3
OUTCOMES

3.1 **Outcome.** The intended outcome of this service is the accomplishment of peer support goals outlined in each Person's peer support plan.

3.2 **Measurements.**

- (a) The number of Persons served under WPS.
- (b) The average length of time each Person was served under WPS.
- (c) The percentage of peer support plan goals accomplished.

3.3 **Reporting.** The Contractor shall create and submit a fiscal year annual report via email to dspdcontracts@utah.gov by August 30th, 60 days after each fiscal year end. The fiscal year annual report must include details on the measurements listed above in 3.2.

Article 4
BILLING INFORMATION

4.1 **Billing Process.** WPS is a quarter hour service and must be billed using DHHS service code WPS. The Contractor shall bill through DHHS/DSPD and comply with all DHHS/DSPD billing requirements. The Contractor shall submit billings using the "Electronic 520 Billing" process by entering billing data directly into UPI, or uploading the billing data file directly into UPI in a format approved by the DHHS/DSPD USTEPS team.

4.2 **Billing Documentation.** The Contractor shall maintain billing documentation that demonstrates the service was provided. All billing documentation is subject to audit by DHHS. Billing documentation must include:

- (1) the name of the Person receiving the service;
- (2) the date the service was delivered;
- (3) the start time and end time the service was delivered;
- (4) the name of the Peer Mentor Staff providing the service; and
- (5) a written summary note of the substantive service activities on each service date.