

HOW TO APPLY TO BECOME AN INDIVIDUAL PRACTITIONER QUALIFIED PROVIDER FOR THE DEPARTMENT OF DEVELOPMENTAL SERVICES (DDS)

Qualified providers must meet the standards established in the Department of Developmental Services (DDS) HCBS Waiver Manual. For Providers who will be providing services as an Individual Practitioner the requirements are simpler than agencies that will have employees providing the services. Agencies that wish to become qualified should refer to the link http://www.ct.gov/dds/lib/dds/operations_center/how_to_apply_to_become_a_qualified_provider_agency.pdf for information. **The following information is for Individual Practitioners only.** Providers must have a working email address to receive communication from the Department. It is highly encouraged for all applicants to read the HCBS manual that can be found on the DDS website (<http://www.ct.gov/dds>). Click on the link *For Providers* and then *How To Become A Qualified Provider*. There will be a link for the HCBS Waiver Manual.

To become a qualified provider complete the Application for Qualified Providers, the Assurance Agreement, the Provider Agreement and submit all necessary documents outlined in the Components of a Complete Enrollment Packet below. All documents submitted in the packet must be clearly labeled with item number and description of the item. Documents not properly labeled will be considered unacceptable. The application packet should be sent to the Operations Center where it is reviewed for content and completeness. Any missing or unacceptable items will be detailed in an email to the applicant. Once the applicant has submitted a complete packet and the Department has accepted it, the credentials of the Individual Practitioner will be verified by DDS. After the credentials have been verified, the Practitioner will be reviewed by the appropriate DDS clinical designee. The Operation Center, with the consultation of the clinical designee, will approve or deny qualification. The decision will be deemed final. Individual Practitioners may submit a new application one year from the date of notification of the denial.

PROVIDER REQUIREMENTS

• Clinical Behavioral Consultant - Doctoral, BCBA, or Master's Level Behavior Support Providers

Doctorate and current licensure in psychology (Licensure per CGS Chapter 383), or current certification as a Board Certified Behavioral Analyst (BCBA) or Master's degree in psychology, special education, social work or a related field. Proof of Licensure per CGS Chapter 383b (Licensed Clinical Social Worker), or Licensure per CGS Chapter 383a or 383c (Marriage and Family Therapist or Professional Counselor) as applicable. Two years of experience providing behavioral supports to people with developmental disabilities. Please be aware that it is a requirement of the Department to verify the reference,

• Healthcare Coordination

A Registered Nurse (RN) licensed in the State of Connecticut with at least two years of nursing experience and relevant experience with people served by DDS or individuals with behavioral health needs.

COMPONENTS OF A COMPLETE ENROLLMENT PACKET

The Provider must submit the following information for the packet to be considered complete.

All documents submitted in the enrollment packet must be clearly labeled with item number and description of the item. Documents not properly labeled will be considered unacceptable.

1. Provider Application

http://www.ct.gov/dds/lib/dds/operations_center/application_for_qualified_providers.doc

http://www.ct.gov/dds/lib/dds/operations_center/application_for_qualified_providers.pdf

2. Assurance Agreement

Clinical Behavioral Consultant Assurance Agreement:

http://www.ct.gov/dds/lib/dds/operations_center/indebassuranceagreement.pdf

Healthcare Coordination Assurance Agreement:

http://www.ct.gov/dds/lib/dds/operations_center/hccassuranceagreement.pdf

3. Provider Agreement

http://www.ct.gov/dds/lib/dds/operations_center/providers/provider_agreement.pdf

4. Confidentiality and HIPAA Assurance Agreement

http://www.ct.gov/dds/lib/dds/operations_center/hipaaassuranceagreement.pdf

5. Corporate Documents (if applicable)

- a. A copy of the incorporation papers.
- b. List any other people with ownership share in the corporation.

6. Individual Practitioner Documentation

- a. A letter of intent describing the services the applicant intends to provide, any special population to be served, and geographic areas the applicant intends to serve.
- b. Resume or Curriculum Vita and university diploma. Resume should highlight the individual's entire professional experience and the qualifications that directly impacts their ability to provide the desired service.
- c. A copy of current professional clinical license or certificate (as applicable).
- d. Three current letters of reference that clearly identifies who the reference is for and the name, phone number and address of the individual supplying the reference. At least one reference should be from a clinician familiar with the applicant's professional work and that references evidence of positive outcomes for individuals resulting from interventions designed and implemented or overseen by the applicant.
- e. Submit a certificate of insurance or certificate of insurability demonstrating professional liability insurance of a minimum of \$500,000 per occurrence and \$1.5 million in aggregate. Will provide documentation of such coverage annually and upon request.
- f. Clinical Behavioral Consultant only: A sample of recent work (two samples of functional analyses or assessments and behavioral support plans including methods for increasing adaptive behaviors and decreasing maladaptive or challenging behaviors).

Please remember that being placed on the qualified providers list does not guarantee individuals of the Department will choose to contract with a provider.

For more information contact:

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