C·B·H

a division of DBHIDS

Manual for Review of Provider Personnel Files (MRPPF)

VERSION 3.0

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Community Behavioral Health

MAIN OFFICES 215.413.3100 | MEMBER SERVICES 888.545.2600 | PROVIDER RELATIONS 215.413.7660 | CBHPHILLY.ORG

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1. INTRODUCTION

This Manual is designed to be a source for information about requirements to positions most common in the CBH Network. This includes, but is not limited to, required education, experience, licensure, trainings, clearances, and supervision. The requirements in this document represent the minimum qualifications for a position. The contents of this Manual are not exhaustive. While every attempt has been made to provide the most current material possible, providers are responsible for staying up-to-date regarding ongoing changes. For requirements specific to specialized procurements or agreements, refer to the procurement document. Providers must adhere to all CBH, State, and Federal mandates for requirements, including training and staffing ratios, where required.

1.1. Publication History

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MRPPF 1	February 21, 2014
CBH Credentialing Manual Appendices B and C	April 21, 2004

1.2. Provider Responsibility

Providers are solely responsible for hiring staff that are qualified for their respective positions. It is expected that all staff are qualified, per CBH, State, and Federal Guidelines.

At least once per year the Program Integrity Department collects staff rosters from all in-network providers. Providers are informed of the roster due date by CBH Provider Notice each January. Providers may also be required to submit staff rosters at other times when contacted directly by Program Integrity. It is expected that the rosters will reflect the required information for all positions listed below. Rosters must be accurate at the time of submission and include all staff that may provide services to CBH members. Evidence of claims paid for services provided by omitted individuals may lead to overpayment recovery, and/or sanctions, if the provider fails to list the individual on the submitted roster. CBH will not share the provider's roster information, such as names of staff or other data, with other providers.

Provider personnel files are monitored by the CBH Program Integrity Department. Personnel identified as not meeting the minimum qualifications of the position will not be permitted to work in that position with individuals receiving services through CBH. The provider may not be reimbursed for services provided by unqualified staff.

Providers must maintain credentialing files. These records must provide clear evidence that the employee meets the minimum qualifications of their position. If an employee has more than one position within the agency, the employee file must provide evidence that they meet the qualifications of all positions held. If an employee changes positions within the agency, their personnel file must be updated to reflect this change and include all documentation supporting the requisites of their new position.

CBH may review personnel files of staff that provide direct care, therapeutic care, peer support, or are included within the recovery process. These include, but are not limited to:

- Full-time and part-time personnel
- Fee-for-service and per diem personnel
- Consultants
- Subcontracted employees
- Students/interns
- Independent practitioners

1.3. Formatting

For those positions with job requirements specific to CBH, all requirements are noted in detail. In cases where CBH is on par with the Commonwealth or Federal guidelines, a link to the requirement is provided, and the requirements in the original source material should be followed. Similarly, for training and supervision requirements, original source material should be consulted if there is no specific CBH standard listed.

1.4. Nomenclature

The job titles stated in this manual are associated with minimum requirements that are, in some cases, named differently at the provider level. For instance, the Mental Health Professional (MHP) is frequently known as a therapist. For those positions in which the job title differs from that of this manual, the duties stated in the provider job description will be closely reviewed to ensure that they are properly credentialed for the position in which they are employed. In other instances, there are positions, such as Substance Abuse Counselor, which have a precise meaning from a regulatory standpoint. A job title such as this will be consistent across providers and funding sources.

1.5. Types of Providers

- **Independent/Individual Practitioner:** a clinician (psychiatrist, psychologist, licensed clinical social worker, licensed professional counselor, license marriage and family therapist) who provides behavioral healthcare services and bills under their own Taxpayer Identification Number.
- **Group Practice:** a practice contracted with CBH as a group entity and as such bills as a group entity for the services performed by its CBH-credentialed clinicians.
- **Facility:** an organization, or program within a parent organization, licensed by the state of Pennsylvania to provide behavioral health services. Examples of facilities include, but are not limited to, psychiatric hospitals, partial hospital programs, mental health clinics, residential treatment facilities, substance use disorder clinics, and rehabilitation providers.
- **Federally Qualified Health Center (FQHC):** A community-based health care provider that receives funds from the Health Resources and Service Administration (HRSA). Behavioral health services are provided by a Behavioral Health Consultant (BHC) (psychologist, licensed clinical social worker, licensed professional counselor, or licensed marriage and family therapist

This document applies exclusively to facilities as described above. Independent and group practice providers should refer to the *Credentialing* section of the CBH Provider Manual.

2. DOCUMENTATION REQUIREMENTS

Within each staff file, providers will maintain the following documentation:[1]

- Resume/curriculum vitae or application for employment
- Job Description
  - » Includes job title, requisite skills, education and experience, tasks and responsibilities of the job

[1] *Note: A verified copy is required for all original documents. Verification requires an authorized staff person's signature, date, and the phrase "original seen" legibly written on the copied document. This applies to electronic records as well. The original must be seen before the document is scanned for electronic storage and must be clearly noted as such on the copy that is scanned.*

- Should be signed and dated within one week of the start date, by both employer and employee

- Verification of relevant previous employment
  - Staff files will contain the necessary verifications from prior employers. All required work experience respective to the positions in this Manual must be verified. All employment verifications must verify, at minimum:
    - Information that is congruent with the resume/curriculum vitae or application
    - Position held
    - Dates of employment, including month and year
    - Job responsibilities (this information should be obtained whenever possible, especially when the position title is unclear. If this information cannot be obtained, the reason should be noted)
    - Employment verifications, which must come from a representative from human resources, supervisor/director equivalent, or person of clear authority from the previous employer. This person's name, title, and relationship to the employee must be documented
  - A provider may accept employment verifications in the form of letters if all of the above information is present and the authenticity of the letter is verified.
  - Files for employees contracted through a third party (e.g., a staffing agency) must contain the current employment contract, indicating the effective dates and position(s) for which the person is contracted. This may be in lieu of a performance evaluation.
- Current valid licenses and/or certifications, when applicable (e.g., BSL, Psychologist, etc.)
- Confirmation of minimal educational degree status
  - A transcript must be included if the degree does not indicate the field of study (e.g., "Master of Education" instead of "Master of Education in Counseling Psychology"). Providers are encouraged to make transcript reviews routine. All schools and universities must be accredited by an agency recognized by the United States Department of Education or the Council for Higher Education Accreditation or an equivalent degree from a foreign college or university that has been evaluated by the Association of International Credential Evaluators, Inc. or the National Association of Credential Evaluation Services.
- Evidence of degree verification of all foreign-trained medical staff
  - By an accredited educational verification agency (e.g., Education Commission on Foreign Medical Graduates, World Educational Service, or other National Association of Credential Evaluation Services members); the degree standards must satisfy the credentialing requirements for U.S.-obtained degrees
- Pennsylvania State Criminal History Report and, when applicable, Pennsylvania Child Abuse Clearance and FBI Criminal History Report (See Appendix A)
- Evidence of the completion of mandatory initial and ongoing trainings (See Appendix B)

- National Practitioner Data Bank query
  - Updated every five years for all Licensed Behavioral Specialist Consultants, physicians, physician assistants, and certified nurse practitioners
- Insurance Requirements
  - Requirements for health care practitioners are $1,000,000 per occurrence and $3,000,000 aggregate. Providers/practitioners enrolled in MCARE meet this requirement and are therefore obligated only to demonstrate valid enrollment in MCARE.

3. JOB DESCRIPTIONS/REQUIREMENTS

3.1. Mental Health Services

3.1.1. Medical Director

- Degree in medicine or osteopathy from an accredited school of medicine or osteopathy in the United States of America

OR

- A valid medical degree from a foreign school of medicine
- **PLUS** evidence of successful completion of the Educational Commission for Foreign Medical Graduates (ECFMG) examination

AND

- American Board of Psychiatry and Neurology, Inc. diplomate in general psychiatry and/or child and adolescent psychiatry as indicated
- Current and valid Pennsylvania medical license
- Valid and current Drug Enforcement Administration (DEA) certification
- Three years of administrative experience
- Must be employed by the agency no less than 20 hours per week

3.1.2. Psychiatrist

- Degree in medicine or osteopathy from an accredited school of medicine or osteopathy in the United States of America

OR

- A valid medical degree from a foreign school of medicine
- **PLUS** evidence of successful completion of the Educational Commission for Foreign Medical Graduates (ECFMG) examination.

AND

- Completed psychiatry residency in an Accreditation Council for Graduate Medical Education accredited residency program

- Current and valid Pennsylvania medical license
- Valid and current Drug Enforcement Administration (DEA) certification

3.1.3. Certified Registered Nurse Practitioner (CRNP)

- Current and valid Certified Registered Nurse Practitioner license with the Commonwealth of Pennsylvania Board of Nursing
- Clinical certification in psychiatry/mental health
- Evidence of prescriptive authority. A current and valid Drug Enforcement
- Administration (DEA) certificate only if authorized to prescribe controlled substances (Schedules II-V)
- Current collaborative agreement (approved by the State) with a licensed physician/psychiatrist who serves in a supervisory and consultative capacity for the indicated population and level of care
- Document outlining the scope of services to be provided

3.1.4. Clinical Supervisor

- 55 Pa. Code § 5200

3.1.5. Mental Health Professional

- 55 Pa. Code § 5200

3.1.6. Mental Health Technician (Inpatient)

- Bachelor's degree from an accredited program in an area of human services, which includes, but may not be limited to the following: psychology, sociology, political science, counseling, criminal justice, pastoral counseling, elementary/special education, or family therapy (No experience requirement)

  OR

- High school diploma or General Education Development (GED) equivalent
- **PLUS** a minimum of two years' experience (paid or unpaid) in a human service field (This experience must involve direct contact with the individual receiving services, i.e., coaching, teaching, case management, etc.)

  OR

- Completion of 12 credits in an accredited program in an area of human services or nursing
  - At a minimum, the program must be an Associate's, Bachelor's, medical assistant, LPN, or nursing program. If the MHT is currently enrolled in a school program, employment may be based on an internship or placement through the individual's undergraduate program once 12 credits have been completed. There is no experience requirement.
- **PLUS** Increased supervision provided by a clinical supervisor, or by a peer with at least one year of experience with the provider

- Individual supervision must be conducted for at least one hour per week for full time staff or one half-hour per week for staff working less than 20 hours per week, for at least the first six months. Regular supervision to be decided by the provider must be ongoing beyond this period. In addition, the provider must implement an individualized training plan.

3.1.7. Psychiatric Rehabilitation Specialist Supervisor/Psychiatric Rehabilitation Specialist/Psychiatric Rehabilitation Assistant/Psychiatric Rehabilitation Worker

- 55 Pa. Code § 5230

3.1.8. Intern (Student)

An internship or practicum is a component of a master's or doctoral program that requires a set number of supervised hours as an intern in order to graduate from the program. Once the employee has graduated from the master's or doctoral program and is not enrolled in a program requiring an internship, that person is no longer qualified to be an intern.

The intern's designated supervisor (at the provider) is fully responsible for legal and clinical content of the services delivered and corresponding documentation by the intern. The supervisor must co-sign all documentation completed by an intern. The supervisor must be appropriately credentialed according to the requirements of the services required.

An intern must meet the following minimum qualifications and have the following documentation within their personnel file:

- Must be fully enrolled in an accredited college/university in a degree-conferring program in a field of study consistent with the clinical internship held *and* at a point in their course of study that allows them to be successful in the internship
- Official transcript (In lieu of the official transcript, CBH will accept a signed letter or e-mail from the registrar, the student's academic advisor, or the instructor responsible for supervising the practicum or internship class. The following information must be included: the name of the degree program in which the student is participating, the number of credits obtained at the time of placement, a statement that the student is participating in the field placement as part of the degree program and the anticipated placement dates.)
- Affiliation agreement with the placing school
- Name and phone number of the school liaison
- Provider supervisor must be identified
- A statement concerning the liability insurance which covers the student and lists the amount the agency is insured for (For students who have their own insurance, and/or are covered by their school policy, the details, including the amount, should be in the file.)
- For reference: Provider Notice: Documentation and Training for Interns, August 15, 2017

3.2. Federally Qualified Health Center

3.2.1. Behavioral Health Consultant (BHC)

- Medicaid State Plan Amendment #PA-19-0013

3.3. Intensive Behavioral Health Services

3.3.1. Individual Services

- Staff providing individual services
- Supervision of staff who provide individual services
- 55 Pa. Code §§ 5240.71-72

3.3.2. Group Services

- Staff providing group services
- Supervision of staff who provide group services
- 55 Pa. Code §§ 5240.91-92

3.3.3. ABA Services

Requirements for staff providing ABA services are aligned with the Commonwealth, with the addition of the following:

- A clinical director of an IBHS agency that provides ABA services
  - CBH requires licensure **AND** certification as a BCBA® or BCBA-D®.
- Individuals who provide ABA services through assistant behavior consultation
  - CBH requires certification as a BCaBA®.
- Individuals who provide ABA services through BHT-ABA services
  - CBH requires completion of a 40-hour BACB®-approved course **AND**
  - Determined competent in the implementation of ABA services by successfully completing a performance-based competency assessment, as rated by a BACB® certificant (consistent with 2017 CBH ABA Performance Standards)
- 55 Pa. Code § 5240.81
- ABA Performance Standards

Requirements for supervision of staff providing ABA services are aligned with the Commonwealth with the addition of the following:

- An individual who meets the qualifications of a clinical director shall provide the following supervision to individuals who provide behavior analytic services and behavior consultation—ABA services:

- CBH requires supervision from a person who meets the CBH qualifications of a Clinical Director (Licensure + BCBA® or BCBA-D®) in accordance with the prevailing Supervision standards promulgated by the BACB® for the accumulation of Supervised Experience/Fieldwork hours (consistent with 2017 CBH ABA Performance Standards). See ABA Performance Standards for additional detail.

- **55 Pa. Code § 5240.82**
- **ABA Performance Standards**

3.3.4. Additional IBHS Positions

CBH has developed the following additional positions and requirements to serve IBHS members:

3.3.4.1. Care Coordinator

- Bachelor's degree with major course work in sociology, social work, psychology, gerontology, anthropology, political science, history, criminal justice, theology, counseling, or education
- **PLUS** one year experience (paid or unpaid) in a human service field (This experience must involve direct contact with the individual receiving services, i.e., coaching, teaching, case management, etc.)

  OR

- Be a registered nurse

  OR

- A high school diploma and 12 semester credit hours in sociology, social welfare, psychology, gerontology, or other social science
- **PLUS** two years paid experience in public or private human services with one year in direct client contact.
- **IBHS Performance Standards**

3.3.4.2. Family Peer Specialist

- High school diploma or equivalent
- **PLUS** Lived experience as a parent or primary caregiver who has raised or is raising a child with a mental, emotional, or behavioral health disorder (A "primary caregiver" must have or had the primary authority for making final binding decisions for such child or youth for at least one year.)
- **PLUS** Full or part time, paid, or volunteer experience within the past three years
- Monthly support (2 hours) from the provider in the form of technical assistance/coaching is required for this position.
- **IBHS Performance Standards**

3.4. Alcohol and Other Drug Services

3.4.1. Substance Abuse Assessor

- Bachelor's or master's degree from an accredited college with a major in dependency, psychology, social work, nursing, or other related field, and completed ASAM training
- **PLUS** one year of paid experience in a drug and alcohol treatment program as a counselor

  OR

- High School Diploma or equivalent and completed ASAM training
- **PLUS** a minimum of two years working in a drug and alcohol treatment program as a counselor

Note: *The Substance Abuse Assessor must complete trainings as outlined in Appendix B.*

3.4.2. Substance Abuse Project or Faculty Director/Substance Abuse Clinical Supervisor/Substance Abuse Counselor /Substance Abuse Counselor Assistant

- 28 Pa. Code § 704
- DDAP Licensing Alerts

3.4.3. Substance Abuse Worker

- Meets the requirements of a Mental Health Worker

  OR

- High school diploma or General Education Development (GED) equivalent
- **PLUS** experience (paid or unpaid) in a human service field (This may include personal recovery/lived experience.)

3.5. Case Management

3.5.1. Intensive Case Manager Supervisor/Intensive Case Manager

- 55 Pa. Code § 5221

3.6. Residential Treatment Facility

3.6.1. Director/Child Care Supervisor/Child Care Worker

- 55 Pa. Code § 3800
- DBHIDS/CBH Provider Bulletin 17-13: Changes to Children's Psychiatric Residential Treatment Facility Staff Requirements, October 25, 2017

3.7. Clinical Laboratory Services

3.7.1. Clinical Laboratory Director/Clinical Laboratory Supervisor/Clinical Laboratory Technologist

- 28 Pa. Code § 5

3.8. Peer Services

3.8.1. Certified Peer Specialist Supervisor/Certified Peer Specialist

- Pennsylvania Certification Board

APPENDIX A: CLEARANCES

- Pennsylvania Criminal Record Checks (required of all personnel in all programs)
- Pennsylvania Child Abuse History Clearance

AND

- Federal Bureau of Investigations (FBI) Criminal Background Checks[2]
- **See Keep Kids Safe at PA.gov**

APPENDIX B: TRAININGS

Trainings are entirely within the purview of the provider. CBH does not conduct the trainings referenced in this document and cannot make recommendations regarding specific trainers.

Unless otherwise stated, trainings may be conducted electronically or online (e.g., CE courses, webinars). It is recommended that the agency maintain post-test results for these trainings.

Mandatory trainings should include a pre- and post-test, the results of which should be maintained in the personnel file. For CPR trainings, a skills-based test throughout the course may be used in lieu of a pre- and post-test. Successful completion of the course must be evidenced by a certificate from the training organization or trainer.

Mandatory Trainings: General

All Direct Care Staff

Mandatory Trainings must be completed within three months of hire and every two years thereafter.

- CBH mandatory trainings must cover the following areas: Fire Safety and Prevention, Disaster, Management of Escalation, Infection Control, and Suicide Prevention
- Person First/Cultural Competency
- Restrictive Procedures (child residential and day treatment facilities, inpatient facilities, any other facility or provider using restrictive procedures as an intervention)

Ongoing trainings:

- All staff must complete at least 10 hours of training annually.

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[2] An FBI Criminal Background Check is also required of any person residing in a state other than Pennsylvania or who has resided in a state other than Pennsylvania within the past two years.

- For programs requiring more than 10 hours of ongoing training per year, those program-specific regulations must be followed.

All Clinical Supervisors

Supervisors must receive specialized training in the Evidence-Based Practices adopted by the agency in order to guide their implementation.

All Physicians

The following mandatory trainings must be completed within three months of hire and annually thereafter:

- Fire Safety and Prevention
- Disaster
- Person-First

Administration of Cardiopulmonary Resuscitation (CPR)

1. The provider must establish a written policy with accompanying procedures enabling staff to identify persons in need of physical emergency help. The policy should take into consideration staffing patterns, as well as staff availability within the facility.
2. The policy must meet all licensing, accreditation, and regulatory requirements regarding staff CPR certification and renewal.
3. The policy must include the protocol for the administration of CPR (if the provider is required by licensing or accreditation requirements).
4. The policy must include the protocol for the notification of emergency services.
5. The policy will apply to services on all levels of care that are provided in person. Those providers currently utilizing only telehealth must develop a CPR policy prior to providing services in person.

Providers are not required to submit the policy to CBH but must maintain the policy and make it available upon request.

- **Provider Bulletin 20-28, November 25, 2020**

Mandatory Trainings: Level of Care-Specific

Intensive Behavioral Health Services

- Staff providing Individual, ABA, or Group services
  - » **55 Pa. Code §§ 5240.73, 83, 93**

In addition to participating in all OMHSAS and CBH mandatory trainings, all IBHS in-school staff must be trained as follows:

- All clinical supervisors and therapists must complete the CBITS/Bounce Back training.
- All staff will complete some complement of CBT training.
- All staff will complete a complement of BRIDGE training.

- Mental health professionals receive training and support to consult with teachers around observed classroom interactions and target behaviors and to coach teachers to use class-wide and targeted strategies.
- Those providing BHT services must complete a 40-hour training covering the RBT Task List and biennial refresher with certificates of completion documented by the provider.

Additionally, CBH will provide training for Functional Behavioral Assessment, including the components indicated in these standards.

IBHS providers are expected to complete initial EBP training through DBHIDS's Evidence-Based Practice and Innovation Center (EPIC) and will achieve EBP Designation in CBT, CBITS/Bounce Back, and BRIDGE as a result. IBHS providers must internally sustain training in CBT, CBITS/Bounce Back and BRIDGE. Additionally, all IBHS providers must develop approaches to supervision that ensure fidelity to selected interventions.

- **IBHS Performance Standards**

Alcohol and Other Drug Recovery Services

Substance Abuse Assessor

Required Trainings:

- American Society of Addiction Medicine Patient Placement Criteria (ASAM-PPC)
- Consistent with state staffing regulations for counselors, each assessor will complete at least 25 hours of training annually. In the first year following credentialing as an assessor, 18 of those 25 hours are to be done at the rate of six hours of training in each of the following three areas:
  - Cultural awareness/gender issues
  - Developmental psychology
  - Medical physical/HIV issues
- The balance of training hours in year one, along with any subsequent years' training requirements, will be in the following areas and in any additional as identified by the provider:
  - Drug and alcohol assessment
  - The disease of addiction
  - Treatment approaches
  - Pharmacology
  - Confidentiality
  - Interaction of addiction and mental illness

Substance Abuse Services Worker

Follow the Commonwealth training requirements for Substance Abuse Counselor

Other Training Resources

- Serving Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, and Intersex People (LGBTQI)
  - OMHSAS Bulletin 11-01
  - OMHSAS Bulletin 11-02
- DBHIDS Practice Guidelines, Appendices

Documentation of Trainings

The provider must maintain documentation of all trainings offered and conducted (mandatory and ongoing). This documentation should fully reflect the **content** and **attendance** of the trainings. Electronic documentation may be maintained for electronic/online trainings and webinars. Sign-in sheets and any other documents requiring a signature may be scanned. The original must be seen and noted as such.

Documentation of provider training curricula

A program specific annual training plan should be in place for all CBH contracted programs.

- The provider should conduct an assessment of program-specific training needs.
- A written annual training plan based on the results of the assessment and individuals/families served.
- This should include a calendar of scheduled mandatory and ongoing trainings. The training calendar should reflect training times that are practical for all employees.
- Other training opportunities relevant to the agency should also be available.

Documentation for each training should include:

- Training materials (the full content of the training should be clearly evident):
  - Instructor's name, title, and credentials
  - Number of training hours
  - Training transcript
  - Outline/agenda
  - Materials used during the training, such as PowerPoint, video, etc.
  - Written materials, handouts, or any other materials that were distributed
  - Copies of reading materials alone are not adequate without supporting documentation of how the training was conducted, such as an outline or agenda
- Attendance: a sign-in sheet must be maintained for each training that includes:
  - Training title
  - Date
  - Beginning and end times

- Number of training hours
- Location
- Instructor's name, title, and credentials
- Instructor's signature
- Name and signature of the person at the agency responsible for the training
- Employees' names and signatures

The provider should develop a system for obtaining employee feedback to be utilized at the end of each training. This should measure the effectiveness of the training, instructor, materials, and suggestions for other trainings. Feedback can be used to inform future trainings and develop the training plan.

Documentation for each employee

Individualized documentation for each employee should be maintained. This should be in the employee's personnel file or in a training file that is maintained for each employee.

Documentation of completed trainings for each employee should include:

- An original or verified copy of the training certificate (if available)
- A log of completed mandatory, ongoing, and level of care-specific trainings, including:
  - Training due date
  - Employee's name and department
  - Name of training
  - Description of content
  - Name of instructor
  - Employer's signature
  - Employee's signature
  - Date of the training
  - Number of hours
  - Type of credit earned (CE, etc.)
- Any outside trainings, continuing education, or other professional development should be reflected in the employee's file, including the training certificate

APPENDIX C: WAIVERS

Under exceptional circumstances, a provider may request a waiver for *experiential* or *educational* Staff Credentialing requirements. A waiver is not an endorsement or approval to hire the prospective employee. If a waiver is granted, the decision to hire the individual is solely that of the provider, and all other credentialing requirements must be met. A request for a waiver does not guarantee approval. Waivers must be requested before the hire of the prospective employee and will *not* be made retroactively. Waivers are granted on an individual basis and may not be generalized to include other employees. State and Federal requirements will be met at all times; waiver requests that are in conflict with County, State, or Federal requirements will not be considered.

CBH requirements may be waived. For those positions whose requirements are determined by OMHSAS rather than CBH, an OMHSAS waiver will be required. A request for a letter of support for an OMHSAS waiver may be requested by the same method as a waiver request.

In order to ensure that expectations are met and development is monitored, the provider will be required to put forth an enhanced clinical supervision and training program that meets the developmental needs of the new hire as well as the requirements of the program. The CBH Program Integrity Department may review training and clinical supervision logs for those employees for whom a waiver has been granted. A waiver may be revoked at any time if conditions of the waiver are not met.

The following template should be followed when applying for a waiver or letter of support.

An *individual* request applies to one identified individual and cannot be applied to other staff. An individual request must include the following information:

1. Is this a request for an individual CBH waiver or letter of support for a Commonwealth waiver?
2. Are the requirements of the position based on an RFP award? If so, include a copy of the RFP.
3. Provide an explanation of the reason for the request, including the extenuating circumstances.
4. Provide the position for which the waiver is requested.
5. Provide the requirements for that position (with citations).
6. Provide the current credentials of the applicant (including relevant experience).
7. Provide an individualized training plan (ITP).
8. Provide a Clinical Supervision Plan. This must include the frequency, duration, and credentials of the supervisor(s).
9. Attach a resume or CV.
10. Attach an official transcript for college/university level, high school diploma, or general education development (GED) equivalent.

An *institutional* request applies to one position, across the agency, and allows the provider to hire a predetermined number of staff for a particular position. An institutional request must include the following information:

1. Is this a request for an institutional CBH waiver or letter of support for a Commonwealth waiver?
2. Are the requirements of the position based on an RFP award? If so, include a copy of the RFP.
3. Provide an explanation of the reason for the request, including the extenuating circumstances.
4. Provide the position for which the waiver is requested.
5. Provide the requirements for that position (with citations).
6. Provide a training plan.
7. Provide a Clinical Supervision Plan. This must include the frequency, duration and credentials of the supervisor(s).
8. Provide the number of individuals for whom the waiver will apply.
9. Provide the number of individuals currently working in that position.

Inquiries regarding OMHSAS telehealth specific waivers and other programatic waivers should be directed to **CBH.CredentialingContact@phila.gov** for further instructions.

Required Formatting

The above number format must be used. The number and question must precede each response.

Responses must be on letterhead and be submitted as both Word and PDF documents. The CBH Program Integrity Department will use the Word document to redact identifying information for presentation to the Credentialing Committee.

The Credentialing Committee will make the decision to approve or deny the waiver.

Requests should be submitted to **CBH.CredentialingContact@phila.gov**.

Note: *No more than 20% of a provider's staff may be employed as a result of a waiver.*

APPENDIX D: EXCLUDED INDIVIDUALS

It is the responsibility of the provider to screen all employees and contractors to determine if they have been excluded from participation in federal healthcare programs. This should be done at the time of hire or contracting and thereafter on an ongoing monthly basis.

The provider should develop and maintain auditable documentation of screening efforts, including dates the screenings were performed and the source data checked. Periodic self-audits should also be conducted to determine compliance with this requirement.

CBH providers are required to report to CBH within three business days if they discover that currently employed or contracted staff or individuals applying for employment are on an excluded list.

The following databases should be accessed to determine exclusion status:

- **Medicheck List**: Identifies providers, individuals, and other entities that are precluded from participation in Medical Assistance (MA) Program
- **List of Excluded Individuals/Entities (LEIE)**: database maintained by the Department of Health and Human Services, Office of Inspector General (DHHS/OIG) of all individuals or entities that have been excluded nationwide from participation in any federal health care program (e.g., Medicaid and Medicare)
- **System for Award Management (SAM)**: combines federal procurement systems and the Catalog of Federal Domestic Assistance into one system; consolidation includes the Excluded Parties List System (EPLS)
- **Social Security Death Master File (DMF)**
- **National Plan and Provider Enumeration System (NPPES)**