WEST VIRGINIA BUREAU FOR SOCIAL SERVICES
Socially Necessary Services
UTILIZATION MANAGEMENT GUIDELINES

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CPS Family Support

This category only consists of 2 services: Needs Assessment/Service Plan and Case Management. These two services are to be referred along with Family Support Agency Transportation to a provider when you have a Maltreatment Only Case. This means there was substantiated maltreatment, but there were no Impending Dangers. Deliver to the provider the Referral for Socially Necessary Services and the Initial Assessment. Provider will do services if family cooperates. The provider is not to refer to BSS for services – must refer to community resources.

This can also be used in CPS and YS for backlog cases to determine the need for case closure only with approval from the Social Services Program Manager (formerly known as the Regional Program Managers).

Agency Transportation 110106

Definition:

This code is utilized for providers' mileage encumbered when the following services from the CPS Family Support Category Type has been implemented within the child/family's home and are explicitly documented on the child/family's service plan:

- Case Management
- Family & Needs Assessment/Service Plan

Target Population	Child Protective Services
Program Option	Family Support
Initial Authorization	92 days Unit= 1 mile 1000 units
Maximum Total Authorizations Available	1 – No reauthorizations available
Admission Criteria	● CPS Initial Assessment or a Continuing Safety Evaluation (only used on backlog cases) was completed and maltreatment was substantiated, but no Impending Safety Threats were indicated. ● Family & Needs Assessment indicates that there are unmet needs that could be met through community services. ● BSS Child Welfare Worker and supervisor agree that due to the nature of the complaint, the child can be safely served in their home/community with supportive services.
Continuing Stay Criteria	● Not Applicable
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have substantially been met. ● Case closure/removal of child(ren). ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of goals/objectives on the service plan. ● No outlook for improvement with this level of service. ● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client. ● Case is formally opened with Child Protective Services or Youth Services.
Service Exclusions	● This program option can't be accessed if family is formally open for CPS or YS ongoing case management. ● A case is formally opened for CPS or YS ongoing case management. ● Child(ren) are no longer in the home ● Consumer need is not indicated based on the family/need assessment. ● Regional Program Manager must approve. ● Those receiving Safe at Home services are not eligible for this socially necessary service.

	● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Not applicable
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention. ● Plan for further interventions. ● Any identified unmet concrete or service needs ● Copy of the CPS Initial Assessment or a Continuing Safety Evaluation (only used on backlog cases) ● Copy of the need's assessment/service plan signed by the family. ● Notice to BSS if family accepted or refused services based on provider-generated assessment/service plan. ● Notice to BSS that family will not cooperate and list of attempts. Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month. BSS Standard Form must be used. A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria: • For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. Transportation Providers

must have valid Driver's licenses from employee's state of residence and insurance. All required trainings completed as indicated in the provider agreement.

Case Management Services 110400

Definition: These short-term Case Management services are only applicable to cases when the CPS Initial Assessment was completed and maltreatment was substantiated, but no Impending Safety Threats were indicated. If the BSS Child Welfare Worker determines the case is to be a 'Maltreatment Only' case, they may refer this service in conjunction with the Family & Needs Assessment/Service Plan to a SNS Provider without formally opening the family for BSS Case Management. Referrals from PATH for this service may only be made by the BSS Supervisor after receiving BSS Regional Program Manager approval. Case Management Services may also be utilized for clearing backlog cases with approval from BSS Regional Program Manager. Family Support Case Management services must be provided face to face with families and take place within the home. Case Management Services should be referred in conjunction with the *Family Needs Assessment/Service Plan* service. SNS Provider should make first attempt to contact the referred family within 72 hours of receipt of SNS referral. *Family Needs Assessment/Service Plan* should be completed within 30 days of first successful contact with the referred family. Service documentation should be sent to BSS Supervisor that made the referral to the ASO provider.

Case Management: services are defined as those services which assist child welfare recipients to gain access to needed medical, behavioral health, social, educational and other services. Case Management Services are to be provided at a level of intensity required by the recipient. Services must be provided in settings accessible to the recipient. The individual must be given the option of whether or not to utilize case management services. Within case management there are a number of activities that are recognized as components of case management. These components include linkage/referral, advocacy; family crisis response planning and service plan evaluation or a Continuing Safety Evaluation (only used on backlog cases)

Linkage/Referral: Case managers assure linkage to all internal and external services and supports that have been identified in the recipient's service plan. Provider will link family to agencies other than BSS for services.

Advocacy: Case management advocacy refers to the actions undertaken on behalf of the recipient in order to ensure continuity of services, system flexibility, integrated services, proper utilization of facilities and resources and accessibility to services. Case management advocacy includes assuring that the recipient's legal and human rights are protected.

Family Crisis Response Planning: The case manager must assure that adequate and appropriate crisis response procedures are available to the recipient and identified in the individual service plan.

Service Plan Evaluation: The case manager will continually evaluate the appropriateness of the individual's service plan and make appropriate modifications, establish new linkages or engage in other dispositions as necessary. The case manager will have face-to-face contact with the recipient.

Target Population	Child Protective Services
Program Option	Family Support
Initial Authorization	92 Days Unit =15 min.

	36 units per 92 days
Maximum Total Authorizations Available	1 – No reauthorizations available
Admission Criteria	● CPS Initial Assessment or a Continuing Safety Evaluation (only used on backlog cases) was completed and maltreatment was substantiated, but no Impending Safety Threats were indicated. ● Family & Needs Assessment indicates that there are unmet needs that could be met through community services. ● BSS Child Welfare Worker and supervisor agree that due to the nature of the complaint, the child can be safely served in their home/community with supportive services. ● PATH referral for this service must be made by BSS Regional Program Manager or their proxy with written approval.
Continuing Stay Criteria	● Reauthorizations are not available.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have substantially been met. ● Case closure/removal of child(ren). ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of goals/objectives on the service plan. ● No outlook for improvement with this level of service. ● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client. ● Case is formally opened with Child Protective Services or Youth Services.
Service Exclusions	● This program option can't be accessed if family is formally open for CPS or YS ongoing case management. ● A case is formally opened for CPS or YS ongoing case management. ● Child(ren) are no longer in the home ● Consumer need is not indicated based on the family/need assessment. ● Regional Program Manager must approve. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Not applicable
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name

	● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month ● Copy of the CPS Initial Assessment or a Continuing Safety Evaluation (only used on backlog cases). ● Copy of the service plan signed by the family and given to the BSS worker. ● Notice to BSS if family accepted or refused services based on provider-generated assessment and service plan. Notice to BSS that family will not cooperate and list of attempts. Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month. BSS Standard Form must be used. A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  • Sociology
  • Psychology
  • Counseling
  • Interpersonal Communication
  • Human Services
  • Primary or Secondary Education
  • Criminal Justice
  • Board of Regents with an emphasis in Human Service
  • Gerontology
  • Family and Consumer Science **and**
• Experience providing direct service to families.

• Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
• All providers must have an acceptable CIB through WV Cares with no negative comments **and**
● All required trainings completed as indicated in the provider agreement **and**
• An APS/CPS screen completed with no negative information.
• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Family Needs Assessment/Service Plan 110165

Definition: Face-to-face interview to develop a service plan for a family for which an Initial Assessment (IA) has been completed by the Department of Human Services. In the IA, maltreatment was substantiated, but no Impending Safety Threats were indicated. These services must be provided face to face with families and take place within the home. Identification of short and/or long-term services the family needs is also required to establish a short-term case plan. The administration and scoring of functional skills assessments are included. SNS Provider will evaluate information from the IA and meet with the family. Once the provider has completed these tasks, they will determine what community services the family requires. The needs assessment/service plan must be completed within thirty (30) days of contact with the referred family. If service is to be used for backlog CPS cases the PATH referral must be made by BSS Regional Program Manager or their proxy with written approval. *Family Needs Assessment/Service Plan* should be referred in conjunction with the *Case Management Services*. The SNS Provider should make the first attempt to contact the referred family within 72 hours of receipt of SNS referral. The *Family Needs Assessment/Service Plan* should be completed within 30 days of first successful contact with the referred family. Service documentation should be sent to the BSS Supervisor that made the referral to the ASO provider.

Target Population	Child Protective Services
Program Option	Family Support
Initial Authorization	92 Days Unit= One hour Maximum of four units
Maximum Total Authorizations Available	1 – No reauthorizations available
Admission Criteria	● CPS referred family/child for assessment after completing a CPS IA or a Continuing Safety Evaluation (only used on backlog cases) due to an allegation of abuse and/or neglect. ● Maltreatment was substantiated but no Impending Safety Threats were indicated. ● BSS worker and supervisor agree that due to the nature of the complaint, the child can be safely served in their home/community with supportive services. ● Backlog usage must be approved per BSS Regional Program Manager ● PATH referral for this service must be made by BSS Regional Program Manager or their proxy with written approval.

Continuing Stay Criteria	● Not Applicable
Discharge Criteria (Any element may result in discharge or transfer)	● Family refuses assistance ● Child(ren) are no longer in the home ● A case is formally opened for CPS or YS ongoing case management.
Service Exclusions	● This program option can't be accessed if family is formally open for CPS or YS ongoing case management. ● Must be approved by the Regional Program Manager ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

	● Copy of the CPS Initial Assessment or a Continuing Safety Evaluation (only used on backlog cases). ● Copy of the service plan signed by the family and given to the BSS worker. ● Notice to BSS if family accepted or refused services based on provider-generated assessment and service plan. ● Notice to BSS that family will not cooperate and list of attempts.

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree. Related degrees are:
- Sociology
- Psychology
- Counseling
- Interpersonal Communication
- Human Services
- Primary or Secondary Education
- Criminal Justice
- Board of Regents with an emphasis in Human Service
- Gerontology
- Family and Consumer Science **and**

• Experience providing direct service to families.

• Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**

• All providers must have an acceptable CIB through WV Cares with no negative comments **and**

● All required trainings completed as indicated in the provider agreement **and**

• An APS/CPS screen completed with no negative information.

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

CPS Family Preservation Services

Used when child is still in the home with the parent. The State **does not have custody of the child**. Must be monitored by BSS as either an investigation or open case. Can also be used when child is removed from one parent and placed with another parent pending ongoing abuse/neglect proceedings. Can be used when child is with relative as part of a safety plan (*but BSS has no custody*), as well.

Adult Skill Building 120390

Definition: Direct service in which the identified parent is assisted to increase basic home management skills and social/emotional support networks through hands-on implementation and role modeling. This service provides for the acquisition of skills needed to meet adult role expectations and carry out activities of daily living that directly impact the child's safety in the home. Adult Skill Building is intended to improve the capacity for solving problems and resolving conflicts. Possible Adult Skill Building activities include housekeeping, cleaning, food shopping, meal preparation, laundry, budgeting, utilizing community resources, accessing medical and school records and personal care/hygiene. This service is implemented when there is a lack of skill knowledge not due to a mental health condition and implies that there is not a lack of motivation. SNS Provider will work with client on needs identified on the life skills assessment and/or needs outlined by the BSS service plan.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One hour 35 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● CPS Initial Assessment indicates parents' lack of basic life skills to maintain safety, health and well-being of children in their care are directly related to the child's involvement with Child Protective Services. ● The Case Plan documents the need for the service with specific objectives targeting the identified areas of improvement. ● Service recommended by the BSS Child Welfare Worker, family and BSS Supervisor. ● The SNS Provider should assess the parent to determine which life skills need enhanced. The Casey Life Skills Assessment may be utilized or the SNS provider may use any propriety life skill assessment they have developed. ● Service cannot be met appropriately through other community resources such as adult education classes, personal care or Extension Services. ● Family has explored appropriate social support system members capable of providing service to the identified client.
Continuing Stay Criteria	● BSS Child Welfare Worker, family and BSS supervisor have reviewed the case and determined family/ community placement is still appropriate. ● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● Prior to re-authorizing the Adult Skill Building service, the SNS Provider should reassess the client using a life skills assessment to identify continued deficits. ● BSS expects a detailed update be completed each 90 days on any client progress made in identified deficit areas-this should be included in the monthly summary.

	● Service cannot be met appropriately through other community resources. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the Case Plan and recommend the service continue. ● Family continues to explore social support system members capable of providing service to the identified client. ● The caretaker continues to display behaviors documented on the CPS Initial Assessment that indicate the need for a safety plan.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have substantially been met and a safety plan is no longer required. ● Parent requests discharge. ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of goals/objectives on the service plan. ● No outlook for improvement with this level of service. ● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. These skills should be addressed through the parent's residential habilitation plan. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.

Clinical Exclusions	● Severity of the parent's impairment due to a mental illness or substance use, misuse or substance use disorder problem may preclude provision of service in this level of care. If the parent previously had the skill and lost the ability to perform the task due to the severity of their mental illness/substance use, misuse or substance use disorder, a mental health professional should be consulted to determine if the parent meets medical necessity for Basic Living Skills in the Medicaid Rehabilitation Manual. ● Severity of the parent's impairment due to Intellectual Developmental Delay or developmental delays may preclude provision of this service. A mental health professional should be consulted to evaluate the possibility of short-term Day Treatment Services. ● Severity of parent's impairment due to traumatic brain injury (TBI) may preclude provision of this service. A rehab professional should be consulted to evaluate the possibility of rehabilitation services. ● Continued stay has been noted for cases in which a parent diagnosed with Borderline Intellectual Functioning or Mild Intellectual Developmental Delay is not eligible for other service options. One additional authorization may be granted with documentation of the diagnosis.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the CPS Initial Assessment, Case Plan and current safety plan must be present in the case record. A copy of the client's Casey Life Skills Assessment(s) should be maintained as part of the provider's case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain:

	● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- All providers must have a CIB and an APS/CPS screen completed with no negative information.

Agency Transportation 120106

Definition:
This code is utilized for providers' mileage encumbered when the following services from the Child Protective Services Family Preservation Program Option have been implemented within the child/family's home and are explicitly documented on the child/family's service plan:

- Adult Skill Building
- Child Community Connection
- Court Attendance
- Daily Respite
- Family Time with Coaching
- Functional Family Therapy
- Hourly Respite
- Individualized Parenting
- MDT Attendance
- CPS Safety Services
- Supervised Family Time One
- Supervised Family Time Two
- Scheduled In-Person Observation
- Transportation Time
- Unscheduled In-Person Observation

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

If a provider is unable to deliver the identified service upon traveling to the home, this code may be billed up to three times within the ninety-two (92) day authorization period when the following conditions are met:

- The provider/agency has a policy and procedure regarding the expectations of the families being served. The importance of keeping scheduled appointments, notifying the provider when an appointment needs to be cancelled and the means in which the BSS will be notified if appointments are not kept are reviewed with the client(s).
- The provider/agency has a policy and procedure about notifying the Department regarding youth/family's non-compliance with established scheduled appointments.
- There is documentation of the visit being scheduled within the case record.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit= 1 mile 1000 units
Maximum Total Authorizations Available	3

Admission Criteria	● Documentation of the parent's inability to provide this service and the subsequent reason must be in the client's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Safety plan and/or Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● BSS Child Welfare Worker and supervisor agree that due to the nature of the complaint, the child can be safely served in the home/community with supportive services.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● BSS Child Welfare Worker and Supervisor agree that the child is appropriate to remain in their home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Parent requests discharge. ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of goals/objectives on the service plan. ● No outlook for improvement within this level of service.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● Excludes tolls, parking and waiting time. ● IDD waiver or ICF recipients are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● The only services that may be billed concurrently with this

	service are Transportation Time or Intervention Travel Time.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip, signature of the provider and their title or credentials. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A copy of the BSS 's current safety plan and/or Case Plan must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance. All required trainings completed as indicated in the provider agreement.

Child Community Connection 120915

Definition: The Child Community Connection (CCC) service seeks to engage with and empower families to identify needed supports and facilitate referral and linkage to formal and informal community resources. These resources should be available at no cost or be affordable to the family without additional financial assistance from the WV Bureau for Social Services. These services include, but are not limited to, tutoring, mentoring, counseling or mental health services, self-help and other support groups, educational, arts, or science programs. SNS Providers should make the family aware of resources available to all/most West Virginians such as WV Works, Family Assistance, Children with Serious Emotional Disorder Waiver services, as well as applicable mental health crisis phone numbers. BSS will make available a resource directory for families that the SNS provider will be required to utilize as part of the CCC service. SNS providers of CCC will be expected to make at least 3 attempts to contact Resource for/with the family to make linkage but will not be held to the expectation that the family successfully enrolls/completes a referred resource. Providers will need to document the specific resources identified and what actions they took to facilitate the family's linkage to the resource.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit= One hour 35 units per 92 days
Maximum Total Authorizations Available	1 – No reauthorizations available
Admission Criteria	● This service may not be referred to an SNS Provider prior to the completion of a BSS ongoing assessment in an open CPS case. ● Service recommended by the BSS Child Welfare Worker, family and BSS supervisor. ● BSS will require CCC providers, at the minimum, to relay to families these four resources: WV211, Help4WV, their area Family Resource Network and an applicable Suicide Hotline such as WV 988. ● Family lacks a social support system capable of providing service to the identified client.
Continuing Stay Criteria	● Not Applicable
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child is placed in custody. ● Child's case is closed. ● Family has gained a social support system capable of providing service to the family. ● Family needs can now be met through a community resource.

Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Child Community Connection will not be authorized concurrently with CPS Safety Services. This service is not related to the child's safety in the home. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials SNS Providers of Child Community Connection must document specifically what resources the child/family were linked to during the service provision including the name of the person/entity, service being referred, date and number of attempts made to contact the resource and the outcome of contact. A copy of the BSS Ongoing Assessment must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must

	contain: A list of dates of service and the specific services rendered and/or attempts. ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention. ● Plan for further interventions. ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- All providers must have a CIB and an APS/CPS screen completed with no negative information.

Court Attendance 120755

Definition: Reimbursement for an SNS agency/independent provider **subpoenaed** to testify in a Circuit Court hearing related to an open BSS Child Welfare Case. Provider should be present at the hearing prepared to testify to answer questions, give updates on service participation, and assist in establishing the appropriate plan for the identified child and/or family. The provider must be actively working with the client and submitting monthly summaries to the BSS child welfare worker. For Family Preservation there must be circuit court involvement with a petition filed and/or it is mandated in BSS Policy or WV Statute.

Eligible for any subpoenaed representative per agency for:

- SNS Providers actively providing a treatment or safety service
- Mental Health Professionals providing direct treatment (Example: Therapist)

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One Event
Maximum Total Authorizations Available	As Required
Admission Criteria	● CPS Initial Assessment was completed and indicated a safety plan was needed to maintain the child in the home. ● There is circuit court involvement with a petition filed. ● SNS Provider will submit a copy of the subpoena to Acentra at the time of prior auth request. If multiple SNS staff were subpoenaed for testimony additional units may be authorized. ● If a subpoena is not issued for staff requested at court by DoHS then a court order showing that testimony was given by SNS provider(s) may be accepted in lieu of subpoena.
Continuing Stay Criteria	● Child(ren) remain in the home of a biological parents with services. ● BSS Child Welfare Case remains open.
Discharge Criteria (Any element may result in discharge or transfer)	● Case is closed. ● Child(ren) are placed in the custody of the BSS and are no longer placed with a biological parent.
Service Exclusions	● Provider is not already receiving reimbursement for administrative case management through a Provider Agreement with BSS. ● No individual fee for service code including Medicaid Clinic or Targeted Case Management may be billed concurrently while this code is being utilized. ● Code is not intended to reimburse providers who transport clients attending court hearings, only to be used if the SNS provider is subpoenaed to appear in court. ● The delivery of all ASO Socially Necessary Services must

	occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. The provider must retain documentation showing they attended the Circuit Court hearing. If the County does not issue subpoenas prior to court the SNS provider may submit a copy of the court order showing provider testimony was given to Acentra to obtain authorization for service. The standard 10-day timeline for prior authorization will not apply to the Court Attendance service code. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and presented to the MDT and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

CPS Safety Services 120450

Definition: A grouping of services for families to assist in assuring safety for children by controlling Impending Safety Threats identified during the CPS Initial Assessment. The bundled services must be carefully coordinated with other formal and informal safety services to assure that the safety threat is controlled at the level necessary for the child to remain with their caregivers. The mix of these services and other services provided is based upon the safety plan completed by the BSS Child Welfare Worker. Eighty percent of the services must occur in the family's home or community. The remaining twenty percent of the activities may be administrative functions/activities that directly relate to the control of the Impending Safety Threats. These activities correspond to the services identified in the bundle and target controlling the behavior and conditions that immediately threaten the child. This service must commence within 24 hours of referral. Community refers to the places that are natural locations where the family would be together, not office settings. Provider must have contact with the BSS Child Welfare Worker, (telephone, mail or face-to-face) at least once each week to discuss and determine whether identified impending Safety Threats are being controlled by the safety services. Safety Services cannot be implemented while a Temporary Protection Plan is in place. The BSS Child Welfare Worker will be required to provide SNS Provider with the Initial Assessment upon completion and approval by BSS Supervisor.

Scheduled In-Person Observation: "Eyes on" in-person oversight of the child or family which provides an active, ongoing assessment of stressors which affect safety and may result in necessary action. Assessing for safety is the responsibility of the BSS Child Welfare Worker but the ASO Safety Services Provider may need to notify the BSS Child Welfare Worker, the WV Centralized Intake for Abuse and Neglect or law enforcement of any change in circumstance as outlined on the BSS Safety Plan. ***If the child(ren) are believed to be in Imminent Danger as defined in WV Code §49-1-201(see definition below) the provider, in consultation with their supervisor, will immediately contact*** **WV Centralized Intake for Abuse and Neglect (within 24 hours of -1-800-352-6513)** ***to initiate a report and shall call law enforcement. If safe, the provider shall remain in the home until either law enforcement or child protective services arrives to make a safety determination for the care and custody of the child.*** The emphasis here is that the provision of Scheduled In-Person Observation will assist in controlling one or more of the identified impending Safety Threats in the CPS Initial Assessment. The identified child or family requiring service must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety. The service controls for conditions created by a parent's reaction to stress, parents being inconsistent about caring for children, parents being out of control, parents reacting impulsively and parents having detrimental expectations of children. This service **cannot** be used for spot checks, surprise visits, safety checks or unannounced visits.

Unscheduled In-Person Observation: "Eyes on" in-person oversight required to ensure safety for the identified client, family and/or community. The identified child or family requiring observation must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety. The BSS Safety Plan will have been completed and sent to the SNS provider outlining specifically what safety concerns the SNS Provider should be monitoring. The BSS Child Welfare Worker will provide the SNS Provider with the appropriate staff contact information/hotlines and protocols to follow if the SNS provider finds the family in violation of the current safety plan, case plan, protective order, court order, etc. The identified client/family should have been educated by the BSS Child Welfare Worker during the safety planning process about BSS expectations for maintaining safety in the household. The ASO Safety Services Provider may need to notify BSS Child Welfare Worker, the WV Centralized Intake for Abuse and Neglect or law enforcement of any change in circumstance as outlined on the BSS Safety Plan. ***If the child(ren) are believed to be in Imminent Danger WV*** Code ***49-1-201 (See definition below) the provider, in consultation with their supervisor, will immediately contact*** **WV Centralized Intake for Abuse and**

Neglect (within 24 hours -1-800-352-6513) ***to initiate a report and shall call law enforcement. If safe, the provider shall remain in the home until either law enforcement or child protective services arrives to make a safety determination for the care and custody of the child.*** This service is intended for unannounced safety checks as outlined in the BSS Safety Plan. The family may not be penalized in any way for not being at home/available when provider arrives for unscheduled observation.

Basic Parenting Skills: Direct face-to-face service to assist caregivers in performing basic parental duties or responsibilities which caregiver has been unable or unwilling to perform. Basic parental duties and responsibilities include such activities as feeding, bathing, basic medical care, basic social/emotional attention and supervision. The lack of these basic parenting skills must affect the child's safety. The services must have an immediate effect on controlling the impending Safety Threats identified in the CPS Initial Assessment. This service is different than parenting education in that it is strictly for controlling Impending Safety Threats identified on the BSS Safety Plan or concerns observed by the ASO Provider during Scheduled or Unscheduled Observation of the family.
Only the areas directly relating to safety are to be addressed.

Navigation and Support: Provision of basic community resource referrals and linkage. SNS Provider will provide the family with area resource directories to address family needs as identified during the CPS Initial Assessment. The service must have an immediate impact on controlling the impending Safety Threats that affect the child's safety. Once formal linkage to community support systems or access to supportive services, such as therapy or counseling, has been established, this service ends. The SNS Provider may also use this service to provide the family with an overview of the Child Welfare Process in West Virginia. The provider may educate the family on the roles and expectations of all those involved with the child welfare case and help keep the family informed of current BSS staff and contact information as well as next steps in the case management process. The ASO Provider should empower the family to begin the change process as the case transitions to BSS Case Management. The ASO Provider should encourage the family to become active participants in their BSS safety/case plan through community resource linkage and referral activities.

Urgent Adult Skill Building: To provide fast and efficient education to the caregivers on topics that are impacting the child's ability to safely remain in the home. Possible Adult Skill Building activities include housekeeping, cleaning, food shopping, meal preparation, laundry, budgeting, accessing medical and school records and personal care/hygiene. The emphasis of this service remains controlling Impending Safety Threats identified in the BSS Safety Plan.

Urgent Home Sanitation: The ASO Provider will assist caregivers to resolve unsanitary/unsafe conditions within the home as outlined in the BSS Safety Plan. The SNS Provider may demonstrate appropriate cleaning and child proofing techniques for the family in order to create a physically safe residence. The focus of the home sanitation should be related to controlling impending Safety Threats identified in the CPS Initial Assessment.

Imminent Danger

An emergency situation in which the welfare or the life of the child is threatened. Such emergency exists when there is reasonable cause to believe that any child in the home is or has been sexually abused or sexually exploited or reasonable cause to believe that the following conditions threaten the health or life of any child in the home:

1) Non-accidental trauma inflicted by a parent, guardian, sibling or a babysitter or other caretaker;

2) A combination of physical and other signs indicating a pattern of

abuse which may be medically diagnosed as battered child syndrome;
3) Nutritional deprivation;
4) Abandonment by the parent, guardian or custodian;
5) Inadequate treatment of serious illness or disease;
6) Substantial emotional injury inflicted by a parent, guardian or custodian; or
7) Sale or attempted sale of the child by the parent, guardian or custodian; or
8) The parent, guardian or custodian's abuse of alcohol, or drugs or other controlled substance as defined in W. Va. Code §60A-1-101, has impaired their parenting skills to a degree as to pose an imminent risk to a child's health or safety. See W. Va. Code §49-1-201.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 Days Unit = One hour 200 hours direct contact
Maximum Total Authorizations Available	1 – any additional authorizations will require Regional BSS approval
Admission Criteria	● BSS Child Welfare Worker identifies **no** Immediate Safety Threats but does identify Impending Safety Threats during the CPS Initial Assessment. ● A BSS safety plan has been developed based on the Impending Safety Threats identified in the CPS Initial Assessment. ● SNS Provider will be required to provide Acentra Health a copy of the completed, signed BSS Safety Plan prior to the authorization of Safety Service Bundle. ● Service cannot be safely provided through a community resource or the family support system.
Continuing Stay Criteria	● None
Discharge Criteria (Any element may result in discharge or transfer)	● BSS Child Welfare Worker, family and BSS supervisor have reviewed safety plan and agree that the child can remain safely in the home without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system. ● Service is not able to maintain safety in home environment resulting in removal of the child from the home.
Service Exclusions	● ASO Safety Services may NOT be used if BSS Child Welfare Worker has identified Immediate Safety Threats. ● ASO Safety Services may NOT be used during a

	Temporary Protection Plan. ● The only Socially Necessary codes that may be authorized in conjunction with Safety Services are Hourly Respite, and Transportation (public, private, or agency), for the first 30 days until BSS Child Welfare Worker, family and BSS supervisor meet to review progress. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● CPS Safety Services may not be referred while a BSS Protection Plan is in place. ● If a crisis is behavioral in nature for a child, the family should access 844-HELP-4WV (Children's Mobile Crisis Response). ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issue(s) precludes provision of services in this level of care. ● Need for the service is not solely to clinically monitor for homicidal and/or suicidal behaviors.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials ● A copy of the CPS Initial Assessment and the current safety plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the

	referring worker. BSS Standard Form must be used. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

For Navigation and Support

• Staff providing this service at a minimum must have a BSW with social work licensure or related four-year degree with social work licensure. Related degrees are:

- o Sociology
- o Psychology
- o Counseling
- o Interpersonal Communication
- o Human Services o Primary or Secondary Education
- o Criminal Justice
- o Board of Regents with an emphasis in Human Service
- o Gerontology
- o Family and Consumer Science or

• A master's degree in social work, counseling or psychology with licensure and

• Experience providing direct service to families.

• All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information.

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

- All required trainings completed as indicated in the provider agreement.

If you are an agency with LBHC, childcare or child-placing license, you can have 4-year degree and be supervised, but private providers must be licensed.

For Scheduled In-Person Observation, Unscheduled In-Person Observation, Basic Parenting Skills, Urgent Adult Skills Building, Urgent Home Sanitation:

• Paraprofessional staff with a High School Diploma/GED Certificate **and**

• Experience providing direct service to families **and**

• Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist or counseling license who has two years post college experience providing direct service to families **and**

• All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information.

- All required trainings completed as indicated in the provider agreement **and**

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Daily Respite 120430

Definition: Planned break for primary caretakers who are in challenging situations in which a trained provider, friend or family member assumes care giving and supervision of a child(ren) for a brief period of time. Service may be provided in or out of the natural home on a daily basis. Service may also be utilized if the caretaker has a scheduled inpatient medical procedure.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One day 3 units per 92 days
Maximum Total Authorizations Available	14 units Maximum within 12-month period
Admission Criteria	● Parent(s) are in need of a break from supervision and care giving responsibilities.
Continuing Stay Criteria	● Service continues to be needed to provide support to maintain client's placement as identified on the service plan. ● Case Plan identifies the current plan is for the child to remain in the identified foster home placement if possible.
Discharge Criteria (Any element may result in discharge or transfer)	● Child's case is closed.
Service Exclusions	● No other fee-for-service Socially Necessary Service may be billed concurrently with this service ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Functional Family Therapy 120800

FFT is a family intervention program for dysfunctional youth with disruptive, externalizing problems. Target populations range from at-risk pre-adolescents to youth with moderate to severe problems such as conduct disorder, violent acting-out, and substance use, misuse or substance use disorder. While FFT targets youth aged 11-18, younger siblings of referred adolescents often become part of the intervention process.

FFT Program goals are to eliminate the youth's referral problems, improve prosocial behaviors and improve family and individual skills. The program is broken down into five phases of intervention:

- Engagement- Maximize family initial expectation of positive change;
- Motivation- Create a motivational context for long-term change;
- Relational Assessment- Complete relational (functional) assessment of family relationships to provide foundation for changing behaviors in subsequent phases;
- Behavior Change- Facilitate individual and interactive/ relational change;
- Generalizations- Maintain individual and family change and facilitate change in multiple systems.

Outpatient Clinics or In home setting permitted	Unit= One Day Authorization 120 units per 120 days
Admission Criteria:	● Service must be referred by BSS ● Child must remain in their home ● Children in BSS custody who have returned home for a trial period ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement.
Continued Stay:	● Child must have remained in their home ● Children in BSS custody have returned home for a trial period ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement.
Discharge Criteria	● Goals have been accomplished ● Family/youth is not participating ● No progress has been demonstrated ● Youth enters BSS Custody ● Youth turns 19 years of age
Service Exclusions:	● Behavioral or mental health therapy

	● Any transportation codes related to service provision ● Other parenting education programs
Clinical Exclusions:	● In active withdrawal ● In acute psychiatric care
Documentation:	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed within 15 days for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the current Safety Plan and the CPS Initial Assessment and/or Ongoing Assessment must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. BSS Standard Form must be used. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the

	client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Prerequisite/Minimum Provider Qualifications:

- Qualifications can vary for therapists, but to become an onsite Program Supervisor a minimum of master's level education is required. A formal certification must be present in provider/employee records.
- Trauma-informed care training.

*Agencies must sign an affiliate agreement indicating they will adhere to the Essential Requirements to meet model fidelity.

Healthy Families America 120810

HEALTHY FAMILIES AMERICA (HFA) is a voluntary evidence-based home visiting program serving pregnant women and families of infants and young children. HFA is a prevention program dedicated to supporting families in their quest to be the best parents they can be. Program services are designed to strengthen families during the critical first years of a child's life. The child's age at HFA enrollment is prenatal to age 24 months as services are focused primarily on prevention through education and support in the homes of new parents. All HFA Program criteria are based on proven best practice standards. Intensity of services is based on each family's needs, beginning weekly and moving gradually to quarterly home visits as families become more self-sufficient. The Bureau of Social Services contracts with community providers who implement the program in their local communities.

The goals of Healthy Families America (HFA) are:

•Build and sustain community partnerships to systematically engage overburdened families in home visiting services prenatally or at birth

•Cultivate and strengthen nurturing parent-child relationships

•Promote healthy childhood growth and development

•Enhance family functioning by reducing risk and building protective factors

HFA is theoretically rooted in the belief that early, nurturing relationships are the foundation for life-long, healthy development. Building upon attachment, bio-ecological systems theories, and the tenets of trauma-informed care, interactions between direct service providers and families are relationship-based; designed to promote positive parent-child relationships and healthy attachment; services are strengths-based; family-centered; culturally sensitive; and reflective.

The HFA model is based upon 12 critical elements. These are:

1. Initiate services prenatally or at birth and can continue until the child is five years of age.
2. Use standardized screening and assessments such as the Family Resilience and Opportunities for Growth to systematically identify and assess families most in need.
3. Offer services voluntarily and use positive, persistent outreach efforts to build family trust.
4. Offer services intensely and over the long-term, with well-defined criteria and a process for increasing or decreasing frequency of service.
5. Consider the culture of families in the services offered such that staff understands, acknowledges, and respects cultural differences of families.
6. Focus on supporting the parent(s) as well as the child through services that cultivate the growth of nurturing, responsive parent-child relationships and promote healthy childhood growth and development.
7. Link all families to a medical provider to ensure optimal health and development and other services to meet their assessed needs.
8. Ensure Family Support Specialists have an adequate time to spend with each family to meet their needs and to plan for future activities.
9. Select service providers based on:
    a. Their personal characteristics
    b. Their willingness to work in, or their experience working with, culturally diverse communities

c. Their knowledge and skills to do the job

10. Provide intensive training to service providers specific to their role to understand the essential components of family assessment, home visiting, and supervision.
11. Ensure service providers have a framework, based on education or experience, for handling the variety of experiences they may encounter when working with at-risk families
12. Give service providers ongoing, effective supervision so they can develop realistic and effective plans to empower families.

Only in- home setting where the child is/will be living is permitted. Any alternate locations must be approved in writing.	
Initial Authorization	365 days Unit= One day 365 units per 365 days
Admission Criteria:	● Parent must be pregnant or parenting a newborn, children can be enrolled up to 24 months and continue to age 5. ● Intake assessments must occur, and program accepted by the family prior to the target child turning 24 months ● Service must be referred by BSS caseworker ● Child must remain in their home ● Children in BSS physical custody who have returned home for a trial visit ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement. ● May also be used for children in foster care who are pregnant and/or parenting.
Continued Stay:	● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● BSS worker, family and BSS supervisor recommend the service continue and agree that placement in the home is still appropriate. ● Service cannot be met appropriately through other community resources.
Discharge Criteria	● Goals have been accomplished ● Family/child is not participating

	● No progress has been demonstrated ● Child enters BSS Legal Custody
Service Exclusions:	Targeted Case Management and other parenting education curricula.
Clinical Exclusions:	Parent is in active hospital or residential based treatment without the child(ren).
Documentation:	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed within 15 days for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the current Safety Plan and the CPS Initial Assessment and/or Ongoing Assessment must be present in the case record. WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart and one sent to the referring worker. BSS Standard Form must be used. This monthly progress report must contain:

	● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Prerequisites/minimum qualifications:

Agencies must sign an affiliate agreement indicating they will adhere to the Essential Requirements to meet model fidelity.

Home Study 120150

Definition: A home study is an assessment of an individual who has been identified as a potential resource/foster/adoptive parent for a child who is in the custody of the department. A total assessment includes, but is not limited to, the home (health standards), personal history, education/preparation, family income, documentation of identity/status, employment status, health, police/criminal record check and references, coping skills, communication skills, attitude, support system, use of community resources, and emotional stability.

For Kinship/Relative Home Studies the assessment consists of three units and includes at a minimum:
Criminal Background Checks
Child Abuse/Neglect Checks
Safety of the Home's Environment
Ability to Provide Protection
Child's Relationship with potential relative
Physical Health
Emotional Stability
Ability and willingness to support placement goals
Compliance with car seat safety
Ability and willingness to participate with MDT, Assessment and Case Planning
Understanding of and willingness to comply with BSS 's Discipline Policy
References
Recommendation

The following areas may also be added or requested at the time of referral to a Kinship/Relative Home Study as directed by the BSS Child Welfare Worker and consists of four units:
Personal history
Education/preparation
Family income
Documentation of identity/status
Employment status
Support system
Use of community resources

The BSS will stipulate the extent of the information required for each Home Study. This must be completed by a licensed provider recognized by the WVBSS.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	30-92 days Maximum of 4 Units = One Regular Study Maximum of 3 Units= One Relative Study
Maximum Total Authorizations Available	1 per home being studied
Admission Criteria	● Client desires to become a resource/foster/adoptive parent.

	● Client has completed and submitted a Resource/Foster/Adoptive Parent Inquiry Form or has contacted the local county BSS office. ● Department recommends an assessment.
Continuing Stay Criteria	● Not Applicable
Discharge Criteria (Any element may result in discharge or transfer)	● Evaluation is completed. ● Client has been approved or rejected as a prospective placement.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If the study is for a group of siblings, bill service to one child and specify in report the entire sibling group.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	A completed home study adhering to BSS policy as outlined in foster care policy. There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the referral for socially necessary services must be present in the case record.

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree with social work licensure. Related degrees are:

- Sociology
- Psychology
- Counseling
- Interpersonal Communication
- Human Services
- Education
- Criminal Justice
- Board of Regents with an emphasis in Human Service
- Gerontology
- Family and Consumer Science **or**

• A master's degree in social work, counseling or psychology with licensure **and**
• Experience providing direct service to families
• All providers must have an acceptable CIB through WV Cares with no negative comments **and**
• An APS/CPS screen completed with no negative information **and**
● All required trainings completed as indicated in the provider agreement **and**
• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Contracted Home Study Guidelines for Partial Payments of a total Home Study:

1 Unit Activities include:

- ❖ Contact with family/individual either by telephone, mail, or in-person; or
- ❖ Some initial background check on family/individual completed; and
- ❖ Family/individual withdraws application or agency withdraws request for study; and
- ❖ Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor.

2 Units Activities include:

- ❖ Contact with the family/individual through an interview for the study; and
- ❖ First home safety check; or
- ❖ Contact with references by mail, telephone, or in-person; and
- ❖ Family/individual withdraws application or agency withdraws request for study or the family/individual's study has been denied; and
- ❖ Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor; and
- ❖ Contractor will need to submit a copy of the denial letter to the Homefinding Supervisor, when necessary.

3 Units Activities include:

- ❖ More than one in-person contact with the family/individual through an interview for the study; and
- ❖ Home safety checks completed; and
- ❖ Reference checks completed; and
- ❖ Family/individual withdraws application or agency withdraws request for study; and
- ❖ Contractor provides a partial written home study report; and/or
- ❖ Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor; and
- ❖ Contractor will need to submit a copy of the denial letter to the Homefinding Supervisor, when necessary.

4 Units Activities:

- ❖ All interviews completed with family/individual for the study; and

- ❖ Home safety checks completed; and
- ❖ Reference checks completed; and
- ❖ Home Study report completed and submitted to Homefinding Supervisor (including both approved and denied home studies); and
- ❖ Contractor will need to submit a copy of the denial letter to the Homefinding Supervisor, if the home was denied.

Contracted Kinship/Relative Home Study Guidelines for Partial Payments

1 Unit Activities include:

- ❖ Contact with family/individual either by telephone, mail, or in-person; or
- ❖ Some initial background check on family/individual completed; and
- ❖ Family/individual withdraws application or agency withdraws request for study; and
- ❖ Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor.

2 Units Activities include:

- ❖ Contact with family/individual in-person; and
- ❖ Some initial background check on family/individual completed; and
- ❖ Home safety checks completed.
- ❖ Assessment completed of the designated components/areas.
- ❖ Family/individual withdraws application or agency withdraws request for study; and
- ❖ Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor.

3 Units Activities include:

- ❖ Contact with family/individual in-person; and
- ❖ Criminal background check on family/individual completed; and
- ❖ Home safety checks completed; and
- ❖ Assessment completed of all ~~seven~~ designated components/areas.
- ❖ Family/individual withdraws application or agency withdraws request for study; and
- ❖ Contractor would need to submit a complete report to the Homefinding Supervisor.

Hourly Respite 120530

Definition: Planned or unplanned break for primary caretakers who are in challenging situations in which a trained provider assumes care giving and supervision of a child(ren) for a brief period of time. Service may be provided in or out of the natural home or on an hourly/daily basis. Temporary relief from parenting responsibilities is provided to avoid an abuse, neglect or abandonment situation or a placement disruption.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One hour 30 Units per 92 days Maximum 120 units (5 days)
Maximum Total Authorizations Available	3
Admission Criteria	● BSS Child Welfare Worker, family and BSS supervisor agree that the children can be maintained safely in the home. ● BSS Child Welfare Worker, family and BSS supervisor recommend this service. ● Family has explored appropriate social support system members capable of providing service to the identified client. ● A registered SNS provider must be utilized for Hourly Respite unless exceptional circumstances are documented.
Continuing Stay Criteria	● Parents/caretakers continue to display behaviors that were documented on the CPS Initial Assessment that indicated the need for a safety plan. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Family has explored appropriate social support system members capable of providing service to the identified client. ● Service continues to be needed to provide support to maintain client's placement as identified on the service plan. ● Case plan identifies the current plan is for the child to remain in the identified home.
Discharge Criteria (Any element may result in discharge or transfer)	● Parent requests discharge. ● Another service is warranted by change in the child's condition. ● Service is not able to maintain safety in home environment, resulting in a change of placement. ● No outlook for improvement with this level of service. ● Service can now be provided through a community resource. ● Family has developed a social support system capable of

	providing the service to the identified client.
Service Exclusions	● Excludes placement at Emergency Shelters for children not in custody. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● The child can effectively and safely be treated at a lower level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● If a safety plan exists for this case, a copy of the current safety plan must be present in the case record.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Individualized Parenting 120300

Definition: Direct face-to-face services to improve parental competence and knowledge of:

- Discipline
- Appropriate supervision
- Encouragement of child/adolescent care, age-appropriate development
- Realistic expectations and standards of child/adolescent behavior of identified child

This service should be used to correct specific deficits in parenting. This service is provided in a one-on-one setting and is highly individualized to meet the parents' needs. Specific examples include individualized behavior management techniques or understanding a child's specific mental or physical health condition. As the Bureau for Social Services moves toward quality outcome measures, providers are **required** as of 7/1/2026 to use an evidence-based parenting curriculum as applicable for each client. Some examples include Active Parenting, Positive Parenting, and Common Sense Parenting. Contact bsssnsprogram@wv.gov for the full list of WV BSS approved evidence-based parenting curriculums.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One hour 39 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	1. Parent must demonstrate one or more of the following: a. Inappropriate expectations of the child/adolescent b. Inability to be empathetically aware of child/adolescent needs c. Difficulty assuming role of parent d. Lack of knowledge in feeding, bathing, basic medical treatment, and basic supervision –**and** - 2. Case Plan documents a need for the service with specific goals and objectives identifying areas for improvement. 3. Service recommended by the BSS worker, family and BSS Supervisor. 4. Service cannot be met through other community resources (as in disability-specific support groups such as CHADD for those with ADHD) or family's support system. 5. CPS Initial Assessment was completed and indicated a safety plan was needed to maintain the child in the home.

Continuing Stay Criteria	● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● BSS worker, family and BSS supervisor recommend the service continue and agree that placement in the home is still appropriate. ● Service cannot be met appropriately through other community resources. ● The caretaker continues to display behaviors documented on the CPS Initial Assessment that indicated the need for a safety plan.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Parent requests discharge. ● Another service is warranted by change in the family's condition. ● No outlook for improvement within this level of service.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If more than one parent in the same household is involved with this intervention, bill the service through one parent. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. These skills should be addressed in the residential habilitation plan. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● Parent's individual mental health impairments and/or substance use, misuse or substance use disorder preclude provision of service in this level of care. ● Lack of social support systems indicates that a more intensive service is needed.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time

	● Signature of the provider and their title or credentials A copy of the CPS Initial Assessment, Case Plan and current safety plan must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology
  - Psychology
  - Counseling
  - Interpersonal Communication
  - Human Services
  - Primary or Secondary Education
  - Criminal Justice
  - Board of Regents with an emphasis in Human Service
  - Gerontology
  - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and a**n APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement **and**
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.
- Providers are advised that submission of verification regarding evidence-based curriculum training or certification to the Community Partnership Unit is required to continue providing Individuated Parenting services and is a prerequisite for reimbursement.

Intervention Travel Time 120105

Definition: This code is for reimbursing providers who are traveling to a destination to complete a home visit in which a Socially Necessary Service is being provided when the time to reach the destination from the providers business **exceeds one hour one way**. Mileage encumbered when transporting is billed separately. The service has been documented in the BSS 's child/family's service plan and all other natural supports/options have been explored.

Service Codes:

- Adult Skill Building
- Child Community Connection
- Court Attendance
- Daily Respite
- Hourly Respite
- Individualized Parenting
- MDT Attendance
- CPS Safety Services
- Supervised Family Time One
- Supervised Family Time Two
- Scheduled In-Person Observation
- Unscheduled In-Person Observation

This service covers actual time traveled using the shortest and/or quickest practical route to the traveler's destination. The billable service begins after the provider leaves their identified place of business and ends when provider reaches the family's home or identified location. If the provider is doing concurrent home visits, the time traveling from one home to the next must exceed one hour one way to be billed. It cannot replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties. Maximum of 16 units per day are allowable.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit= 15 min 416 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● Provider has been referred one of the designated services listed above
Continuing Stay Criteria	● Service continues to be recommended by the MDT ● Progress towards goals noted on BSS case plan has been documented
Discharge Criteria (Any element may result in discharge or transfer)	● No progress has been made ● Case is closed ● Family refuses in-home services ● Goals on the BSS case plan have been substantially met
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized.

	● Excludes tolls and parking ● Does not replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties. ● IDD waiver or ICF recipients are not eligible for this service ● If multiple people are on one transport, they must be from the same case. The trip will be billed on the case member that is farthest distance from the identified destination. If a protection order is in place between members within the case, they must be transported separately. ● The delivery of all Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS 's Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance. All required trainings completed as indicated in the provider agreement.

Lodging 120120

Definition: Hotel or motel accommodation required for biological family members/guardians when transportation is authorized in extenuating circumstances. Lodging does not cover other convenience/entertainment services that may be available through the hotel/motel. Reimbursement will be for the least expensive single room rate available up to the current WV State rate. Charges incurred due to the failure of the transportation provider to notify the lodging facility of cancellation will be considered a personal expense of the provider.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	Unit = One night
Maximum Total Authorizations Available	As required
Admission Criteria	● Child must have a case in circuit court where rights of one parent are at issue. ● Extenuating circumstances exist related to distance, time and frequency. ● Service must be noted on the service plan. ● Goals/objectives must be present to address how utilization of this service will occur in the future. ● All transportation reimbursement for biological parents/guardians/foster/kinship placements are at the discretion of the BSS Child Welfare Worker.
Continuing Stay Criteria	● Progress toward goals/objectives has been made, but not satisfactorily achieved. ● Extenuating circumstances continue to exist related to distance, time and frequency. ● Permanency plan is still appropriate to receive this service.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals/objectives have been satisfactorily achieved. ● Child's case has been closed. ● Child has been adopted or reunified with family.
Service Exclusions	● Lodging referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for lodging reimbursement through this code. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the visitation plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of hotel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

MDT Attendance 120455

Definition: Reimbursement for an agency/independent provider participating in the individual Multi-Disciplinary Team Meeting to present written reports of progress, answer questions and assist in establishing the appropriate plan for the identified child and/or family. The Provider must be actively working with the client and submitting monthly summaries to the BSS worker. For Family Preservation there **must be** court involvement with a petition filed and/or it is mandated in BSS Policy or WV Statute.

Eligible for one representative per agency for:

- ASO Providers actively providing a treatment or safety service.
- Mental Health Professionals providing direct treatment (Example: Therapist)

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One Meeting Three units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● CPS Initial Assessment was completed and indicated a safety plan was needed to maintain the child in the home. ● There is circuit court involvement with a petition filed.
Continuing Stay Criteria	● Child(ren) remain in the home of biological parents with services. ● Case remains open
Discharge Criteria (Any element may result in discharge or transfer)	● Case is closed. ● Child(ren) are placed in the custody of BSS and are no longer placed with a biological parent.

Service Exclusions	● Provider is not already receiving reimbursement for administrative case management through a Provider agreement with BSS.
	● No individual fee for service code including Medicaid Clinic or Targeted Case Management may be billed concurrently while this code is being utilized.
	  ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.
	  ● Those receiving Safe at Home services are not eligible for this socially necessary service.

Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that

	includes: ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. The provider must be able to provide documentation showing they attended the MDT. This could be the sign-in sheet or any other type of documentation that would provide proof of their presence at the meeting. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and presented to the MDT and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Meals 120125

Definition: Food for one identified transportation provider. Meal reimbursement is intended for biological family members/guardians when transportation is authorized in extenuating circumstances. Reimbursement is limited to the actual expenses for food not to exceed the current state reimbursement rate for ASO Meals.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	Unit = One Day Cannot exceed three meals per one day
Maximum Total Authorizations Available	As required
Admission Criteria	● Child must have a case in circuit court where rights of one parent are at issue. ● Extenuating circumstances exist related to distance, time and frequency. ● Service must be noted on the service plan. ● Goals/objectives must be present to address how utilization of this service will occur in the future. ● All transportation reimbursement for biological parents/guardians/foster/kinship placements are at the discretion of the BSS Child Welfare Worker.
Continuing Stay Criteria	● Progress toward goals/objective has been made, but not satisfactorily achieved. ● Extenuating circumstances continue to exist related to distance, time and frequency. ● Permanency plan is still appropriate to receive this service.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals/objectives have been satisfactorily achieved. ● Child's case has been closed. ● Child has been adopted or reunified with family.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Expenses for entertainment and alcoholic beverages are not covered. ● Meal referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for meal reimbursement through this code. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the visitation plan must be present in the case record. ● A copy of meal receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Parents as Teachers (PAT) 120805

Parents as Teachers (PAT) is a home-visiting parent education program that teaches new and expectant parents skills intended to promote positive child development and prevent child maltreatment. The program can target certain risk factors, or it may be used as an overall preventative program. Families can begin the program prenatally and continue through when their child enters kindergarten. Sessions are typically held for one hour in the family's home, but can also be delivered in schools, childcare centers, or other community spaces. The goals of PAT are:

- increase parent knowledge of early childhood development;
- improve parenting practices;
- promote early detection of developmental delays and health issues;
- prevent child abuse and neglect, and;
- increase school readiness and success.

The four core components are:

- personal home visits;
- supportive group connection events;
- child health and developmental screenings, and;
- community resource networks.

Only in- home setting permitted	
Initial Authorization	365 days Unit= One day 365 units per 365 days
Admission Criteria:	● At least one parent must be pregnant or parenting a newborn. ● Family is engaged in an active Child Protective Services case. ● Children in foster care (through either abuse/neglect or juvenile justice petition) who are pregnant and/or parenting a newborn. ● Service must be referred by a case worker within the Bureau for Social Services or staff contracted to act in the caseworker role. ● Child must remain in their home. ● Children in BSS custody who have returned home for a trial period are eligible to receive this service. ● WV BSS Prevention or Case Plan must be provided, or the service cannot be authorized. A provider plan will not substitute this requirement.
Continued Stay:	NA
Discharge Criteria	● Goals have been accomplished.

	● Family/child is not participating. ● No progress has been demonstrated. ● Child enters BSS Custody. ● Child reaches age outside the scope of service.
Service Exclusions:	Targeted Case Management and other parenting education curricula may not be provided concurrently.
Clinical Exclusions:	Parent is in active hospital or residential based treatment without the child(ren).
Documentation:	Documentation must occur within 15 calendar days of delivery of service. Documentation must indicate how often this service is to be provided. There must be a progress note describing each service provided, the relationship of the service to the case, and the families response to the service. Documentation must also include the following: • Signature with credentials • Place of service • Date of service • Start-and-Stop times

Prerequisite/Minimum Provider Qualifications:

- Agencies must sign an affiliate agreement indicating they will adhere to the essential requirements to meet model fidelity.

Private Transportation 120100

Definition: Reimbursement for the provision of transportation services in a personal vehicle. The activity(ies) that the child/youth and/or family need transportation for must be explicitly documented on the BSS safety plan or Case Plan. Examples include medical appointments for which non-emergency medical transportation could **not** be accessed, respite, and visitation, etc.

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

Please note non-emergency medical transportation (NEMT) is utilized for medically necessary services. NEMT is accessed through Medicare. NEMT must be used for transportation to and from medical and behavioral health appointments when the person has traditional Medicaid coverage.

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit= One mile 1000 units
Maximum Total Authorizations Available	As required
Admission Criteria	● Documentation of the parent's inability to afford to pay for transportation (gas money, depreciation of vehicle, etc.) and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Safety plan or Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● BSS Child Welfare Worker, family and BSS supervisor must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service.

	● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● BSS Child Welfare Worker, family and Supervisor agree that the child is appropriate to remain in their home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● NEMT can be accessed ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the Referral for Socially Necessary Services and receipts must be kept for submission to MDT if requested. ● A log of trips with date, miles and reason for trip.

Public Transportation 120110

Definition: Reimbursement for the provision of transportation on buses, planes, and/or trains. This code may be used for local bus passes or long-distance bus tickets. Rental cars, tolls if a rental car is used, taxi fares and parking are also included in this service. The activity(ies) that the child/youth and/or family need transportation for must be explicitly documented on the BSS 's Case Plan. Examples include medical appointments for which non-emergency medical transportation could **not** be accessed or respite, visitation, etc. The least costly means available must be utilized. This service covers the fare for the shortest practical route to/from the traveler's destination.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit= Event
Maximum Total Authorizations Available	As required
Admission Criteria	● Documentation of the parent's inability to afford to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● BSS Child Welfare Worker, family and BSS supervisor must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT or BSS Child Welfare Worker, family and BSS supervisor agree that the youth is appropriate to remain in the home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's case is closed. ● Family now has support system in place to provide the service.

	● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes waiting time ● NEMT can be accessed ● In cases where more than one member of the family is receiving this service, bill under one identified child and reflect all present in the documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of travel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Additional Service Criteria:

- Agencies and /or private companies providing this service must be regulated through the appropriate state or federal transportation department/accrediting body.
- Individual family members, children/youth, or people identified within the case record may be enrolled for this service as a means to obtain pre-paid transportation when a provider is not enrolled. The individual is responsible for reconciling the transportation with the WV BSS when the trip is completed. The BSS Child Welfare Worker must directly assist the family in the process of accessing pre-paid transportation.

SAFE Together – Safety Management 120950

Definition: SAFE Together - Safety Management is a community-based model for safety management that involves a collaborative partnership between Child Protective Services (Ongoing Specialist) and community-based family service agencies (Safety Manager) to oversee provisions of in-home safety plans and deliver in-home safety services to ensure child safety. During this process the Safety Manager oversees and manages the services being provided in an in-home safety plan and directly provides in-home safety services to families, while the Ongoing Specialist has final decision-making authority for type of safety plan, scope of safety plan, and changes to safety plan.

Out-of-home Safety Plans also include development of Conditions for Return that are directly based on the findings of the Safety Plan Analysis. Conditions for Return statements are required, and must identify and describe the specific behaviors, conditions, or circumstances that must exist within the home environment before a child can return to the home. Aligned with reasonable efforts or active efforts, Conditions for Return entail returning a child to the parental home when impending dangers can be managed with an in-home safety plan.

Ultimately, through the ongoing application of SAFE Together - Safety Management services, the Safety Manager is focused on development of the least-restrictive and least-intrusive plan that fully ensures child safety while appropriate services are put in place while impending dangers are still active.

Provisions for service are customized to address unique family requirements. Direct interactions fluctuate between one and seven instances weekly, determined by the manifestation of safety threats, though typically occurring two to four times per week. Each personal engagement generally lasts one hour, resulting in a monthly average of twelve face-to-face service hours.

Practice Objectives of the Safety Manager are:

1. To participate in the safety planning process occurring at key decision-making points in the SAFE model intervention process.
2. To deliver safety services/resources that effectively manage Impending Danger in accordance with the in-home safety plan's specifications.
3. To proactively manage, oversee, and coordinate safety categories and safety services/resources provided by other informal safety service providers, as set forth in an in-home safety plan.
4. To help families meet Conditions for Return when there are signs that prompt reunification may be possible with more support.
5. To ensure timely communication about and coordination of the implementation and management of in-home safety plans with Child Protective Services.

Responsibilities of the Safety Manager are:

- Safety Manager is available and responsive to inquiries from the Ongoing Specialist regarding potential for involvement with an in-home safety plan in a timely manner.

- Safety Manager collaborates on the development of an in-home safety plan.
- Safety Manager contacts safety service providers to assess and determine suitability; safety manager provides information regarding suitability of safety service providers to Ongoing Specialists for necessary background checks to be completed.
- Safety Manager ensures understanding and ability to manage the safety plan as written.
- Safety Manager seeks clarification from Ongoing Specialists as needed.
- Safety Manager prepares safety service providers and ensures understanding and ability to manage the safety plan as written.
- Safety manager attends a safety management meeting when discussion is required regarding sufficiency of the safety plan and any changes that need to be made.
- Safety Manager updates the Ongoing Specialist weekly on safety service provision and the status of safety plan sufficiency.
- Safety Manager has the flexibility to go to the home beyond what is prescribed in the safety plan as dictated by the family's needs and situation.
- Safety Manager makes arrangements with safety service providers to provide coverage if a safety service cannot be delivered as scheduled and updates Ongoing Specialist.
- Safety Manager carries out tasks associated with day-to-day management of the safety plan, including contacting other safety service resources, both formal and informal, as outlined in the safety plan to assure continued safety plan sufficiency and immediately notifying the Ongoing Specialist if the safety plan is deteriorating (becomes insufficient).

Based on a referral from the Ongoing Specialist, the Safety Manager assists caregivers in meeting Conditions for Return (CFR).

- Safety manager communicates regularly with caregivers and meets with them personally as planned to facilitate attainment of Conditions for Return, discuss progress, identify continued areas of need, barriers, and involvement of caregivers.
- Safety Manager develops necessary steps and activities to address the Conditions for Return. Safety Manager updates the Ongoing Specialist weekly on progress towards achieving Conditions for Return.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	30 day authorization period 1 unit equals 1 hour 20 units per authorization period (additional units would require DoHS Review Committee approval)
Maximum Total Authorizations Available	9
Admission Criteria	● Parents/caregivers and children (0-17) who are determined by Child Protective Services to be unsafe with their families and who have cases opened for ongoing services.

	● Identified as unsafe in the home that they primarily reside, but safety can be managed through an in-home safety plan. ● Imminent risk of placement ● Traumatic experiences ● Parent/Caregiver is willing to work towards Conditions for Return. ● SNS Provider is required to provide Acentra Health a copy of the completed, signed BSS Safety Plan prior to the authorization of SAFE Together - Safety Management services.
Continuing Stay Criteria	● Parents/caregivers and children (0-17) who are determined by Child Protective Services continue to be unsafe with their families and who have cases opened for ongoing services. ● Identified as unsafe in the home that they primarily reside, but safety can continue to be managed through an in-home safety plan. ● Imminent risk of placement without services. ● Parent/Caregiver remains willing to work towards Conditions for Return.
Discharge Criteria (Any element may result in discharge or transfer)	● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that the child can remain safely in the home without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system.
Service Exclusions	● ASO Safety Services can NOT be used while SAFE Together services are active. ● Safe at Home Services can NOT be used while SAFE Together services are active. ● Any transportation codes related to service provision. ● If a crisis is behavioral in nature for a child, the family should access 844-HELP-4WV (Children's Mobile Crisis Response). ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of family' s issue(s) precludes provision of services in this level of care. ● Need for the service is not solely to clinically monitor for homicidal and/or suicidal behaviors.

Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. ● A copy of the completed, signed BSS Safety Plan and a copy of the conditions for return, when applicable. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:
Supervisor with a Master's degree or Bachelor's degree
Safety Managers with a Bachelor's degree or Associate degree

● Staff providing this service must have a BSW or related four-year degree. Related degrees are:
● Sociology
● Psychology
● Counseling
● Interpersonal Communication
● Human Services
● Primary or Secondary Education
● Criminal Justice
● Board of Regents with an emphasis in Human Service
● Gerontology
● Family and Consumer Science and
● Experience providing direct service to families.
● Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision and
● All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information and
● All required trainings completed as indicated in the provider agreement and
● Transportation Providers must have valid Driver's licenses from the employee's state of residence and insurance.

Supervised Family Time One 120771

Definition: Service in which visitation between family members (parent to child or child to child) is observed to ensure general safety and appropriate interaction is maintained during visitation. Visitation provider either looks in on visits between family members periodically (as determined by BSS visitation plan) or observes the visit while sitting in the room with the family members. Visitation provider will observe to ensure that no abuse, either physical or emotional, takes place during visitation. Provider will also ensure that parents do not inappropriately try to influence the child to recant prior statement to CPS/police officers. Provider will further ensure that family member visiting with the child continues to interact with the child during visitation instead of stepping outside to smoke or take phone calls, falling asleep or carrying on a conversation with the visitation provider instead of the child. During events such as these, the visitation provider will either re-direct the adult family member or if severe enough, end the visit after consultation with the child's assigned BSS Child Welfare Worker. If the visitation provider needs to contact the BSS Child Welfare Worker, they should take precaution to ensure that the visit is covered so that no further inappropriate interaction takes place while the visitation provider is out of the room contacting the BSS Child Welfare Worker. This type of visitation can be done at the family's home, an outdoor recreational setting, or in an office, whichever provides the needed safety of the children and provider.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One half hour 104 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● Children must have an open CPS case ● The goal of visitation must be eventual reunification with parents and/or siblings or maintenance of family ties. ● If maintenance of family ties is the goal, then an alternative plan for supervision of the visit involving an informal/unpaid provider must be arranged for as soon as possible. ● MDT has reviewed the case and determined that visitation with parents/relatives should be supervised due to threats to the child's safety. ● The visitation plan notes that supervision is required.
Continuing Stay Criteria	● Progress toward goals/objectives has been documented, but not achieved. ● MDT recommends the service continue. ● Child's abuse/neglect case remains open with no disposition regarding the respondent parent and issues that require partial or complete supervision continue to be present.
Discharge Criteria (Any element may result in	● Goals and objectives have been substantially met. ● Supervision of family time is no longer deemed

discharge or transfer)	necessary and unsupervised family time and/or overnight visits have begun. ● Child has been reunified with respondent parent named in petition. ● Parental rights have been terminated or are in the process of termination. ● Child's case is closed. ● Visitation is deemed detrimental to the child's safety and well-being.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● In cases where more than one member of the family is receiving this service, bill under one identified client and reflect all present in the documentation. ● Specialized and Therapeutic foster homes are to be the provider of this service for the youth residing in their homes; the SNS referrals for this service should be made to the Child Placing Agencies for the youth in their homes. ● The delivery of all Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials.

Documentation continued	● A copy of the CPS Initial Assessment, current Case Plan and BSS visitation plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month If more than one child present, document all participants in the intervention within the note.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Supervised Family Time Two 120770

Definition: Service in which visitation between parents and children is observed to evaluate appropriateness and level of interaction. The observer/assessor will intervene if abuse or inappropriate behavior is occurring. The purpose is to assess and monitor the appropriateness of family interaction and possible reunification. The service must be identified on the service plan. Before each visit the provider will complete the following tasks:

- Meet with the child's caseworker to learn the child's needs as identified in the CPS/YS Safety plan and to jointly develop a specified needs list to be met during the initial visits.
- Actions the provider must take to keep the child safe during visitation will be part of the list (e.g., if parent has a history of fondling child when they tickle the child or holds the child on their lap, then BSS Child Welfare Worker will tell provider not to allow the parent to tickle the child or have the child sit on the parent's lap). Also, things that the parent should bring to the visit like a well-stocked diaper bag if infant, food if the visit takes place during the child's lunch time or snack time, books or toys the child likes to have present when visiting with the parent will be included on this needs list. The provider will always suggest that the visitation take place in the parent's home and as soon as possible after the child was removed from the home. If the BSS Child Welfare Worker does not agree that the visitation can take place in the parent's home, the provider will document reason why that is not possible. If face-to-face visitation is not possible, the provider should discuss what other types of contact are possible between the parents and child such as letters, text messages, emails, phone calls, etc. (none of these can be supervised by the provider). Also, the provider will obtain the BSS Visitation Plan from the BSS Child Welfare Worker. If the provider is unable to obtain the plan, the provider will write a visitation plan.
- Call Resource/Foster Parents to obtain information related to the impact of separation on the child and the child's behaviors in order to refine the list of needs to be met during visits. Provider will discuss any behaviors the child has been exhibiting leading up to the visit. Provider will inquire about what the Resource/Foster Parent did to prepare the child for the visit each time. This preparation needs to be consistent with the court order, if it is specific.
- Contact parent(s) to confirm the visit time and place, identify any barriers to visits and arrange to meet with the parent one hour before the visit. During this time, the provider will collect any letters or cards, gifts, etc. that the parent has brought for the child to inspect them and check for appropriateness. If any questions, provider will explain to parent that the item or items will be kept by provider until they have inspected them with the BSS Child Welfare Worker. If there are items from the last visit that were not approved by the worker, the provider will give them back and instruct the parent that if they have any questions why there not approved, to contact the BSS Child Welfare Worker. Provider and BSS Child Welfare Worker will meet with parents to explain what is expected of them during the visitation – such as not discussing the court case with the child, not speaking negatively about the Resource/Foster Parents, showing up on time, calling to cancel well in advance if unable to attend the visit, the need to remain the parent during the visit meaning that the parent is in charge of controlling their child during the visit, pacify the child if child becomes upset during the visit, no cell phone usage during the visit, no unapproved visitors, and in general making the most of the visit time. The provider will explain to the parent that the provider will not be interacting with the parent during the visit, only observing, so that the parent does not become upset if the provider does not "visit" with the parent.
- Notify the Resource/Foster Parent(s) of the planned visit and schedule transportation as needed. Provider will always ask if the Resource/Foster Parents can transport the child to the visit or at least part of the way to the visit.

By the end of the first month, the provider will have arranged visitations to continue as documented in the Child's Case Plan by:

- Clarifying what needs must be met during future visits.
- Deciding what special arrangements will be made for visits.
- Identifying the level of support the parent requires during visits and consider who might replace the visitation specialist in the future, such as Resource/Foster Parent, family member, etc.
- Arranging for transportation as necessary, even in those cases when it is determined that continued supervision of visits is unnecessary.
- Maintaining weekly contact with the BSS Child Welfare Worker to update placement information.

The provider will perform the following functions for each visit:

- Meet with the parent before the visit to help the parent anticipate their own and the child's reactions during the visit and to discuss the needs to be met during the visit.
- Assist the parent as necessary during the visit.
- Meet with the parent after the visit to discuss how the parent met the child's needs and to plan changes in the next visit.
- Help the parent understand the importance of keeping his or her commitment to visit the child.
- Speak with the Resource/Foster Parent after the visit to discuss any behaviors or for the child reactions the child may display.
- Prepare notes about the parent's skill in meeting the child's needs during the visit and continuously refine the needs list.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One half hour 104 units per 92 days
Maximum Total Authorizations Available	2
Admission Criteria	● Abuse/neglect petition has been filed in circuit court naming one respondent parent. ● Child is placed with one biological parent. ● MDT has reviewed the case and determined that Family Time with parents/relatives needs to be supervised due to threats to child's safety **and** the SNS Provider is being asked to evaluate appropriateness and level of interaction. ● The visitation plan notes that supervision is required due to threats to child's safety. ● The needs list indicates what specific issues are to be monitored/observed during the visitations. ● The case requires that the SNS provider make an assessment and recommendation as to if reunification is possible/advisable.
Continuing Stay Criteria	● Progress toward goals/objectives has been documented, but not achieved. ● MDT recommends the service continue.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been substantially met. ● Child has been reunified with biological family.

	● Parental rights have been terminated or are in the process of termination. ● Child's case is closed. ● Visitation is deemed detrimental to the child's safety and well-being.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● In cases where more than one member of the family is receiving this service, bill under one identified client and reflect all present in the documentation. ● Specialized and Therapeutic foster homes are to be the provider of this service for the youth residing in their homes; the SNS referrals for this service should be made to the Child Placing Agencies for the youth in their homes. ● The delivery of all Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials ● A copy of the CPS Initial Assessment, current Case Plan and BSS visitation plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month If more than one child present, document all participants in the intervention within the note.

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  • Sociology
  • Psychology
  • Counseling
  • Interpersonal Communication
  • Human Services
  • Primary or Secondary Education
  • Criminal Justice

- Board of Regents with an emphasis in Human Service
- Gerontology
- Family and Consumer Science **and**

• Experience providing direct service to families.
• Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
• All providers must have an acceptable CIB through WV Cares **and**
• An APS/CPS screen completed with no negative information **and**

- All trainings completed as indicated in the provider agreement **and**

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Scheduled In-Person Observation 120780

Definition: "Eyes on" oversight required to provide structure and ensure performance of developmentally appropriate activities necessary to carry out Activities of Daily Living and to ensure safety for the identified client, family and/or community. The identified child or family requiring supervision must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety, permanency and well-being. This service cannot be used for spot checks, surprise visits, safety checks or unannounced visits, please see the *Unscheduled In-Person Observation* service code.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One hour 39 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● Structure and environmental control are needed to monitor child or parent's reaction to stress, inconsistent parenting techniques, impulsive reactions or detrimental expectations, and maintain safety; **- or -** ● Structure and environmental control are needed to ensure safety of a child and the family due to the volatile, aggressive and/or self-harmful behaviors of a child or family member; **-or-** ● Previous attempts at appropriate structure and environmental control are documented and have been unsuccessful; **-and-** ● CPS Initial Assessment was completed, and it was determined a safety plan was needed; **-and-** ● Scheduled In-Person Observation is identified on the Safety Plan that has been reviewed by the BSS Child Welfare Worker, family and BSS Supervisor; **-and-** ● Service cannot be safely provided through a community resource or the family support system.
Continuing Stay Criteria	● Progress toward the needs and case plan goals on the plan has been documented but not reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement is still appropriate. ● No less restrictive service/intervention is available. ● Service cannot be safely provided through a community resource or the family support system. ● Family continues to display behaviors documented on the CPS Initial Assessment that indicated the need for a safety plan.

Discharge Criteria **(Any element may result in discharge or transfer)**	● Progress toward the needs and case plan goals on the plan has been documented and reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement can be maintained without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system. ● Another service is warranted by lack of positive change in the youth/family's behavior.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's or adult's issues precludes provision of services in this level of care. ● Need for the service is not solely due to clinically monitor for homicidal and/or suicidal behaviors. ● This service cannot be implemented during school/day care hours if child is enrolled or should be enrolled and attending school.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials ● A copy of the CPS Initial Assessment and the current safety plan and/or Case Plan must be present in the case

	record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Step-By-Step Parenting Program 120905

Definition: Utilizing skill sets and materials obtained through the Step-by-Step Parenting Program Workshops to provide direct face-to-face services to improve parental competence and knowledge of:

- Home Safety and First Aid
- Parent-Child Interactions
- Problem Solving
- Discipline
- Appropriate supervision
- Encouragement of child/adolescent care, age-appropriate development
- Realistic expectations and standards of child/adolescent behavior of identified child

This service should be used to correct specific parenting skill deficits for parents with learning differences. This can include parents with intellectual disabilities, acquired brain injury, slow learners, learning disabilities, and low reading skills. This service is provided in a one-on-one setting and is highly individualized to meet the parent's needs. Specific examples include individualized behavior management techniques or understanding a child's specific mental or physical health condition. Providers will utilize the Step-by-Step Parenting Program Manual as well as the step-by-step checklist to assess and teach child-care skills to parents. As the Bureau for Social Services moves toward quality outcome measures, providers are required to attend the Step-by-Step Parenting Program Workshop before services can start.

<u>Goals of the Program:</u>

- Objectively identify impediments and supports to successful parenting, and specific parenting skill deficits, to design a comprehensive family intervention.
- Help the family organize supports and services to meet the family's needs and keep the child safe.
- Increase parenting skills to reduce the risk of, or actual, child neglect through in-home step-by-step parent training.
- Improve child health, development, and behavior problems related to parenting skill deficits.
- Have the parents maintain learned skills over time.
- Have the parents generalize learned skills to all situations in which they are needed.
- Reduce need for out-of-home care placements and permanent removal of the child.
- Help parents to decrease reliance on paid supports.
- Help parents to develop a natural support network for the family.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	• 92 days • Unit = One hour • 39 units per 92 days
Maximum Total Authorizations Available	3

Admission Criteria	**Admission Criteria** 1. Parent must demonstrate one or more of the following: a. Learning difficulty and/or an IDD Condition b. Inappropriate expectations of the child/adolescent c. Inability to be empathetically aware of child/adolescent needs d. Difficulty assuming role of parent e. Lack of parenting skills, parents with learning differences, risk of child neglect, risk of child developmental delay and behavior problems f. Lack of knowledge in feeding, bathing, basic medical treatment, and basic supervision –**and** - 2. Treatment plan documents a need for the service with specific goals and objectives identifying areas for improvement. 3. Service recommended by the BSS Worker, family, and BSS Supervisor. 4. Service cannot be met through other community resources. 5. CPS Initial Assessment was completed and indicated a safety plan was needed to maintain the child in the home for family preservation.
Continuing Stay Criteria	• Progress toward treatment plan goals/objectives is documented but has not been achieved. • BSS worker, family and BSS supervisor recommend the service continue and agree that the current placement is still appropriate. • Service cannot be met appropriately through other community resources. • The caretaker continues to display behaviors documented on the CPS Initial Assessment that indicated the need for a safety plan.
Discharge Criteria (Any element may result in discharge or transfer)	• Goals and objectives have been met substantially. • Parent requests discharge. • Another service is warranted by change in the family's condition. • No outlook for improvement within this level of service.
Service Exclusions	• No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. • If more than one parent in the same household is involved with this intervention, bill the service through one parent. • Those receiving ICF/IDD services are not eligible for this service. • The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a

	currently valid BSS Case Plan or written permission has been granted by BSS. • Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	• Severity of child's issues precludes provision of services in this level of care. • Parent's individual mental health impairments and/or substance or alcohol abuse preclude provision of service in this level of care. • Lack of social support systems indicates that a more intensive service is needed.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes: • Code or service name • Summary of the intervention • Client's response to the intervention • Relation to the service plan • Location where service occurred • Duration • Start/stop time • Signature of the provider and his/her title or credentials A copy of the CPS Initial Assessment, treatment plan and current safety plan must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart and one sent to the referring worker. This monthly progress report must contain: • A list of dates of service and the specific services rendered and/or attempts • Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention • Plan for further interventions • Any identified unmet concrete or service needs • Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
    - Sociology
    - Psychology

    - Counseling
    - Interpersonal Communication
    - Human Services
    - Primary or Secondary Education
    - Criminal Justice
    - Board of Regents with an emphasis in Human Service
    - Gerontology
    - Family and Consumer Science **and**
- Experience providing direct service to families.
- **Staff must also show proof of attendance for the Step-by-Step Parenting Program Workshop and The Family Game Workshop.**
- Staff person must be under supervision of a licensed social worker, counselor, or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and a**n APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement **and**
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance

Transportation Time 120104

Definition:

This code is for providers whose only service is transporting a BSS client(s). These providers/transports are not associated with their own provision of a socially or behavior health medically necessary service. The provider is not engaged in an otherwise billable activity. Mileage encumbered when transporting is billed separately. The service has been documented in the BSS 's child/family's service plan and all other natural supports/options have been explored including BSS staff and are not available for this event.

Activities:

- Drugs Screens
- Not eligible for NEMT

The billable service begins when the provider leaves their identified place of business or home, whichever is shortest, and ends when provider returns to this location. Waiting time at the identified destination is included. The maximum number of hours this service may be provided in a 24-hour period is 12 hours or 48 units. Ten hours for when consumers are in the vehicle and up to 12 hours total. If an overnight trip is required, no more than 12 hours or 48 units may be invoiced. When not in the vehicle, the provider must remain at the location with the client.

If Non-Emergency Transport (NEMT) is available, this service may not be used. It can't replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties.

No providers may utilize this service to transport a child to a residential placement in or out of state.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	208 units/92 days Unit= 15 minutes Maximum of 48 units within a 24-hour period
Maximum Total Authorizations Available	3
Admission Criteria	● Documentation of the parent's inability to transport themselves or the child to a service necessary for safety, permanency or wellbeing for the child and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Safety plan and/or Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● BSS Child Welfare Worker and supervisor agree that due to the nature of the complaint, the child can be safely served in the home/community with supportive services.

Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● BSS Child Welfare Worker and Supervisor agree that the child is appropriate to remain in their home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Parent requests discharge. ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of goals/objectives on the service plan. ● No outlook for improvement within this level of service
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● Excludes tolls and parking ● NEMT is available ● Does not replace the responsibility of parents, family members or family friends ● IDD waiver or ICF recipients are not eligible for this service ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip, signature of the provider and their title or credentials. ● A copy of the BSS 's current safety plan and/or Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance. All required trainings completed as indicated in the provider agreement.

If multiple people are on one transport, they must be from the same case. The trip will be billed on the case member that is farthest distance from the identified destination. If a protection order is in place between members within the case, they must be transported separately.

Unscheduled In-Person Observation 120665

Definition: "Eyes on" oversight required to ensure safety for the identified client, family and/or community. The identified child or family requiring supervision must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety, permanency and well-being. **This service is intended for safety checks or unannounced visits.** The BSS Safety Plan will have been completed and sent to the SNS provider outlining specifically what safety concerns the SNS Provider should be checking. The BSS Child Welfare Worker will provide the SNS Provider with the appropriate staff contact information/hotlines and protocols to follow if the SNS provider finds the family in violation of the current safety plan, case plan, protective order, court order, etc. The identified client/family should have been educated by the BSS Child Welfare Worker during the safety planning process about BSS expectations for maintaining safety in the household. The identified client/family will not be held at fault for not being at home when SNS provider arrives for an unscheduled In-Person Observation visit.

Target Population	Child Protective Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = 15 min 156 units per 92 days
Maximum Total Authorizations Available	As Required
Admission Criteria	● Structure and environmental control are needed to ensure safety of a child and the family due to the volatile, aggressive and/or self-harmful behaviors of a child or family member; **-or-** ● CPS Initial Assessment was completed, and it was determined a safety plan was needed; **-and-** ● Unscheduled In-Person Observation is identified on the Safety Plan that has been reviewed by the BSS Child Welfare Worker, family and WVBSS Supervisor; **-and-** ● Service cannot be safely provided through a community resource or the family support system. ● BSS Safety Plan has been completed and submitted to provider at time of service referral with instructions for what situations provider is to be monitoring and listing of next steps for provider if situation is found present in home.
Continuing Stay Criteria	● Progress toward the identified goals/objectives on the plan has been documented but not reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement is still appropriate. ● No less restrictive service/intervention is available. ● Service cannot be safely provided through a community resource or the family support system.

	● Family continues to display behaviors documented on the CPS Initial Assessment that indicated the need for a safety plan.
Discharge Criteria (Any element may result in discharge or transfer)	● Progress toward the identified goals/objectives on the plan has been documented and reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement can be maintained without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system. ● Another service is warranted by lack of positive change in the youth/family's behavior.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's or adult's issues precludes provision of services in this level of care. ● Need for the service is not solely due to clinically monitor for homicidal and/or suicidal behaviors. ● This service cannot be implemented during school/day care hours if child is enrolled or should be enrolled and attending school.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials

	A copy of the CPS Initial Assessment and the current safety plan and/or Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

CPS Foster Care Services

Used when a child is **in state's custody** and placed in **any out of home placement**. This could be a relative/kinship placement, BSS foster home, therapeutic or specialized foster home, residential group home, PRTF (psychiatric residential treatment facility), etc.

Adult Skill Building 130390

Definition: Direct service in which the identified parent is assisted to increase basic home management skills and social/emotional support networks through hands-on implementation and role modeling. This service provides for the acquisition of skills needed to meet adult role expectations and carry out activities of daily living that directly impact the child's safety in the home. Adult Skill Building is intended to improve the capacity for solving problems and resolving conflicts. Possible Adult Skill Building activities include housekeeping, cleaning, food shopping, meal preparation, laundry, budgeting, utilizing community resources, accessing medical and school records and personal care/hygiene. This service is implemented when there is a lack of skill knowledge not due to a mental health condition and implies that there is not a lack of motivation. SNS Provider will work with client on needs identified on the life skills assessment and/or needs outlined by the BSS service plan.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit= One hour 35 units per 92 days
Maximum Total Authorizations Available	4
Admission Criteria	● CPS Initial Assessment/Ongoing Assessment indicated parents' lack of basic life skills to maintain safety, health and wellbeing of children in their care is directly related to the children's placement into family foster care with Child Protective Services. ● The identified parent's children were removed from the home due to abuse, neglect or abandonment issues. ● The plan is for family reunification. ● Case Plan documented the need for the service with specific objectives targeting the identified areas of improvement. ● The SNS Provider will assess the parent to determine which life skills need enhanced. The Casey Life Skills Assessment may be utilized or the SNS provider may use any propriety life skill assessment they have developed. ● Service recommended by the MDT. ● Service cannot be met appropriately through other community resources such as adult education classes, personal care or Extension Services. ● Family has explored social support system members capable of providing service to the identified client.
Continuing Stay Criteria	● MDT reviews case and determines reunification is still appropriate. ● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● Prior to re-authorizing the Adult Skill Building service, the SNS Provider will reassess the client using a life skills assessment to identify continued deficits. ● BSS expects a detailed update be completed each 90 days on any client progress made in identified deficit areas-this should be

	included in the monthly summary and discussed at the MDT. ● Service cannot be met appropriately through other community resources. ● MDT has reviewed the Case Plan and recommends the service continue. ● Family continues to explore social support system members capable of providing service to the identified client. ● The caretakers continue to lack skills required to ensure safety, permanency and wellbeing of the children removed from their care as initially displayed on the CPS Initial Assessment. ● Caretaker has demonstrated an acceptance that the changes are necessary.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have substantially been met. ● Parent requests discharge. ● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client. ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of goals/objectives on the service plan. ● No outlook for improvement with this level of service. ● Reunification is no longer an appropriate option for the family.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of the parent's impairment due to a mental illness or substance use, misuse or substance use disorder problem may preclude provision of service in this level of care. If the parent previously had the skill and lost the ability to perform the task due to the severity of their mental illness/ substance use, misuse or substance use disorder, a mental health professional should be consulted to determine if the parent meets medical necessity for Basic Living Skills in the Medicaid Rehabilitation Manual. ● Severity of the parent's impairment due to Intellectual Developmental Delay or developmental delays may preclude provision of this service. A mental health professional should be consulted to evaluate the possibility of short-term Day Treatment Services. ● Severity of parent's impairment due to traumatic brain injury (TBI) may preclude provision of this service. A rehab professional should be consulted to evaluate the possibility of rehabilitation services.

Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A copy of the CPS Initial Assessment, Case Plan and current safety plan must be present in the case record. A copy of the client's Casey Life Skills Assessment(s) should be maintained as part of the provider's case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- All providers must have a CIB and an APS/CPS screen completed with no negative information.

Agency Transportation One 130107

Definition: This code may be utilized for providers' mileage encumbered when the following services from the Child Protective Services Foster Care Program Option have been implemented within the child/family's home and the permanency plan is reunification:

- Adult Skill Building
- Child Community Connection
- Connection Visit
- Court Attendance
- Daily Respite
- Family Time with Parent Coaching
- Home Study
- Hourly Respite
- Individualized Parenting
- MDT Attendance
- Pre-Reunification Support
- Supervised Family Time One
- Supervised Family Time Two
- Supervision for Temporary Lodging both Professional and Paraprofessional Codes
- Transportation Time

If a provider is unable to deliver the identified service upon traveling to the home, this code may be billed up to three times within the ninety-two (92) day authorization period when the following conditions are met:

- The provider/agency has a policy and procedure regarding the expectations of the families being served. The importance of keeping scheduled appointments, notifying the provider when an appointment needs to be cancelled and the means in which the BSS will be notified if appointments are not kept are reviewed with the client(s).
- The provider/agency has a policy and procedure about notifying the Department regarding youth/family's non-compliance with established scheduled appointments.
- There is documentation of the visit being scheduled within the case record.

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit = one mile 1000 units
Maximum Total Authorizations Available	4

Admission Criteria	● Documentation of the Resource/Foster Parent's inability to access NEMT and the subsequent reason must be in the client's record. ● Documentation in the record that other sources, such as the Foster/Adoptive Family support system, public transportation or non-emergency medical transportation services, have been explored/ exhausted. ● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT must recommend this service.
Continuing Stay Criteria	● Foster/Adoptive Family continues to explore their social support system to provide the service. ● MDT recommends the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT agrees that the foster care placement is appropriate for the client.
Discharge Criteria **(Any element may result in discharge or transfer)**	● Goals and objectives have been met substantially. ● Child's case is closed. ● Foster/Adoptive Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee-for-service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● NEMT can be accessed. ● Excludes tolls, parking and waiting time. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● Residential Homes and transitional living programs for vulnerable youth should follow the directions in the annual agreements with the Department to determine eligibility for children in their care. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services

	in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS 's Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance. All required trainings as indicated in the provider agreement.

Agency Transportation Two 130108

Definition: Reimbursement for transportation related to visitation with the parent when the child is in the car. Those eligible for this service must be documented in the visitation plan completed by the BSS Child Welfare Worker and visitation must be explicitly documented on the BSS child/family's case plan. The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).
Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit = one mile 1000 units
Maximum Total Authorizations Available	4
Admission Criteria	● Permanency plan must indicate reunification or that there is a court order mandating visitation. ● Documentation that the Foster/Adoptive Family or kinship/ relative provider is unable to provide this service and the subsequent reason must be in the client's record. ● Documentation in the record that other sources, such as the family support system, public transportation, have been explored/exhausted. ● Case Plan originated by BSS must document the need for this service. ● MDT must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but Foster/Adoptive Family or kinship/relative provider still does not have a reliable means of transportation. ● Family of origin lacks support system to provide the service. ● MDT recommends the service continue. ● Permanency plan remains reunification or there is a court order mandating visitation.

Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Permanency has been obtained. ● Foster/Adoptive Family or kinship/relative provider now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes tolls, parking and waiting time. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● All foster care providers are responsible for all costs associated with transportation not related to the following activities: MDT's, IEP's, court hearings, sibling visitation, relative visitation, biological parent visitation, foster/adoptive parent visitation, detention visits, residential placement visiting, placement changes, case staffing, and adoption promotion activities ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS 's Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria: • For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance. All required trainings as indicated on the provider agreement.

Agency Transportation Three 130109

Definition: Reimbursement for transportation for the purpose of the identified child attending visitation with pre-adoptive parents or adoption related activities explicitly documented on the BSS child's service plan.

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One mile 1000 units
Maximum Total Authorizations Available	4
Admission Criteria	● Child is a state ward ● Permanency plan must indicate adoption. ● BSS Child Welfare Worker must request this service. ● MDT must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted. ● MDT recommends the service continue. ● Permanency plan remains adoption.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Permanency obtained- ex. adoption or legal guardianship. ● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes tolls, parking and waiting time. ● In cases where more than one member of the family is receiving this service, bill under one identified child and reflect all present in the documentation
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this

	socially necessary service.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS 's Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance. All required trainings completed as indicated in the provider agreement.

Child Community Connection 130915

Definition: The Child Community Connection (CCC) service seeks to engage with and empower kinship families to identify needed supports and facilitate referral and linkage to formal and informal community resources. These resources should be available at no cost or be affordable to the family without additional financial assistance from the WV Bureau for Social Services. These services include, but are not limited to, tutoring, mentoring, counseling or mental health services, self-help and other support groups, educational, arts, or science programs. SNS Providers should make the family aware of resources available to all/most West Virginians such as WV Works, Family Assistance, Children with Serious Emotional Disorder Waiver services, as well as applicable mental health crisis phone numbers. BSS will make available a resource directory for kinship families that the SNS provider will be required to utilize as part of the CCC service. The kinship family should be empowered to reach out to the applicable Kinship Navigator program in their region. SNS providers of CCC will be expected to make at least 3 attempts to contact Resource for/with the family to make linkage but will not be held to the expectation that the family successfully enrolls/completes a referred resource. Providers will need to document the specific resources identified and what actions they took to facilitate the family's linkage to the resource.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit= One hour 35 units per 92 days
Maximum Total Authorizations Available	1 – No reauthorizations available
Admission Criteria	● Child has been placed in BSS custody and placed with a kinship relative or BSS resource foster home. ● Service recommended by the BSS Child Welfare Worker, family and BSS supervisor. ● BSS will require CCC providers, at the minimum, to relay to foster families these four resources: WV211, Help4WV, their area Family Resource Network and an applicable Suicide Hotline such as WV 988. ● Family lacks a social support system capable of providing service to the identified client. ● Child has been placed with a kinship/foster family resource. ● Child has been placed in a WV BSS foster home.
Continuing Stay Criteria	● Not Applicable
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child is removed from the placement. ● Kinship/Resource Foster Family requests discharge. ● Child's case is closed. ● Family has gained a social support system capable of providing service to the family. ● Family needs can now be met through a community resource.

Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● This service is not available to foster parents already certified through a Child Placing Agency. It is the responsibility of the Child Placing Agency to provide this information to their own foster homes. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● This service is not available to children placed in group residential treatment settings.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials SNS Providers of Child Community Connection must document specifically what resources the child/kinship family were linked to during the service provision including the name of the person/entity, service being referred, date and number of attempts made to contact the resource and the outcome of contact. A copy of the BSS Ongoing Assessment must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must

	contain: A list of dates of service and the specific services rendered and/or attempts. ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention. ● Plan for further interventions. ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings as indicated in the provider agreement.

Connection Visit 130206

Definition: This service is to reimburse foster families for hosting face-to-face visits to preserve the connections between children/youth who are in the custody of the BSS and living in a different Foster/Adoptive Family home, group home or who are college students living on campus. Connection Visits can be used for a child to visit with their siblings, relatives, or with former resource/foster parents or for pre-placement visits. Examples include a child in group care going to a former Foster/Adoptive Family for a holiday weekend, a college student returning to a former Foster/Adoptive Family for Thanksgiving or to visit a sibling group who are unable to be reunified in one placement. Service can also be used for a child in a foster care placement or residential facility, PRTF, etc. to do a trial face to face visit with a possible adoptive home or less restrictive foster care placement.

Target Population	Child Protective Services
Program Option	Foster Care (Kinship/Resource Families and Child Placing Agencies Only)
Initial Authorization	92 Days One Unit= One night
Maximum Total Authorizations Available	As necessary
Admission Criteria	● MDT has reviewed the case and determined that sibling visitation is safe and appropriate without formal supervision. ● The visitation plan notes that the siblings are to visit with one another and denotes frequency and duration of such visits. ● The siblings are placed in two or more separate placements where they are unable to visit with one another due to distance between placements or ● Child usually resides on campus at college but wants to return to a previous placement that they consider home for holidays and/or the summer or ● Child residing in a facility is allowed home visit for holidays and wants to return to a previous placement for the holiday. ● Child is participating in a Transitional Living Program and wants to return to a previous placement for a holiday or sibling visitation. ● Child residing in facility wants to do trial visit with a foster home that will possibly lead to a placement after completion of treatment.
Continuing Stay Criteria	● Siblings continue placement in separate homes or ● Child continues to reside on college campus during weekdays and non-holidays or ● Child continues to reside in facility.
Discharge Criteria (Any element may result in discharge or transfer)	● Siblings are placed together. ● Child(ren) achieve permanent placement through reunification, adoption, legal guardianship, etc. ● Child, who is in college, turns 21 years of age and is no longer in voluntary custody of BSS.

	● Child is discharged from facility and goes to live with the family they have been visiting.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● This service is available to SNS agency providers who are **also** child placing agencies with foster homes. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the BSS visitation plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

For relatives or non-custodial friend of the family, all credentialing and training requirements are waived. The expectations are that a family member or non-custodial friend of the family will ensure that they have a valid driver's license and minimum required insurance or will arrange the transportation with a member of their family's support group who has a driver's license, insurance and have no history of legal offenses that may endanger the passengers.

Resource/Foster Parents automatically eligible once they have been approved by the supervising agency.

Child Placing Agencies are responsible for submitting service requests to Acentra and reimbursing their own foster families.

Court Attendance 130755

Definition: Reimbursement for an SNS agency/independent provider **subpoenaed** to testify in a Circuit Court hearing related to an open BSS Child Welfare Case. Provider should be present at the hearing prepared to testify to answer questions, give updates on service participation, and assist in establishing the appropriate plan for the identified child and/or family. The provider must be actively working with the client and submitting monthly summaries to the BSS child welfare worker. For Foster Care the child **must be** in WV BSS custody and/or it is mandated in BSS Policy or WV Statute.

Eligible for any subpoenaed representative per agency for:

- SNS Providers actively providing a treatment or safety service
- Mental Health Professionals providing direct treatment (Example: Therapist)

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One Event
Maximum Total Authorizations Available	As Required
Admission Criteria	● The identified parent's children were removed from the home due to abuse, neglect or abandonment issues. ● The plan is for family reunification. ● SNS Provider will submit a copy of the subpoena to Acentra at the time of prior auth request. If multiple SNS staff were subpoenaed for testimony additional units may be authorized. ● If a subpoena is not issued for staff requested at court by DoHS then a court order showing that testimony was given by SNS provider(s) may be accepted in lieu of subpoena.
Continuing Stay Criteria	● Child remains in the BSS 's custody. ● Child or family is actively receiving services from a provider described as eligible from the above definition.
Discharge Criteria (Any element may result in discharge or transfer)	● Reunification has occurred and services were not ordered to continue after reunification.
Service Exclusions	● Residential Placements/Foster Care Agencies already receiving reimbursement for administrative case management through a Provider Agreement with BSS cannot use this service code. ● A potential provider(s) considering possible placement of a youth. ● No individual fee for service code including Medicaid Clinic or Targeted Case Management may be billed concurrently while this code is being utilized. ● The delivery of all ASO Socially Necessary Services must

	occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. The provider must retain documentation showing they attended the Circuit Court hearing. If the County does not issue subpoenas prior to court the SNS provider may submit a copy of the court order showing provider testimony was given to Acentra to obtain authorization for service. The standard 10-day timeline for prior authorization will not apply to the Court Attendance service code. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and presented to the MDT and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs

	● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month ●

Daily Respite 130430

Definition: Planned break for kinship caretakers who are in challenging situations in which a trained provider, friend, or family member assumes caregiving and supervision of the child(ren) for a brief period of time. Service may be provided in or out of natural home on a daily basis. Use prudent parenting standards and a general safety checklist/walk through to determine appropriateness instead of full home study.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One day 3 units per 92 days
Maximum Total Authorizations Available	14 units Maximum within 12-month period
Admission Criteria	● Kinship placement is in need of a break from supervision and care giving responsibilities.
Continuing Stay Criteria	● Service continues to be needed to provide support to maintain consumer's placement as identified on the service plan. ● Case Plan identifies the current plan is for the child to remain in the identified foster home placement if possible.
Discharge Criteria (Any element may result in discharge or transfer)	● Child's case is closed.
Service Exclusions	● No other fee-for-service Socially Necessary Service may be billed concurrently with this service ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention,

	client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings as indicated in the provider agreement.

Family Time with Parent Coaching 130630

Definition: Service in which family time between parents and children is observed to evaluate appropriateness and level of interaction. The observer/assessor will intervene if abuse or inappropriate behavior is occurring to maintain/restore safety of the child. Prior to the family time together, the coach will review a parenting technique that the parent can employ during time with the child(ren). It can be a technique or techniques that the parent has been working to master or a new technique reviewed directly prior to family time. The technique should address an identified deficit in parenting knowledge/skills that impacts the safety or wellbeing of the child such as unreasonable expectations of children, "parenting from the couch" using only verbal cues for children under five years of age, lack of supervision appropriate to child's age, etc. The observer/assessor will coach the parent during the visit when the technique can be used naturally and effectively to achieve the desired result.

The provider will perform the following functions for each visit:

- Meet with the parent before family time to help the parent anticipate their own and the child's reactions during family time and to discuss the needs to be met during the visit and which techniques would be used to meet those needs.
- Coaching will occur during family time to allow or remind the parent to demonstrate their use of the learned techniques.
- Meet with the parent after family time to discuss how the parent met the child's needs using the techniques and to plan changes in the next visit.
- Help the parent understand the importance of keeping their commitment to visit the child(ren).
- Speak with the kinship placement/resource foster parent(s) after the visit to discuss any behaviors or reactions the child may display.
- Prepare notes about parent's knowledge/skills in meeting the child's needs using the learned techniques during family time.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One half hour 104 units per 92 days
Maximum Total Authorizations Available	2
Admission Criteria	● The identified parent's children were removed from the home due to abuse, neglect or abandonment issues. ● The goal of service must be eventual reunification with parents. ● MDT has reviewed the case and determined that visitation with parents/relatives should be supervised due to threats to the child's safety. ● Identified clients are currently participating in Individual parenting services with the same SNS agency authorized for Family Time with Parent Coaching service. ● The same individual parenting provider should also be providing the Family Time with Coaching service. ● The BSS visitation plan notes that supervision is required. ● The needs list indicates what specific issues are to be

	monitored/observed during the visitations.
Continuing Stay Criteria	● Progress toward goals/objectives has been documented, but not achieved. ● MDT recommends the service continue. ● Child remains in the custody of the BSS and safety threats that require supervision of family time continue to be present.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been substantially met. ● Child has been reunified with biological family. ● Parental rights have been terminated or are in the process of termination. ● Child's case is closed. ● Family Time is deemed detrimental to the child's safety and well-being.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● In cases where more than one member of the family is receiving this service, bill under one identified consumer and reflect all present in the documentation. ● This service is designated for respondent parents/guardians named in the abuse/neglect petitions. Service is not to be used for other family members granted 'family time' with the children in custody. ● Child Placing Agencies are not eligible for an SNS referral or authorization for this service. If this service is provided to families of children in their specialized or therapeutic homes, it is considered part of their bundled rate. ● The delivery of all Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials ● A copy of the CPS Initial Assessment, current Case Plan and BSS visitation plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month If more than one child present, document all participants in the intervention within the note.

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology
  - Psychology
  - Counseling
  - Interpersonal Communication
  - Human Services
  - Primary or Secondary Education
  - Criminal Justice

    - Board of Regents with an emphasis in Human Service
    - Gerontology
    - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and** an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement **and**
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Functional Family Therapy 130800

FFT is a family intervention program for dysfunctional youth with disruptive, externalizing problems. Target populations range from at-risk pre-adolescents to youth with moderate to severe problems such as conduct disorder, violent acting-out, and substance use, misuse or substance use disorder. While FFT targets youth aged 11-18, younger siblings of referred adolescents often become part of the intervention process.

FFT Program goals are to eliminate the youth's referral problems, improve prosocial behaviors and improve family and individual skills. The program is broken down into five phases of intervention:

- Engagement- Maximize family initial expectation of positive change;
- Motivation- Create a motivational context for long-term change;
- Relational Assessment- Complete relational (functional) assessment of family relationships to provide foundation for changing behaviors in subsequent phases;
- Behavior Change- Facilitate individual and interactive/ relational change;
- Generalizations- Maintain individual and family change and facilitate change in multiple systems.

Outpatient Clinics or In home setting permitted	Unit= One Day Authorization 120 units per 120 days
Admission Criteria:	● Service must be referred by BSS ● Child remains in the custody of the WV BSS and is in foster care placement. ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement. ● May be used for children in foster care who are pregnant and/or parenting.
Continued Stay:	● Child remains in the custody of the BSS ● WV Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement.
Discharge Criteria	● Goals have been accomplished ● Family/youth is not participating ● No progress has been demonstrated ● Youth turns 19 years of age
Service Exclusions:	● Behavioral or mental health therapy ● Any transportation codes related to service provision ● Other parenting education programs

Clinical Exclusions:	● In active withdrawal ● In acute psychiatric care
Documentation:	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed within 15 days for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials ● A copy of the CPS Initial Assessment, and current Case Plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. BSS Standard Form must be used. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if

	family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Prerequisite/Minimum Provider Qualifications:

- Qualifications can vary for therapists, but to become an onsite Program Supervisor a minimum of master's level education is required. A formal certification must be present in provider/employee records.
- Trauma-informed care training.

*Agencies must sign an affiliate agreement indicating they will adhere to the Essential Requirements to meet model fidelity.

Home Study 130150

Definition: A home study is an assessment of an individual who has been identified as a potential foster/adoptive parent for a child who is in the custody of the department. A total assessment includes, but is not limited to, the home (health standards), personal history, education/preparation, family income, documentation of identity/status, employment status, health, police/criminal record check and references, coping skills, communication skills, attitude, support system, use of community resources, and emotional stability.

For Kinship/Relative Home studies the assessment consists of three units and includes at a minimum:
Criminal Background Checks
Child Abuse/Neglect Checks
Safety of the Home's Environment
Ability to Provide Protection
Child's Relationship with potential relative
Physical Health
Emotional Stability
Ability and willingness to support placement goals
Compliance with car seat safety
Ability and willingness to participate with MDT, Assessment and Case Planning
Understanding of and willingness to comply with BSS 's Discipline Policy
References
Recommendation

The following areas may also be added or requested at the time of referral to a Kinship/Relative Home Study as directed by the BSS Child Welfare Worker and consists of four units:
Personal history
Education/preparation
Family income
Documentation of identity/status
Employment status
Support system
Use of community resources

The BSS will stipulate the extent of the information required for each Home Study. This must be completed by a licensed provider recognized by the WV BSS.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Maximum of 4 Units = One Regular Study Maximum of 3 Units= One Relative Study
Maximum Total Authorizations Available	1 per home being studied
Admission Criteria	● Client desires to become a foster/adoptive parent. ● Client has completed and submitted a Foster/Adoptive Parent Inquiry Form or has contacted the local county BSS office.

	● Department recommends an assessment.
Continuing Stay Criteria	● Not Applicable
Discharge Criteria (Any element may result in discharge or transfer)	● Evaluation is completed. ● Client has been approved or rejected as a prospective placement.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If the study is for a group of siblings, bill service to one child and specify in report the entire sibling group.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	A completed home study adhering to BSS policy as outlined in foster care policy. There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the referral for socially necessary services must be present in the case record.

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree with social work licensure. Related degrees are:

- • Sociology
- • Psychology
- • Counseling
- • Interpersonal Communication
- • Human Services
- • Education
- • Criminal Justice
- • Board of Regents with an emphasis in Human Service
- • Gerontology
- • Family and Consumer Science **or**

• A master's degree in social work, counseling or psychology with licensure **and**

• Experience providing direct service to families

● All required trainings completed as indicated in the provider agreement **and**

• All providers must have an acceptable CIB through WV Cares with no negative comments **and**
• An APS/CPS screen completed with no negative information.
• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Contracted Home Study Guidelines for Partial Payments of a total Home Study:

1 Unit Activities include:

- Contact with family/individual either by telephone, mail, or in-person; or
- Some initial background check on family/individual completed; and
- Family/individual withdraws application or agency withdraws request for study; and
- Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor.

2 Units Activities include:

- Contact with the family/individual through an interview for the study; and
- First home safety check; or
- Contact with references by mail, telephone, or in-person; and
- Family/individual withdraws application or agency withdraws request for study or the family/individual's study has been denied; and
- Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor; and
- Contractor will need to submit a copy of the denial letter to the Homefinding Supervisor, when necessary.

3 Units Activities include:

- More than one in-person contact with the family/individual through an interview for the study; and
- Home safety checks completed; and
- Reference checks completed; and
- Family/individual withdraws application or agency withdraws request for study; and
- Contractor provides a partial written home study report; and/or
- Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor; and
- Contractor will need to submit a copy of the denial letter to the Homefinding Supervisor, when necessary.

4 Units Activities:

- All interviews completed with family/individual for the study; and
- Home safety checks completed; and
- Reference checks completed; and

- ❖ Home Study report completed and submitted to Homefinding Supervisor (including both approved and denied home studies); and
- ❖ Contractor will need to submit a copy of the denial letter to the Homefinding Supervisor, if the home was denied.

Contracted Kinship/Relative Home Study Guidelines for Partial Payments

1 Unit Activities include:

- ❖ Contact with family/individual either by telephone, mail, or in-person; or
- ❖ Some initial background check on family/individual completed; and
- ❖ Family/individual withdraws application or agency withdraws request for study; and
- ❖ Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor.

2 Units Activities include:

- ❖ Contact with family/individual in-person; and
- ❖ Some initial background check on family/individual completed; and
- ❖ Home safety checks completed.
- ❖ Assessment completed of the designated components/areas.
- ❖ Family/individual withdraws application or agency withdraws request for study; and
- ❖ Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor.

3 Units Activities include:

- ❖ Contact with family/individual in-person; and
- ❖ Criminal background check on family/individual completed; and
- ❖ Home safety checks completed; and
- ❖ Assessment completed of all ~~seven~~ designated components/areas.
- ❖ Family/individual withdraws application or agency withdraws request for study; and
- ❖ Contractor would need to submit a complete report to the Homefinding Supervisor.

Hourly Respite 130530

Definition: Planned or unplanned break for primary caretakers who are in challenging situations in which a trained provider, friend or family member assumes care giving and supervision of a child(ren) for a brief period of time. Service may be provided in or out of the natural home or on an hourly/daily basis. Temporary relief from parenting responsibilities is provided to avoid an abuse, neglect or abandonment situation or a placement disruption.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One hour 30 Units per 92 days Maximum 120 units (5 days)
Maximum Total Authorizations Available	4
Admission Criteria	● BSS Child Welfare Worker, family and BSS supervisor agree that the children can be maintained safely in the home. ● BSS Child Welfare Worker, family and BSS supervisor recommend this service. ● Family has explored appropriate social support system members capable of providing service to the identified client. ● A registered SNS provider must be utilized for Hourly Respite unless exceptional circumstances are documented.
Continuing Stay Criteria	● Parents/caretakers continue to display behaviors that were documented on the CPS Initial Assessment that indicated the need for a safety plan. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Family has explored appropriate social support system members capable of providing service to the identified client. ● Service continues to be needed to provide support to maintain client's placement as identified on the service plan. ● Case plan identifies the current plan is for the child to remain in the identified home.
Discharge Criteria (Any element may result in discharge or transfer)	● Parent requests discharge. ● Another service is warranted by change in the child's condition. ● Service is not able to maintain safety in home environment, resulting in a change of placement. ● No outlook for improvement with this level of service.

	● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client.
Service Exclusions	● Excludes placement at Emergency Shelters for children not in custody. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● The child can effectively and safely be treated at a lower level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● If a safety plan exists for this case, a copy of the current safety plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Individualized Parenting 130300

Definition: Direct face-to-face services to improve parental competence and knowledge of:

- Discipline
- Appropriate supervision
- Encouragement of child/adolescent care, age-appropriate development
- Realistic expectations and standards of child/adolescent behavior of identified child

This service should be used to correct specific deficits in parenting. This service is provided in a one-on-one setting and is highly individualized to meet the parents' needs. Specific examples include individualized behavior management techniques or understanding a child's specific mental or physical health condition. As the Bureau for Social Services moves toward quality outcome measures, providers are **required** as of 7/1/2026 to use an evidence-based parenting curriculum as applicable for each client. Some examples include Active Parenting, Positive Parenting, and Common Sense Parenting. Contact bsssnsprogram@wv.gov for the full list of WV BSS approved evidence-based parenting curriculums. This service is for children whose plan is for reunification and targets the family members of the expected discharge placement.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit = 1 hour 39 units per 92 days
Maximum Total Authorizations Available	4

Admission Criteria	● CPS Initial Assessment indicated parents' lack of basic parenting skills to maintain safety, health and wellbeing of children in their care is directly related to the child's placement into family foster care with Child Protective Services.
	● The plan is for family reunification.
	● Parent must demonstrate one or more of the following:
	  ○ Inappropriate expectations of the child/adolescent
	  ○ Inability to be empathetically aware of child/adolescent needs
	  ○ Difficulty assuming role of parent
	  ○ Lack of knowledge in feeding, bathing, basic medical care, and basic supervision
	● Case Plan documents a need for the service with specific goals and objectives identifying areas for improvement.
	● Service recommended by the MDT.
	● Service cannot be met through other community resources (as in disability specific support groups such as CHADD for those with ADHD) or family's support system.

Continuing Stay Criteria	● MDT reviews case and determines reunification is still appropriate. ● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● Service cannot be met appropriately through other community resources. ● MDT has reviewed the Case Plan and recommends the service continue. ● Family continues to lack a social support system capable of providing service to the identified client. ● The caretakers continue to lack skills required to ensure safety, permanency and wellbeing of the children removed from their care as initially displayed on the CPS Initial Assessment. ● The caretaker has demonstrated the acceptance that change is needed.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have substantially been met. ● Parent requests discharge. ● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client. ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of goals/objectives on the Case Plan. ● No outlook for improvement with this level of service. ● Reunification is no longer an appropriate option for the family.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● If more than one parent in the same household is involved with this intervention, bill the service through one parent. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of identified parent's issues precludes provision of services in this level of care. ● Severity of the parent's impairment due to a mental health condition(s) or substance use, misuse or substance use disorder problem(s) precludes provision of service in this level of care.

Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the CPS Initial Assessment, the Ongoing Assessment and Case Plan must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain:
Documentation continued	● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month ● If more than one parent present, document all participants in the intervention within the note.

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology
  - Psychology
  - Counseling
  - Interpersonal Communication
  - Human Services
  - Primary or Secondary Education
  - Criminal Justice
  - Board of Regents with an emphasis in Human Service
  - Gerontology
  - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and** an APS/CPS screen completed with no

negative information **and**

- All required trainings completed as indicated in the provider agreement **and**
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.
- Providers are advised that submission of verification regarding evidence-based curriculum training or certification to the Community Partnership Unit is required to continue providing Individuated Parenting services and is a prerequisite for reimbursement.

Intervention Travel Time 130105

Definition: This code is for reimbursing providers who are traveling to a destination to complete a home visit in which a Socially Necessary Service is being provided when the time to reach the destination from the providers business **exceeds one hour one way**. Mileage encumbered when transporting is billed separately. The service has been documented in the BSS 's child/family's service plan and all other natural supports/options have been explored.

Service Codes:

- Adult Skill Building
- Child Community Connection
- Connection Visit
- Court Attendance
- Daily Respite
- Family Time with Parent Coaching
- Home Study
- Hourly Respite
- Individualized Parenting
- MDT Attendance
- Pre-Reunification Support
- Supervised Family Time One
- Supervised Family Time Two
- Supervision for Temporary Lodging both Professional and Paraprofessional codes

This service covers actual time traveled using the shortest and/or quickest practical route to the traveler's destination. The billable service begins after the provider leaves their identified place of business and ends when provider reaches the family's home or identified location. If the provider is doing concurrent home visits, the time traveling from one home to the next must exceed one hour one way to be billed. It can't replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties. Maximum of 16 units per day are allowable.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit= 15 min 416 units per 92 days
Maximum Total Authorizations Available	4
Admission Criteria	● Provider has been referred one of the designated services
Continuing Stay Criteria	● Service continues to be recommended by the MDT ● Progress towards goals noted on BSS case plan has been documented
Discharge Criteria (Any element may result in discharge or transfer)	● No progress has been made ● Case is closed ● Family refuses in-home services ● Goals on the BSS case plan have been substantially met

Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Excludes tolls and parking ● Does not replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties. ● If multiple people are on one transport, they must be from the same case. The trip will be billed on the case member that is farthest distance from the identified destination. If a protection order is in place between members within the case, they must be transported separately. ● IDD waiver or ICF recipients are not eligible for this service ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS 's Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance. All trainings completed as indicated in the provider agreement.

Lodging 130120

Definition: Hotel or motel accommodation required for foster/kinship parents when transportation is authorized in extenuating circumstances. Lodging does not cover other convenience/entertainment services that may be available through the hotel/motel. Reimbursement will be for the least expensive single room rate available up to the current WV State rate. Charges incurred due to the failure of the transportation provider to notify the lodging facility of cancellation will be considered a personal expense of the provider. Specialized Foster Care agencies may receive referrals for this service on behalf of their foster homes and then reimburse their foster parents per their own agency policies.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	Unit = One night
Maximum Total Authorizations Available	As required
Admission Criteria	● Child must be in foster care placement with a permanency plan. Child must have an authorization in place for Transportation One, Two or Three. ● Extenuating circumstances exist related to distance, time and frequency. ● Service must be noted on the case plan. ● Goals/objectives must be present to address how utilization of this service will occur in the future. ● All transportation reimbursement for biological parents/guardians/foster/kinship placements are at the discretion of the BSS Child Welfare Worker.
Continuing Stay Criteria	● Progress toward goals/objectives has been made, but not satisfactorily achieved. ● Extenuating circumstances continue to exist related to distance, time and frequency. ● Permanency plan is still appropriate to receive this service.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals/objectives have been satisfactorily achieved. ● Child's case has been closed. ● Children has been adopted or reunified with family.
Service Exclusions	● Lodging referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for lodging reimbursement through this code. ● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service.

Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the visitation plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of hotel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Lodging Pre-Adoption Visit 130121

Definition: Hotel or motel accommodation required for foster/kinship parents when transportation is authorized in extenuating circumstances. Lodging does not cover other convenience/entertainment services that may be available through the hotel/motel. Reimbursement will be for the least expensive single room rate available up to the current WV State rate. Charges incurred due to the failure of the transportation provider to notify the lodging facility of cancellation will be considered a personal expense of the provider. Specialized Foster Care agencies may receive referrals for this service on behalf of their foster homes and then reimburse their foster parents per their own agency policies.

For mileage reimbursement with this service refer *Private Transportation Three* under the Foster Care Service Category.

Target Population	Child Protective Services
Program Option	Foster Care (pre-adoption)
Initial Authorization	92 Days Unit = One night
Maximum Total Authorizations Available	As required
Admission Criteria	● Permanency plan must indicate adoption. ● Documentation in the record that other sources, such as the family support system or public transportation, have been explored/exhausted. ● BSS worker must request this service. ● MDT must recommend this service. ● To receive reimbursement, family must be selected by adoption review committee.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted. ● MDT recommends the service continue. ● Permanency plan remains adoption.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.

Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes tolls, parking and waiting time. ● If more than one sibling/child is being transported, bill under one FACTS Client ID and note all present in documentation. ● All foster care providers are responsible for all costs associated with transportation not related to the following activities: MDT's, IEP's, court hearings, sibling visitation, relative visitation, biological parent visitation, foster/adoptive parent visitation, detention visits, residential placement visiting, placement changes, case staffing, and adoption promotion activities. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of hotel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

MDT Attendance 130455

Definition: Reimbursement for an agency/independent provider participating in the individual Multi-Disciplinary Team Meeting to present written reports of progress, answer questions and assist in establishing the appropriate plan for the identified child and/or family. Provider must be actively working with the client and submitting monthly summaries to the BSS worker. For Foster Care the child **must be** in WV BSS custody and/or it is mandated in BSS Policy or WV Statute.

Eligible for one representative per agency for:

- ASO Providers actively providing a treatment or safety service
- Mental Health Professionals providing direct treatment (Example: Therapist)

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One Meeting Three units per 92 days
Maximum Total Authorizations Available	4
Admission Criteria	● The identified parent's children were removed from the home due to abuse, neglect or abandonment issues. ● Youth is in the custody of the BSS
Continuing Stay Criteria	● Youth remains in the BSS 's custody. ● Youth or family is actively receiving services from a provider described as eligible from the above definition.
Discharge Criteria (Any element may result in discharge or transfer)	● Reunification has occurred and services were not ordered to continue after reunification
Service Exclusions	● Child Placing Agencies are not eligible for an SNS referral or authorization for this service. If this service is provided to families of children in their specialized or therapeutic homes, it is considered part of their bundled rate. ● A potential provider(s) considering possible placement of a youth. ● No individual fee for service code including Medicaid Clinic or Targeted Case Management may be billed concurrently while this code is being utilized. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a

	manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. The provider must be able to provide documentation showing they attended the MDT. This could be the sign-in sheet or any other type of documentation that would provide proof of their presence at the meeting. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and presented to the MDT and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Meals 130125

Definition: Food for one identified transportation provider. Meal reimbursement is intended for foster/kinship parents when transportation is authorized in extenuating circumstances. Reimbursement is limited to the actual expenses for food not to exceed the current state reimbursement rate for ASO Meals. Specialized Foster Care agencies may receive referrals for this service on behalf of their foster homes and then reimburse their foster parents per their own agency policies.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	Unit = One Day Cannot exceed three meals per one day
Maximum Total Authorizations Available	As required
Admission Criteria	● Child must be in foster care placement with a permanency plan. ● Child must have an authorization in place for Transportation One, Two or Three. ● Extenuating circumstances exist related to distance, time and frequency. ● Service must be noted on the service plan. ● All transportation reimbursement for biological parents/guardians/foster/kinship placements are at the discretion of the BSS Child Welfare Worker. ● Goals/objectives must be present to address how utilization of this service will occur in the future. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Continuing Stay Criteria	● Progress toward goals/objective has been made, but not satisfactorily achieved. ● Extenuating circumstances continue to exist related to distance, time and frequency. ● Permanency plan is still appropriate to receive this service.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals/objectives have been satisfactorily achieved. ● Child's case has been closed. ● Child has been adopted or reunified with family.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Expenses for entertainment and alcoholic beverages are not covered. ● Meal referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for meal reimbursement through this code. ● Those receiving Waiver or ICF/IDD services are not eligible for this service.

Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the visitation plan must be present in the case record. ● A copy of meal receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Meals Pre-Adoption Visit 130126

Definition: Food for one identified transportation provider. Meal reimbursement is intended for foster/kinship parents when transportation is authorized in extenuating circumstances. Reimbursement is limited to the actual expenses for food not to exceed the current state reimbursement rate for ASO Meals. Specialized Foster Care agencies may receive referrals for this service on behalf of their foster homes and then reimburse their foster parents per their own agency policies.
For mileage reimbursement with this service refer *Private Transportation Three* under the Foster Care Service Category.

Target Population	Child Protective Services
Program Option	Foster Care (pre-adoption)
Initial Authorization	92 Days Unit = One meal
Maximum Total Authorizations Available	As required
Admission Criteria	● Permanency plan must indicate adoption. ● Documentation in the record that other sources, such as the family support system or public transportation, have been explored/exhausted. ● MDT must recommend this service. ● All transportation reimbursement for biological parents/guardians/foster/kinship placements are at the discretion of the BSS Child Welfare Worker.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted. ● MDT recommends the service continue. ● Permanency plan remains adoption.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Expenses for entertainment and alcoholic beverages are not covered. ● Meal referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for meal reimbursement through this code. ● Those receiving Waiver or ICF/IDD services are not eligible for this service.

	● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the Case Plan and visitation plan must be present in the case record. ● A copy of meal receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Pre-Reunification Support 130440

Definition: This service is for children who are still placed in foster care settings but are beginning transitional overnight visits to the home from which they were removed. The purpose is to observe the interactions of the family as they adjust to being re-united in their own home and report to the BSS Child Welfare Worker and/or court regarding the family dynamics and give recommendations regarding the children being reunified. These observations are to be scheduled as well as random as determined by the MDT. The provider must be available to the family if assistance/modeling is needed including Saturday and Sunday. If a crisis arises that would require the possible removal of the child(ren) the BSS Child Welfare Worker must be notified immediately. Behavioral health services, preferably family therapy, should also be arranged for the family to support their adjustment to reunification. If possible, the same agency/individual that is providing services to the parents should be used to support the transition.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 Days Unit= One hour Maximum of four units per day 104 units
Maximum Total Authorizations Available	1
Admission Criteria	● Child remains in the custody of the WV BSS and is in foster care placement. ● MDT has reviewed the case and determined that reunification is appropriate and eminent. ● Service is noted on the BSS Case Plan ● Provider has established a written plan for the implementation of the service and co-ordination of any behavioral health services with the BSS and the BSS Child Welfare Worker.
Continuing Stay Criteria	● Not applicable
Discharge Criteria (Any element may result in discharge or transfer)	● Pre-reunification visits were not sustainable. ● Parental rights terminated. ● Child(ren) achieve permanent placement through reunification. ● Case is closed
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● In cases where more than one member of the family is receiving this service, bill under one identified child and reflect all present in the documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been

	granted by BSS. ● Pre-Reunification Support is not available if the client is still receiving supervised family time if safety concerns still warrant supervised family time, pre reunification support is not available. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the BSS Case Plan and provider's plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  • Sociology

- Psychology
- Counseling
- Interpersonal Communication
- Human Services
- Primary or Secondary Education
- Criminal Justice
- Board of Regents with an emphasis in Human Service
- Gerontology
- Family and Consumer Science **and**

• Experience providing direct service to families.
• Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
• All providers must have an acceptable CIB through WV Cares **and**
• An APS/CPS screen completed with no negative information **and**
● All trainings completed as indicated in the provider agreement **and**
• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Private Transportation One 130101

Definition: Private transportation one is designed to provide reimbursement for Kinship/Foster parent(s) who attend Multi-Disciplinary Team meetings, reviews, and court hearings explicitly documented on the BSS service plan.

Private Transportation One is also for reimbursement of biological parent(s) for mileage traveled to participate in visitation with child(ren), services/treatments, office visits, Multi-Disciplinary Team meetings, reviews, and court hearings explicitly documented on the BSS service plan.

This service can be used for the transportation of a foster child for medical services in which NEMT could **NOT** be accessed. Please note non-emergency medical transportation (NEMT) is utilized for medically necessary services. NEMT is accessed through Modivcare. It is the primary source for reimbursement for taking foster children to medical and behavioral appointments.
The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit= One mile 1000 units
Maximum Total Authorizations Available	As required
Admission Criteria	● Documentation of the Kinship/Foster Parent's/biological parent's inability to access NEMT and the subsequent reason must be in the consumer's record. ● Documentation of the parent's inability to financially bear the cost of travel associated with visitation with child, MDT's, and court hearings. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Safety plan or Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT must recommend this service.
Continuing Stay Criteria	● Foster/Adoptive Family continues to explore their social support system to provide the service. ● Biological parent continues to need financial assistance in order to attend treatment services, visitations with child, etc.

	● MDT recommends the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT agrees that the foster care placement is appropriate for the consumer.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Child is returned. ● Child is adopted or legal guardianship is completed. ● Kinship/foster family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● NEMT can be accessed. ● Excludes tolls, parking and waiting time. ● All foster care providers are responsible for all costs associated with transportation not related to the following activities: MDT's, IEP's, court hearings, sibling visitation, relative visitation, biological parent visitation, foster/adoptive parent visitation, detention visits, residential placement visits, placement changes, case staffing, and adoption promotion activities. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the Referral for Socially Necessary Services and receipts must be kept for submission to MDT if requested. ● A log of trips with date, miles and reason for trip.

Additional Service Criteria:

For relatives or non-custodial friends of the family, all credentialing and training requirements are waived. The expectations are that a family member or non-custodial friend of the family will ensure that they have a valid driver's license and minimum required insurance or will arrange the transportation with a member of their family's support group who has a driver's license, insurance, and no history of legal offenses that may endanger those being

transported.

Foster/Adoptive families are automatically eligible once they have been approved by the supervising agency. Specialized and Therapeutic Foster Care Agencies are responsible for submitting service requests to Acentra Health and reimbursing their foster families.

Private Transportation Two 130102

Definition: Reimbursement for transportation of children related to visitation with parents. Those eligible for this service must be documented in the visitation plan completed by the BSS Child Welfare Worker and visitation must be explicitly documented on the BSS child/family's Case Plan.

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit= One mile 1000 units
Maximum Total Authorizations Available	As required
Admission Criteria	● Permanency plan must indicate reunification or that there is a court order mandating visitation. ● Documentation that the family of origin/kinship/ foster family is unable to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation, have been explored/exhausted. ● Case Plan originated by BSS must document the need for this service. ● MDT must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family origin/Foster/Adoptive Family is unable to provide this service and the subsequent reason must be in the consumer's record. ● The family or origin/kinship/foster family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family of origin/kinship/foster family lacks support system to provide the service. ● MDT recommends the service continue. ● Permanency plan remains reunification or there is a court order mandating visitation.

Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Permanency has been obtained. ● Family of origin/kinship/foster family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes tolls, parking and waiting time. ● All foster care providers are responsible for all costs associated with transportation not related to the following activities: MDT's, IEP's, court hearings, sibling visitation, relative visitation, biological parent visitation, foster/adoptive parent visitation, detention visits, residential placement visits, placement changes, case staffing, and adoption promotion activities. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the Referral for Socially Necessary Services and receipts must be kept for submission to MDT if requested. ● A log of trips with date, miles and reason for trip.

Additional Service Criteria:

For relatives or non-custodial friends of the family, all credentialing and training requirements are waived. The expectations are that a family member or non-custodial friend of the family will ensure that they have a valid driver's license and minimum required insurance or will arrange the transportation with a member of their family's support group who has a driver's license, insurance, and no history of legal offenses that may endanger those being transported.

Foster/Adoptive families are automatically eligible once they have been approved by the supervising agency. Specialized and Therapeutic Foster Care Agencies are responsible for submitting service requests to Acentra Health and reimbursing their foster families.

Private Transportation Three 130103

Definition: Reimbursement for transportation for the purpose of the identified child attending visitation with pre-adoptive parents or adoption related activities explicitly documented on the BSS child's case plan.

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit= One mile 1000 units
Maximum Total Authorizations Available	As required
Admission Criteria	● Permanency plan must indicate adoption. ● Documentation in the record that other sources, such as the family support system, public transportation, have been explored/exhausted. ● Case Plan originated by BSS must document the need for this service. ● MDT must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted. ● MDT recommends the service continue. ● Permanency plan remains adoption.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes tolls, parking and waiting time. ● All foster care providers are responsible for all costs associated with transportation not related to the following activities: MDT's, IEP's, court hearings, sibling visitation, relative visitation, biological parent

	visitation, foster/adoptive parent visitation, detention visits, residential placement visits, placement changes, case staffing, and adoption promotion activities. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the Referral for Socially Necessary Services and receipts must be kept for submission to MDT if requested. ● A log of trips with date, miles and reason for trip.

Additional Service Criteria:

For relatives or non-custodial friends of the family, all credentialing and training requirements are waived. The expectations are that a family member or non-custodial friend of the family will ensure that they have a valid driver's license and minimum required insurance or will arrange the transportation with a member of their family's support group who has a driver's license, insurance, and no history of legal offenses that may endanger those being transported.

Foster/Adoptive families are automatically eligible once they have been approved by the supervising agency. Specialized and Therapeutic Foster Care Agencies are responsible for submitting service requests to Acentra Health and reimbursing their foster families.

Public Transportation One 130111

Definition: Reimbursement for the provision of transportation on buses, planes, and/or trains. This code may be used for local bus passes or long-distance bus tickets. Rental cars, tolls if a rental car is used, taxi fares and parking are also included in this service. This service can be used for bus passes for a parent attending visitation with their child. This service is for transportation to medical services in which NEMT could **not** be accessed and/or participate in services/treatment, office visits, Multidisciplinary Treatment team meetings, reviews, and court hearings explicitly documented on the BSS's service plan. The least costly means available must be utilized. An example includes a monthly bus pass instead of paying on a trip-by-trip basis. This service covers the fare for the shortest practical route to/from the traveler's destination.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit= Event
Maximum Total Authorizations Available	As required
Admission Criteria	● Documentation of the parent's inability to afford to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Documentation in the record that other sources, such as the family's support system, public transportation services, have been explored/exhausted. ● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT must recommend this service.
Continuing Stay Criteria	● Kinship/foster family lacks support system to provide the service. ● Family lacks support system to provide the service. ● MDT recommends the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT agrees that the foster care placement is appropriate for the consumer.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Kinship/foster family now has support system in place to provide the service. ● Family now has support system in place to provide the service.

	● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes waiting time ● NEMT can be accessed ● All foster care providers are responsible for all costs associated with transportation not related to the following activities: MDT's, IEP's, court hearings, sibling visitation, relative visitation, biological parent visitation, foster/adoptive parent visitation, detention visits, residential placement visiting, placement changes, case staffing, and adoption promotion activities. ● In cases where more than one member of the family is receiving this service, bill under one identified child and reflect all present in the documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of travel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Additional Service Criteria:

- Agencies and /or private companies providing this service must be regulated through the appropriate state or federal transportation department/accrediting body.
- Individual family members, children/youth, or people identified within the case record may be enrolled for this service as a means to obtain pre-paid transportation when a provider is not enrolled. The individual is responsible for reconciling the transportation with the WV BSS when the trip is completed. The BSS Child Welfare Worker must directly assist the family in the process of accessing pre-paid transportation.

Public Transportation Two 130112

Definition: Reimbursement for transportation of children related to visitation with parents in which tickets must be purchased for buses, planes, and/or trains. This code may be used for local bus passes or long-distance bus tickets. Rental cars, tolls if a rental car is used, taxi fares and parking are also included in this service. Those eligible for this service must be documented in the visitation plan completed by the BSS Child Welfare Worker and visitation must be explicitly documented on the BSS child/family's service plan. The least costly means available must be utilized. An example includes a monthly bus pass instead of paying on a trip-by-trip basis. This service covers the fare for the shortest practical route to/from the traveler's destination.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit= Event
Maximum Total Authorizations Available	As required
Admission Criteria	● Permanency plan must indicate reunification or there must be a court order mandating visitation. ● Documentation that the kinship/foster family of origin is unable to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family's support system, public transportation services, have been explored/exhausted. ● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but kinship/foster family still does not have a reliable means of transportation. ● The kinship/foster family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance. ● Family of origin lacks support system to provide the service. ● MDT recommends the service continue. ● Permanency plan remains reunification or there is a court order mandating visitation.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Permanency has been obtained. ● Kinship/foster family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.

Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes waiting time ● NEMT can be accessed ● All foster care providers are responsible for all costs associated with transportation not related to the following activities: MDT's, IEP's, court hearings, sibling visitation, relative visitation, biological parent visitation, foster/adoptive parent visitation, detention visits, residential placement visiting, placement changes, case staffing, and adoption promotion activities. ● In cases where more than one member of the family is receiving this service, bill under one identified child and reflect all present in the documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of travel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Additional Service Criteria:

- Agencies and /or private companies providing this service must be regulated through the appropriate state or federal transportation department/accrediting body.
- Individual family members, children/youth, or people identified within the case record may be enrolled for this service as a means to obtain pre-paid transportation when a provider is not enrolled. The individual is responsible for reconciling the transportation with the WV BSS when the trip is completed. The BSS Child Welfare Worker must directly assist the family in the process of accessing pre-paid transportation.

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Public Transportation Three 130113

Definition: Reimbursement for transportation for the purpose of the identified child attending visitation with pre-adoptive parents or adoption related activities explicitly documented on the BSS's child case plan in which tickets must be purchased for buses, planes, and/or trains. This code may be used for local bus passes or long-distance bus tickets. Rental cars, tolls if a rental car is used, taxi fares and parking are also included in this service. This code may also be used if the kinship/foster family is transporting the child/youth to activities to promote adoption such as attachment therapy. The least costly means available must be utilized. An example includes a monthly bus pass instead of paying on a trip-by-trip basis. This service covers the fare for the shortest practical route to/from the traveler's destination.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit= Event
Maximum Total Authorizations Available	As required
Admission Criteria	● Permanency plan must indicate adoption. ● Documentation in the record that other sources, such as the family's support system, public transportation services, have been explored/exhausted. ● BSS Child Welfare Worker must request this service. ● MDT must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted. ● MDT recommends the service continue. ● Permanency plan remains adoption.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Kinship/foster family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● May not be used for visits prior to placement in Specialized and Therapeutic Foster Homes. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes waiting time ● NEMT can be accessed ● All foster care providers are responsible for all costs associated with transportation not related to the following activities: MDT's, IEP's, court hearings, sibling visitation, relative visitation, biological parent visitation,

	foster/adoptive parent visitation, detention visits, residential placement visiting, placement changes, case staffing, and adoption promotion activities. ● In cases where more than one member of the family is receiving this service, bill under one identified child and reflect all present in the documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of travel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Additional Service Criteria:

- Agencies and /or private companies providing this service must be regulated through the appropriate state or federal transportation department/accrediting body.
- Individual family members, children/youth, or people identified within the case record may be enrolled for this service as a means to obtain pre-paid transportation when a provider is not enrolled. The individual is responsible for reconciling the transportation with the WV BSS when the trip is completed. The BSS Child Welfare Worker must directly assist the family in the process of accessing pre-paid transportation.

Supervised Family Time One 130771

Definition: Service in which visitation between family members (parent to child or child to child) is observed to ensure general safety and appropriate interaction is maintained during visitation. Visitation provider either looks in on visits between family members periodically (as determined by BSS visitation plan) or observes the visit while sitting in the room with the family members. Visitation provider will observe to ensure that no abuse, either physical or emotional, takes place during visitation. Provider will also ensure that parents do not inappropriately try to influence the child to recant prior statement to CPS/police officers. Provider will further ensure that family member visiting with the child continues to interact with the child during visitation instead of stepping outside to smoke or take phone calls, falling asleep or carrying on a conversation with the visitation provider instead of the child. During events such as these, the visitation provider will either re-direct the adult family member or if severe enough, end the visit after consultation with the child's assigned BSS Child Welfare Worker. If the visitation provider needs to contact the BSS Child Welfare Worker, they should take precaution to ensure that the visit is covered so that no further inappropriate interaction takes place while the visitation provider is out of the room contacting the BSS Child Welfare Worker. This type of visitation can be done at the family's home, an outdoor recreational setting, or in an office, whichever provides the needed safety of the children and provider.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One half hour 104 units per 92 days
Maximum Total Authorizations Available	4
Admission Criteria	● Children must have an open CPS case. ● The goal of visitation must be eventual reunification with parents and/or siblings or maintenance of family ties. ● If maintenance of family ties is the goal, then an alternative plan for supervision of the visit involving an informal/unpaid provider must be arranged for as soon as possible. ● MDT has reviewed the case and determined that visitation with parents/relatives should be supervised due to threats to the child's safety. ● The visitation plan notes that supervision is required.
Continuing Stay Criteria	● Progress toward goals/objectives has been documented, but not achieved. ● MDT recommends the service continue. ● Child remains in the custody of the BSS and safety threats that require supervision continue to be present.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been substantially met. ● Supervision of family time is no longer deemed necessary and unsupervised family time and or overnight visits have begun.

	● Child has been reunified with biological family. ● Parental rights have been terminated or are in the process of termination. ● Child's case is closed. ● Visitation is deemed detrimental to the child's safety and well-being.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● In cases where more than one member of the family is receiving this service, bill under one identified client and reflect all present in the documentation. ● Specialized and Therapeutic foster homes are to be the provider of this service for the youth residing in their homes; the SNS referrals for this service should be made to the Child Placing Agencies for the youth in their homes. ● The delivery of all Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials.

Documentation continued	● A copy of the CPS Initial Assessment, current Case Plan and BSS visitation plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month If more than one child present, document all participants in the intervention within the note.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All trainings completed as indicated in the provider agreement.

Supervised Family Time Two 130770

Definition: Service in which visitation between parents and children is observed to evaluate appropriateness and level of interaction. The observer/assessor will intervene if abuse or inappropriate behavior is occurring. The purpose is to assess and monitor the appropriateness of family interaction and possible reunification. The service must be identified on the service plan. Before each visit the provider will complete the following tasks:

- Meet with the child's caseworker to learn the child's needs as identified in the CPS/YS Safety plan and to jointly develop a specified needs list to be met during the initial visits.
    - Actions the provider must take to keep the child safe during visitation will be part of the list (e.g., if parent has a history of fondling child when they tickle the child or holds the child on their lap, then BSS Child Welfare Worker will tell provider not to allow the parent to tickle the child or have the child sit on the parent's lap). Also, things that the parent should bring to the visit like a well-stocked diaper bag if infant, food if the visit takes place during the child's lunch time or snack time, books or toys the child likes to have present when visiting with the parent will be included on this needs list. The provider will always suggest that the visitation take place in the parent's home and as soon as possible after the child was removed from the home. If the BSS Child Welfare Worker does not agree that the visitation can take place in the parent's home, the provider will document reason why that is not possible. If face-to-face visitation is not possible, the provider should discuss what other types of contact are possible between the parents and child such as letters, text messages, emails, phone calls, etc. (none of these can be supervised by the provider). Also, the provider will obtain the BSS Visitation Plan from the BSS Child Welfare Worker. If the provider is unable to obtain the plan, the provider will write a visitation plan.
- Call Resource/Foster Parents to obtain information related to the impact of separation on the child and the child's behaviors in order to refine the list of needs to be met during visits. Provider will discuss any behaviors the child has been exhibiting leading up to the visit. Provider will inquire about what the Resource/Foster Parent did to prepare the child for the visit each time. This preparation needs to be consistent with the court order, if it is specific.
- Contact parent(s) to confirm the visit time and place, identify any barriers to visits and arrange to meet with the parent one hour before the visit. During this time, the provider will collect any letters or cards, gifts, etc. that the parent has brought for the child to inspect them and check for appropriateness. If any questions, provider will explain to parent that the item or items will be kept by provider until they have inspected them with the BSS Child Welfare Worker. If there are items from the last visit that were not approved by the worker, the provider will give them back and instruct the parent that if they have any questions why there not approved, to contact the BSS Child Welfare Worker. Provider and BSS Child Welfare Worker will meet with parents to explain what is expected of them during the visitation – such as not discussing the court case with the child, not speaking negatively about the Resource/Foster Parents, showing up on time, calling to cancel well in advance if unable to attend the visit, the need to remain the parent during the visit meaning that the parent is in charge of controlling their child during the visit, pacify the child if child becomes upset during the visit, no cell phone usage during the visit, no unapproved visitors, and in general making the most of the visit time. The provider will explain to the parent that the provider will not be interacting with the parent during the visit, only observing, so that the parent does not become upset if the provider does not "visit" with the parent.
- Notify the Resource/Foster Parent(s) of the planned visit and schedule transportation as needed. Provider will always ask if the Resource/Foster Parents can transport the child to the visit or at least part of the way to the visit.

By the end of the first month, the provider will have arranged visitations to continue as documented in the Child's Case Plan by:

- Clarifying what needs must be met during future visits.
- Deciding what special arrangements will be made for visits.
- Identifying the level of support the parent requires during visits and consider who might replace the visitation specialist in the future, such as Resource/Foster Parent, family member, etc.
- Arranging for transportation as necessary, even in those cases when it is determined that continued supervision of visits is unnecessary.
- Maintaining weekly contact with the BSS Child Welfare Worker to update placement information.

The provider will perform the following functions for each visit:

- Meet with the parent before the visit to help the parent anticipate their own and the child's reactions during the visit and to discuss the needs to be met during the visit.
- Assist the parent as necessary during the visit.
- Meet with the parent after the visit to discuss how the parent met the child's needs and to plan changes in the next visit.
- Help the parent understand the importance of keeping his or her commitment to visit the child.
- Speak with the Resource/Foster Parent after the visit to discuss any behaviors or for the child reactions the child may display.
- Prepare notes about the parent's skill in meeting the child's needs during the visit and continuously refine the needs list.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One half hour 104 units per 92 days
Maximum Total Authorizations Available	2
Admission Criteria	● MDT has reviewed the case and determined that visitation with parents/relatives needs to be supervised due to threats to child's safety **and** ● The case requires that SNS provider make assessment and recommendation as to if reunification is possible/advisable. ● The visitation plan notes that supervision is required. ● The Case Plan indicates what specific issues are to be observed during the visits. ● The needs list indicates what specific issues are to be monitored/observed during the visitations.
Continuing Stay Criteria	● Progress toward goals/objectives has been documented, but not achieved. ● MDT recommends the service continue.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been substantially met. ● Child has been reunified with biological family. ● Supervision of family time is no longer deemed necessary and unsupervised family time and/or overnight visits

	have begun. ● Parental rights have been terminated or are in the process of termination. ● Child's case is closed. ● Visitation is deemed detrimental to the child's safety and well-being.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● In cases where more than one member of the family is receiving this service, bill under one identified client and reflect all present in the documentation. ● Specialized and Therapeutic foster homes are to be the provider of this service for the youth residing in their homes; the SNS referrals for this service should be made to the Child Placing Agencies for the youth in their homes. ● The delivery of all Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials ● A copy of the CPS Initial Assessment, current Case Plan and BSS visitation plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month If more than one child present, document all participants in the intervention within the note.

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  • Sociology
  • Psychology
  • Counseling
  • Interpersonal Communication
  • Human Services
  • Primary or Secondary Education
  • Criminal Justice

- Board of Regents with an emphasis in Human Service
- Gerontology
- Family and Consumer Science **and**

• Experience providing direct service to families.
• Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
• All providers must have an acceptable CIB through WV Cares **and**
• An APS/CPS screen completed with no negative information **and**
- All trainings completed as indicated in the provider agreement **and**

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Step-By-Step Parenting Program 130905

Definition: Utilizing skill sets and materials obtained through the Step-by-Step Parenting Program Workshops to provide direct face-to-face services to improve parental competence and knowledge of:

- Home Safety and First Aid
- Parent-Child Interactions
- Problem Solving
- Discipline
- Appropriate supervision
- Encouragement of child/adolescent care, age-appropriate development
- Realistic expectations and standards of child/adolescent behavior of identified child

This service should be used to correct specific parenting skill deficits for parents with learning differences. This can include parents with intellectual disabilities, acquired brain injury, slow learners, learning disabilities, and low reading skills. This service is provided in a one-on-one setting and is highly individualized to meet the parent's needs. Specific examples include individualized behavior management techniques or understanding a child's specific mental or physical health condition. Providers will utilize the Step-by-Step Parenting Program Manual as well as the step-by-step checklist to assess and teach child-care skills to parents. As the Bureau for Social Services moves toward quality outcome measures, providers are required to attend the Step-by-Step Parenting Program Workshop before services can start.

Goals of the Program:

- Objectively identify impediments and supports to successful parenting, and specific parenting skill deficits, to design a comprehensive family intervention.
- Help the family organize supports and services to meet the family's needs and keep the child safe.
- Increase parenting skills to reduce the risk of, or actual, child neglect through in-home step-by-step parent training.
- Improve child health, development, and behavior problems related to parenting skill deficits.
- Have the parents maintain learned skills over time.
- Have the parents generalize learned skills to all situations in which they are needed.
- Reduce need for out-of-home care placements and permanent removal of the child.
- Help parents to decrease reliance on paid supports.
- Help parents to develop a natural support network for the family.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	• 92 days • Unit = One hour • 39 units per 92 days
Maximum Total Authorizations Available	4

Admission Criteria	**Admission Criteria** 1. Parent must demonstrate one or more of the following: a. Learning difficulty and/or an IDD Condition b. Inappropriate expectations of the child/adolescent c. Inability to be empathetically aware of child/adolescent needs d. Difficulty assuming role of parent e. Lack of parenting skills, parents with learning differences, risk of child neglect, risk of child developmental delay and behavior problems f. Lack of knowledge in feeding, bathing, basic medical treatment, and basic supervision –**and** - 1. Treatment plan documents a need for the service with specific goals and objectives identifying areas for improvement. 2. Service recommended by the BSS Worker, family, and BSS Supervisor. 3. Service cannot be met through other community resources. 4. CPS Initial Assessment was completed and indicated the child could not be maintained safely in their home for foster care.
Continuing Stay Criteria	• Progress toward treatment plan goals/objectives is documented but has not been achieved. • BSS worker, family and BSS supervisor recommend the service continue and agree that the current placement is still appropriate. • Service cannot be met appropriately through other community resources. • The caretaker continues to display behaviors documented on the CPS Initial Assessment.
Discharge Criteria (Any element may result in discharge or transfer)	• Goals and objectives have been met substantially. • Parent requests discharge. • Another service is warranted by change in the family's condition. • No outlook for improvement within this level of service.
Service Exclusions	• No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. • If more than one parent in the same household is involved with this intervention, bill the service through one parent. • Those receiving ICF/IDD services are not eligible for this service. • The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a

	currently valid BSS Case Plan or written permission has been granted by BSS. • Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	• Severity of child's issues precludes provision of services in this level of care. • Parent's individual mental health impairments and/or substance or alcohol abuse preclude provision of service in this level of care. • Lack of social support systems indicates that a more intensive service is needed.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes: • Code or service name • Summary of the intervention • Client's response to the intervention • Relation to the service plan • Location where service occurred • Duration • Start/stop time • Signature of the provider and his/her title or credentials A copy of the CPS Initial Assessment, treatment plan and current safety plan must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart and one sent to the referring worker. This monthly progress report must contain: • A list of dates of service and the specific services rendered and/or attempts • Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention • Plan for further interventions • Any identified unmet concrete or service needs • Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
    - Sociology
    - Psychology

    - Counseling
    - Interpersonal Communication
    - Human Services
    - Primary or Secondary Education
    - Criminal Justice
    - Board of Regents with an emphasis in Human Service
    - Gerontology
    - Family and Consumer Science **and**
- Experience providing direct service to families.
- **Staff must also show proof of attendance for the Step-by-Step Parenting Program Workshop and The Family Game Workshop.**
- Staff person must be under supervision of a licensed social worker, counselor, or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and a**n APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Supervision for Temporary Lodging 130701

Definition: "Eyes on" oversight required to provide appropriate supervision of child unable to be placed in an emergency child shelter, foster home, or other placement and currently residing in a hotel. The identified child must be within the defined boundary in which the provider can intervene immediately if needed to ensure the child's safety. Two adult personnel must be present, awake and alert during their shift and must ensure compliance with written plan for the child during the temporary lodging. **Two staff** must be present during each shift but may be a combination of DoHS staff, SNS agency staff from the same agency or SNS staff from different agencies. Any medications for the children will be required to be kept in a lock box and out of reach of the children. Staff to child ratios may be 2 staff to up to 4 children if hotel room has 4 separate beds available. Any approved activities and/or travel to and from activities for the children during the stay should be outlined in documentation from the BSS Child Welfare Worker.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	30 days Unit = one hour 1488 units per 30 days with max of 744 hours per staff person
Maximum Total Authorizations Available	2 per episode of loss of placement
Admission Criteria	● Child is in DoHS BSS custody; -**and**- ● Child's placement has disrupted and no traditional placement such as a foster home, emergency child shelter, or residential treatment facility is available to provide care for the child and the child must reside in a hotel; - **and** - ● Service cannot be met appropriately through other community resources, family support system and/or agency. ● Siblings may stay in the same hotel room together unless the BSS Child Welfare Worker asserts it is inappropriate due to case circumstances. ● Each child must have their own bed in the hotel room and be in the bathroom separately. ● Only siblings can stay in the same room together. ● Any approved activities and transportation to and from activities must be outlined in documentation from BSS Child Welfare Worker.
Continuing Stay Criteria	● Progress toward placing child in a shelter, treatment facility, family setting, or hospital has been documented but has not been achieved. ● Service continues to be needed to maintain client's need for supervision. ● No less restrictive service/intervention is available. ● MDT recommends the service continue. ● Services cannot be met appropriately through other community resources, such as workforce investment or literacy groups, family support system and/or agency.

Discharge Criteria (Any element may result in discharge or transfer)	● Child has been placed in a shelter, treatment facility, family setting, or hospital. ● Service can now be met through a community resource, family support system and/or agency. ● A less restrictive service/intervention is available.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving ICF/IDD or group foster care services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● This service cannot be implemented during school/day care hours if child is enrolled or should be enrolled and attending school.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● A case note must be completed for each service event **by each SNS staff member present** that includes ● Code or service name ● a summary of the intervention ● client's response to the intervention ● relation to the case plan ● location where service occurred ● duration ● start/stop time ● signature of the provider and their title or credentials. ● A copy of the child's plan of care while without placement, CPS Initial and/or Ongoing Assessment, and a current Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A monthly progress summary must be completed and received by the BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This

	monthly progress report must contain: ● A list of dates of services and the specific services rendered and/or attempts; ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to the intervention; ● Plan for further interventions.

Additional Service Criteria:

- Staff providing this service may be paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist or counseling license who has two years post college experience providing direct service to families.
- All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Transportation Time 130104

Definition: This code is for providers whose only service is transporting a BSS client(s). These providers/transports are not associated with their own provision of a socially or behavior health medically necessary service. The provider is not engaged in an otherwise billable activity. Mileage encumbered when transporting is billed separately. The service has been documented in the BSS 's treatment/safety plan and all other natural supports/options have been explored including BSS staff and are not available for this event.

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination.

Activities:

- Drugs Screens
- Visitations with extenuating circumstances for Kinship/Foster Parents
- Not eligible for NEMT

The billable service begins when the provider leaves their identified place of business or home, whichever is shortest, and ends when provider returns to this location. Waiting time at the identified destination is included. The maximum number of hours this service may be provided in a 24-hour period is 12 hours or 48 units. Ten hours for when consumers are in the vehicle and up to 12 hours total. If an overnight trip is required, no more than 12 hours or 48 units may be invoiced. When not in the vehicle, the provider must remain at the location with the client.

If Non-Emergency Transport (NEMT) is available, this service may not be used. It can't replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties.

No providers may utilize this service to transport a child to a residential placement in or out of state.

Target Population	Child Protective Services
Program Option	Foster Care
Initial Authorization	208 units/92 days Unit= 15 minutes Maximum of 48 units within a 24-hour period
Maximum Total Authorizations Available	4
Admission Criteria	● Documentation of the Resource/Foster Parent's inability to access NEMT and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted.

	● Service plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT must recommend this service.
Continuing Stay Criteria	● Foster/Adoptive Family continues to explore their social support system to provide the service. ● MDT recommends the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT agrees that the foster care placement is appropriate for the consumer.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Foster/Adoptive Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● Excludes tolls and parking ● NEMT is available ● Does not replace the responsibility of Resource/Foster parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties. ● IDD waiver or ICF recipients are not eligible for this service. ● Residential Homes and transitional living programs for vulnerable youth should follow the directions in the annual agreements with the Department to determine eligibility for children in their care. ● No providers may utilize this service to transport a child to a residential placement in or out of state. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS 's current safety plan and/or Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance. All required trainings completed as indicated in the provider agreement.

If multiple people are on one transport, they must be from the same case. The trip will be billed on the case member that is farthest distance from the identified destination. If a protection order is in place between members within the case, they must be transported separately.

CPS Chafee Foster Care Independence Program

Only to be used for youth who are State Wards, between the ages of 17 to 23 who are participating in a transitional living program, usually through a facility such as Daymark, Youth Services System or Home Base.

Chafee Foster Care Independence Program: Transitional Living Placement- Pre-placement Activities 135500

A transitional living placement is a grouping or bundle of services targeted for those youth seventeen or older that are likely to remain in foster care who wish to practice living semi-independently prior to final discharge from the foster care system. Experiential learning opportunities are available for these youth through the transitional living placement option in which foster care youth establish their own household, complete educational goals and/or enter the work force in the community and are supplied with the following support, supervision and services: ongoing social casework; continued life skills instruction; assistance with career planning, employment, and job maintenance; scheduled face-to-face contact between the youth and caseworker in addition to regular phone contact; weekly planned and unannounced home visits; and linkage to medical and behavioral health services. As the tasks and responsibilities are achieved, youth gain more autonomy and require less supervision. The program serves to support the transition and to complement the individual's own efforts to achieve self-sufficiency. Supports are provided to the participants through the following activities: monitoring, adult life skills, crisis response and transportation. The provision of this group of services will be detailed in the youth's Transitional/ Learning Plan and individualized to meet their unique strengths and/or needs. Youth's participation in this service must be voluntary.

Pre-placement activities include assistance in locating housing, furniture and other household items, connecting utilities and developing the youth's budget. Other activities directly related to helping the youth with the move from foster care to the community are also completed within this service. **This service begins thirty (30) days before the actual TL placement occurs.**

**If the youth presents with a need for Targeted Case Management or supportive counseling, refer to service definition in the Medical UM and when youth is ready to continue life skills, you can refer back to this service.*

Target Population	Child Protective Services
Program Option	Chafee Foster Care Independence Program
Initial Authorization	30 days Unit = one hour 60 units per 30 days
Maximum Total Authorizations Available	1
Admission Criteria	● Provider agency must have a child-placing license. ● Youth meets eligibility criteria for Chafee Program by being between 17 and 23 with the department making boarding care payments to an approved foster care provider at the time of referral **–or-** youth is former foster care child who left care after the age of 18 years. ● Youth is pursuing an educational or vocational goal or has completed an educational and/or vocational program, but continues to need assistance with housing, employment placement and retention of health benefits (under this situation placement is limited to six months). ● Permanency plan is independence.

	● MDT reviews the service or if no MDT, BSS Child Welfare Worker and supervisor reviewed the service. ● Youth is demonstrating responsible behavior in present placement (e.g. no acute behavior problems, no recent or current charges for assault or violent behavior, etc.). ● Youth is capable/willing to learn how to keep a weekly planner to document forty hours of structured and planned activities per week that focus on improving chances of self-sufficiency. ● Youth has successfully completed the required Casey Life Skills Assessment and accompanying modules necessary for placement or will do so within first thirty days of the placement. ● Transition Plan provides specific objectives to be met and skills to be addressed with the Casey Life Skills Assessment.
Continuing Stay Criteria	● Not Applicable
Discharge Criteria (Any element may result in discharge or transfer)	● Youth has been established within their transitional living placement. ● Youth has turned 23 years old. ● Another more appropriate service has been identified due to the child's behavior or lack of ability to reasonably accomplish identified objectives. ● Youth violates terms of the FC-18 agreement. ● Youth exits foster care system.
Service Exclusions	● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● If crisis services are assessing danger to self or others, Medicaid Crisis Intervention should be utilized. ● If skill deficits are not age appropriate or the youth previously had the skill but lost it due to a chronic and persistent mental illness, an assessment to determine if Medicaid Basic Living Skills is appropriate should occur.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention

	● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. A copy of the BSS 's service plan/Transition Plan must be present in the case record. ● A PEDDL List must be obtained for each consumer from the BSS Child Welfare Worker and maintained as part of the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client receiving the service. Please include if client continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect (CPS) or behavioral issues (YS) were reported within the month if client is in BSS custody and under 18

Additional Service Criteria:

Agency must have a child-placing license.

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology
  - Psychology
  - Counseling
  - Interpersonal Communication
  - Human Services
  - Education
  - Criminal Justice
  - Board of Regents with an emphasis in Human Service
  - Gerontology
  - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and a**n APS/CPS screen completed with no negative information **and**

- All required trainings completed as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

For Paraprofessional staff providing Chafee oversight and transportation

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information.
- All required trainings completed as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Chafee Foster Care Independence Program: Transitional Living Placement 135501

This is a grouping or bundle of services targeted for those youth seventeen or older that are likely to remain in foster care who wish to practice living semi-independently prior to final discharge from the foster care system. Experiential learning opportunities are available for these youth through the transitional living placement option in which foster care youth establish their own household, complete educational goals and/or enter the work force in the community, and are supplied with the following support, supervision and services: ongoing social casework; continued life skills instruction; assistance with career planning, employment, and job maintenance; scheduled face-to-face contact between the youth and caseworker in addition to regular phone contact; weekly planned and unannounced home visits; and linkage to medical and behavioral health services. As the tasks and responsibilities are achieved, youth gain more autonomy and require less supervision. The program serves to support the transition and to complement the individual's own efforts to achieve self-sufficiency. Supports are provided to the participants through the following activities: monitoring, adult life skills, crisis response and transportation. The provision of this group of services will be detailed in the youth's Transition Plan and individualized to meet their unique strengths and/or needs. Youth's participation in this service must be voluntary.

Chafee Oversight is the process of observing a youth through scheduled and unannounced face-to-face visits or phone calls to check for progress and adherence to the service plan. Monitoring for a brief time period will be done in the youth's home, educational/vocational setting, or community. The service plan must indicate the explicit purpose as well as dictate the exact behaviors/objectives to be monitored.

Crisis Response is a face-to-face or phone intervention in the consumer's environment to assess and/or de-escalate an emergency. This service may target environmental situations that have escalated to the point that safety, permanency and/or well-being of a child or the community may be at risk. This service is available twenty-four hours a day, seven days a week. This service responds to the current crisis, identifies ways to address issues in the future, and is used when the youth is unable to resolve an emergency situation.

Transportation: Provision of transportation services for the purpose of attending school or work in rural areas without public transportation. Note: Apartments are to be located so as to provide reasonably convenient access to schools, places of employment, transportation, and other services required by the youth. The client must be present in the vehicle for this service to be provided. Transporting a client is not considered a part of the required monitoring.

Adult Skill Building: Direct service in which the child is assisted to enhance home management skills, life skills and social/emotional support networks through hands-on implementation and role modeling. * This service continues to enhance the skills needed to meet adult role expectations and carry out activities of daily living acquired through previous foster care placements (residential or family setting). Adult life skills are intended to improve the capacity for solving problems and resolving conflicts. Activities include career planning skills, life skills development, home management (includes budgeting, how to do laundry, etc.), food management, health/wellness, personal appearance/ hygiene, interpersonal skills, legal skills, and community awareness. The youth's areas of skill deficit are identified through the Casey Life Skills Assessment. The youth, with assistance, develops a Transition Plan to improve these skills unless there is documentation that the youth has previously mastered certain areas. Calculation of productivity hours is also to be included. This service is intended to increase self-sufficiency. Note: Budgeting is required at least one time monthly to review financial statements, passbook information, and to prepare and submit youth's subsidy budget to BSS.

**If the youth presents with a need for Targeted Case Management or supportive counseling, refer to service definition in the Medical UM and when youth is ready to continue life skills, you can refer back to this code.*

Target Population	Child Protective Services
Program Option	Chafee Foster Care Independence Program
Initial Authorization	92 days Unit = one hour 60 units per 92 days
Maximum Total Authorizations Available	Until youth's 23rd birthday
Admission Criteria	● Provider agency must have a child-placing license. ● Youth meets eligibility criteria for Chafee Program by being between 17 and 23, and the department is making boarding care payments to an approved foster care provider at the time of referral **–or-** youth is former foster care child who left care after the age of 18 years. ● Youth is demonstrating responsible behavior in present placement (e.g. no acute behavior problems, no recent or current charges for assault or violent behavior, etc.). ● Youth is pursuing an educational or vocational goal or has completed an educational and/or vocational program, but continues to need assistance with housing, employment placement and retention of health benefits (under this situation placement is limited to six months). ● Youth is capable/willing to learn how to keep a weekly planner to document forty hours of structured and planned activities per week that focus on improving chances of self-sufficiency. ● Youth has successfully completed the required Casey Life Skills Assessment modules necessary for placement or will do so within the first thirty days of the placement. ● Permanency plan is for independence. ● Transitional/Learning Plan specifies the objectives to be met, and skills to be addressed with the Casey Life Skills modules
Continuing Stay Criteria	● Progress toward the needs and case plan goals on the Transitional/ Learning Plan has been documented, but not reasonably accomplished. ● MDT has reviewed service plan or if no MDT exists, service was reviewed by BSS Child Welfare Worker and supervisor.
Discharge Criteria (Any element may result in discharge or transfer)	● Progress toward the needs and case plan goals on the Transitional/ Learning Plan has been documented and reasonably accomplished **–or-** ● Youth has turned 23 years old. ● Another more appropriate service has been identified due

	to the client's behavior or lack of ability to reasonably accomplish identified objectives. ● Youth violates terms of the FC-18 agreement. ● Youth exits foster care system.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● In assessing danger to self or others, Crisis Services should use Medicaid Crisis Intervention. ● If skills are not age appropriate or the youth previously had the skill, but lost it due to a chronic mental illness, Medicaid Basic Living Skills should be used.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A copy of the BSS 's service plan/Transition Plan must be present in the case record. ● A PEDDL List must be obtained for each consumer from the BSS Child Welfare Worker and maintained as part of the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client receiving the service. Please include if

	client continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect (CPS) or behavioral issues (YS) were reported within the month if client is under 18 and in BSS custody

Additional Service Criteria:
Agency must have a child-placing license

For adult life skills and family crisis response

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology
  - Psychology
  - Counseling
  - Interpersonal Communication
  - Human Services
  - Education
  - Criminal Justice
  - Board of Regents with an emphasis in Human Service
  - Gerontology
  - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through **and a**n APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

For Chafee Oversight and Transportation

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Agency Transportation Chafee 135106

Definition: This code may be utilized for providers' mileage encumbered when Child Protective Services Chafee Services have been implemented within the child/youth's home and the permanency plan is Independence and/or emancipation.

If a provider is unable to deliver the identified service upon traveling to the home, this code may be billed up to three times within the ninety-two (92) day authorization period when the following conditions are met:

- The provider/agency has a policy and procedure regarding the expectations of the youth being served. The importance of keeping scheduled appointments, notifying the provider when an appointment needs to be cancelled and the means in which the BSS will be notified if appointments are not kept are reviewed with the client(s).
- The provider/agency has a policy and procedure about notifying the Department regarding youth's non-compliance with established scheduled appointments.
- There is documentation of the visit being scheduled within the case record.

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Child Protective Services
Program Option	Chafee Foster Care Independence Program
Initial Authorization	92 days Unit = one mile 1000 units
Maximum Total Authorizations Available	Until youth's 23rd birthday
Admission Criteria	● Youth meets eligibility criteria for Chafee Program by being between 17 and 23 with the department making boarding care payments to an approved foster care provider at the time of referral **–or-** youth is former foster care child who left care after the age of 18 years. ● Youth is pursuing an educational or vocational goal or has completed an educational and/or vocational program, but continues to need assistance with housing, employment placement and retention of health benefits (under this situation placement is limited to six months). ● Permanency plan is independence. ● MDT reviews the service or if no MDT, BSS Child Welfare Worker and supervisor reviewed the service.
Continuing Stay Criteria	● Progress toward the needs and case plan goals on the service plan has been documented, but not reasonably accomplished. ● MDT has reviewed service plan or if no MDT, BSS Child Welfare Worker and supervisor reviewed the service.

Discharge Criteria (Any element may result in discharge or transfer)	● Progress toward the needs and case plan goals on the service plan has been documented and reasonably accomplished ● Youth has turned 23 years old. ● Another more appropriate service has been identified due to the youth's behavior or lack of ability to reasonably accomplish identified objectives. ● Youth violates terms of the FC-18 agreement. ● Youth exits foster care system.
Service Exclusions	● NEMT is available for Medical Appointments ● Public Transportation is accessible for youth ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. A copy of the BSS 's service plan/Transition Plan must be present in the case record. ● A PEDDL List must be obtained for each consumer from the BSS Child Welfare Worker and maintained as part of the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance. All required trainings completed as indicated in the provider agreement.

Transition to Adulthood Program Tier One 135511

Coached Community-Based Independent Tier

Definition: The Transition to Adulthood Program (TAP) is a variety of services to aid youth when they transition from foster care to adulthood and self– sufficiency. This is a three tired program where the youth must successfully complete the previous tier before moving on to the next phase.

Services- This is a list of services that the TAP agency will provide to the youth in Tier 1.

- The Transition to Adulthood provider must at intake:
  - Request the names and contact information for any appropriate adult who is willing to be a support to the youth.
  - Begin family network building activities at intake and involve identified supports in all aspects of the youth's plan throughout their stay in the program
  - Utilize Family Finding (Kevin Campbell) practice strategies to search and identify meaningful relationships for the youth
  - Assess and determine the type and level of role any identified support may be able to fill. It is important to understand these roles may change over time
  - Assess and determine the type and level of role any identified support may be able to fill. It is important to understand these roles may change over time
- Inform youth of their expectations
- Complete a Life Skills assessment within 30 days of admittance, every 6 months thereafter while the youth remains on the tier and again 30 days prior to discharge to the next tier.
- Utilize the assessment to develop a transition plan on areas that the youth needs to work on within 10 days of the completion of the Life Skills Assessment.
- Transition Plans will be revised every 90 days.
- Ensure youth progresses through verifiable milestones as listed on the transition plan which should be specific to the goals of education, employment, housing, linkage to community resources and services, and any other item which will lead to youth to independence.
- Secure Housing, single occupancy not required.
  - Youth may have roommates, but they must be approved by the youth's Child Welfare worker and must contribute to the household's finances equally.
- Ensure youth has a high school diploma or equivalent.
- Ensure youth obtains and maintains a banking account.
- Assist youth in obtaining employment.
- Connect youth to services through Economic Services.
- Assist youth with obtaining a driver's license.
- Assist youth with voter registration.
- Ensuring youth has reliable transportation and back up transportation if needed.
- Provide weekly face-to-face contact for the first 90 days. After the 90 days are over this can change to a minimum of once every 2 weeks depending on the needs of the youth. During the

weeks the youth is not seen face-to-face there will be at least one (1) telephone call per week to determine how the youth is progressing and identify any barriers to achieving their goals .

- Provide youth with a monthly subsidy of $900. This cost was factored into the per diem rate. Start-up funds up to $3,500 will be provided to the youth to cover expenses such as first/last month's rent, security deposit, furniture, household items, groceries and toiletries. This will be invoiced to BSS by the provider. The invoice will include an itemized list of items purchased/paid for with receipts. Additional funding may be approved on a case by case basis but must be part of a transition plan, and approved by the BSS TL Unit prior to purchase.

Objectives and Goals – Youth will meet all items listed below and under this tier for a minimum of 12 months before advancing to the next tier.

- Obtain High School Diploma or equivalent.
- Maintain employment for at least three months with one employer.
- Demonstrate an understanding of caring for their medical health needs by:
  - Knowing when it is appropriate to seek medical attention
  - Knowing where to seek medical attention
  - Knowing how to make a Dr. appointment
  - Knowing where and how to have a prescription filled and follow prescription instructions
  - Knowing how to pay a copay.
- Demonstrate the ability to budget money for groceries and meal planning.
  - Demonstrate the ability to develop and adhere to a budget
- Demonstrate proper management of a bank account by.
  - Maintaining a minimum balance to cover unexpected expenses
  - Avoiding overdraft fees
- Meet the transition plan steps set forth by the Life Skills assessment.

Target Population	Child Protective Services
Program Option	Chaffee
Initial Authorization	365 days Unit = one day 365 Units
Maximum Total Authorizations Available	1
Admission Criteria	• Those youth who remain in care after age 18; • Those youth who were former foster youth, left at the age of 18 or older, and request to return to foster care after age 18, through the age of 23 and; • Those youth whose parental rights have been terminated, were in foster care immediately prior to a BJS placement and left BJS at age 18 or older. The BSS must be notified of a

	plan and be notified of MDTs six months prior to discharge from BJS. • Youth must sign the Continued Foster Care Services Agreement for Youth Over Eighteen (FC-18) to be eligible for the program. All FC-18 approval requests must be sent to the Transitional Living Unit for approval/denial. Eligibility requirements for the FC-18 are enrollment in an educational program, being employed for at least 80 hours per month or having a diagnosed disability that prevents school attendance or employment.
Continuing Stay Criteria	• Not applicable
Discharge Criteria (Any element may result in discharge or transfer)	• Goals and objectives have been met substantially • Youth's case is closed • Youth needs can now be met through a community resource.
Service Exclusions	• No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. • Those receiving ICF/IDD or group foster care services are not eligible for this service. • Any transportation codes related to service provision. • The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. • Those receiving Safe at Home services are not eligible for this socially necessary service. • This service is available only to SNS agency providers who are also child placing agencies.
Clinical Exclusions	• Severity of child's issues precludes provision of services in this level of care.
Documentation	• There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. • A case note must be completed for each service event that includes • code or service name • a summary of the intervention • client's response to the intervention

	• relation to the case plan • location where service occurred • duration • start/stop time • signature of the provider and their title or credentials. • A copy of the BSS Referral for Socially Necessary Services must be present in the case record. • A monthly progress summary must be completed and received by the BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: • A list of dates of services and the specific services rendered and/or attempts; • Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to the intervention; • Plan for further interventions.

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology
  - Psychology
  - Counseling
  - Interpersonal Communication
  - Human Services
  - Primary or Secondary Education
  - Criminal Justice
  - Board of Regents with an emphasis in Human Service
  - Gerontology
  - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- An APS/CPS screen completed with no negative information.
- Transportation Providers must have valid Driver's licenses from the employee's state of residence and insurance.

This service is available only to SNS agency providers who are also child placing agencies.

Transition to Adulthood Program Tier Two 135512

Supported Community-Based Independent Tier

Definition: The Transition to Adulthood Program (TAP) is a variety of services to aid youth when they transition from foster care to adulthood and self– sufficiency. This is a three tired program where the youth must successfully complete the previous tier before moving on to the next phase.

Services Provided

- Inform youth of Tier expectations.
- Continue to Identify and secure a network of adults who will provide support and encouragement throughout the youth's life.
- Utilize the assessment completed prior to discharge from the previous tier to develop a transition plan on areas that the youth need to work on within 10 days of moving to tier.
- Complete a Life Skills assessment 6 months after the youth enters the tier, every 6 months thereafter while the youth remains on the tier and again 30 days prior to discharge to the next tier.
- Utilize the assessment to develop a transition plan on areas that the youth needs to work on within 10 days of admittance to the last tier.
- Transition Plans will be revised every 90 days.
- Face to Face contact made with youth once every week for the first 90 days. After the first 90 days, face-to-face contact will be made at a minimum every two weeks. During the weeks the youth is not seen face-to-face there will be at least one (1) telephone call per week to determine how the youth is progressing and identify any barriers to achieving their goals.
- Ensure the youth progresses through their transition plan through verifiable milestones as listed on the transition plan which should be specific to the goals of education, employment, housing, linkage to community resources and services, and any other item which will lead to youth to independence.
- Connect youth to any services they might need to maintain independence.
- Keep contributed funds in a separate savings account for the youth.
    - Provider must submit copies of the youth's monthly savings account statement with the monthly summary.
    - Provide youth with a monthly subsidy of $900. This cost was factored into the per diem rate. Startup funds will not be provided under this tier as they were provided under the previous tier. Additional funding may be approved on a case by case basis but must be part of a transition plan and approved by the BSS TL Unit prior to purchase.

- Objectives and Goals - Youth will meet all items listed below and under this tier for a minimum of 12 months before advancing to the next tier.

- Maintain employment during this entire tier regardless of school enrollment.
- Complete a mock financial plan.
- Complete annual tax returns and credit checks.
- Must maintain a banking and savings account.

- Must have at least 20% of income or $2000.00 in savings by the end of the tier.
- Months 3-6 youth will contribute 30% of housing costs including utilities. *
- Months 6-12 youth will contribute 50% of housing costs including utilities. *
- Youth will complete a presentation to the service provider within month 10 of this tier to demonstrate independence and discuss preparedness for Tier 3.

*Youth will provide the service provider with funds to contribute to housing and utility costs. This will go in a separate savings account that the youth cannot access until they complete all 3 tiers and exit the program.

Target Population	Child Protective Services
Program Option	Chaffee
Initial Authorization	365 days Unit = one day 365 Units
Maximum Total Authorizations Available	1
Admission Criteria	• Has successfully completed TAP Tier 1 – Coached Community-Based Independent Tier. • Those youth who remain in care after age 18; • Those youth who were former foster youth, left at the age of 18 or older, and request to return to foster care after age 18, through the age of 23 and; Those youth whose parental rights have been terminated, were in foster care immediately prior to a BJS placement and left BJS at age 18 or older. The BSS must be notified of a transitional plan and be notified of MDTs six months prior to discharge from BJS. • Youth must sign the Continued Foster Care Services Agreement for Youth Over Eighteen (FC-18) to be eligible for the program. All FC-18 approval requests must be sent to the Transitional Living Unit for approval/denial. Eligibility requirements for the FC-18 are enrollment in an educationalprogram, being employed for at least 80 hours per monthor having a diagnosed disability that prevents school attendance or employment.
Continuing Stay Criteria	• Not applicable

Discharge Criteria (Any element may result in discharge or transfer)	• Goals and objectives have been met substantially • Youth's case is closed • Youth needs can now be met through a community resource.
Service Exclusions	• No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. • Those receiving ICF/IDD or group foster care services are not eligible for this service. • Any transportation codes related to service provision. • The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. • Those receiving Safe at Home services are not eligible for this socially necessary service. • This service is available only to SNS agency providers who are also child placing agencies.
Clinical Exclusions	• Severity of child's issues precludes provision of services in this level of care.

Documentation	• There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. • A case note must be completed for each service event that includes • code or service name • a summary of the intervention • client's response to the intervention • relation to the case plan • location where service occurred • duration • start/stop time • signature of the provider and their title or credentials. • copy of the BSS Referral for Socially Necessary Services must be present in the case record. • A monthly progress summary must be completed and received by the BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: • A list of dates of services and the specific services rendered and/or attempts;

	• Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to the intervention; • Plan for further interventions.

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
- Sociology
- Psychology
- Counseling
- Interpersonal Communication
- Human Services
- Primary or Secondary Education
- Criminal Justice
- Board of Regents with an emphasis in Human Service
- Gerontology
- Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- An APS/CPS screen completed with no negative information.
- Transportation Providers must have valid Driver's licenses from the employee's state of residence and insurance.

This service is available only to SNS agency providers who are also child placing agencies.

Transition to Adulthood Program Tier Three 135513

Self-Managed Community-Based Independent Tier

Definition: The Transition to Adulthood Program (TAP) is a variety of services to aid youth when they transition from foster care to adulthood and self– sufficiency. This is a three tired program where the youth must successfully complete the previous tier before moving on to the next phase.

Services Provided

- Inform youth of Tier expectations.
- Continue to Identify and secure a network of adults who will provide support and encouragement throughout the youth's life.
- Utilize the assessment completed at the end of the last tier to develop a transition plan on areas that the youth need to work on within 10 days of moving to tier.
- Transition plans are to be revised every 90 days.
- Ensure the youth progresses through their transition plan through verifiable milestones as listed on the transition plan which should be specific to the goals of education, employment, housing, linkage to community resources and services, and any other item which will lead to youth to independence.
- Ensure youth is maintaining all aspects of the previous tiers, such as employment, banking, budgeting, driver's license, etc.
- Face-to-face contact once a week for the first 90 days. Weekly phone calls with monthly face-to-face contact are required for the remainder of the tier.
- Continue to Identify and secure a network of adults who will provide support and encouragement throughout the youth's life.

Objectives and Goals- Youth will need to meet all items listed below and under this tier for 12 months before advancing to the next tier.

- Maintain employment regardless of school enrollment.
- Must be working at least 20 hours per week or 80 hours per month.
- Have a bank account in good standing.
- Must save at least 20% or $2000 by the end of the tier.
    - A copy of the monthly savings statement must be sent in with the monthly reports.
- Youth must be listed as primary or secondary on rent agreement.
- Youth must contribute 50% of rent and utilities during months 3-6 of the tier. *
- Youth must contribute 100% of rent and utilities during months 6-12 of the tier. *

*Youth will provide the service provider with funds to contribute to housing and utility costs. This will go in a separate savings account that the youth cannot access until they complete all 3 tiers and exit the program.

Target Population	Child Protective Services
Program Option	Chaffee
Initial Authorization	365 days Unit = one day 365 Units
Maximum Total Authorizations Available	1
Admission Criteria	• Has successfully completed Tier 2 – Supported Community-Based Independent Tier. • Those youth who remain in care after age 18; • Those youth who were former foster youth, left at the age of 18 or older, and request to return to foster care after age 18, through the age of 23 and; • Those youth whose parental rights have been terminated, were in foster care immediately prior to a BJS placement and left BJS at age 18 or older. The BSS must be notified of a transitional plan and be notified of MDTs six months prior to discharge from BJS. • Youth must sign the Continued Foster Care Services Agreement for Youth Over Eighteen (FC-18) to be eligible for the program. All FC-18 approval requests must be sent to the Transitional Living Unit for approval/denial. Eligibility requirements for the FC-18 are enrollment in an educational program, being employed for at least 80 hours per month or having a diagnosed disability that prevents school attendance or employment.
Continuing Stay Criteria	• Not applicable
Discharge Criteria (Any element may result in discharge or transfer)	• Goals and objectives have been met substantially • Youth's case is closed • Youth needs can now be met through a community resource.
Service Exclusions	• No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. • Those receiving ICF/IDD or group foster care services are not eligible for this service.

	• The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. • Any transportation codes related to service provision. • Those receiving Safe at Home services are not eligible for this socially necessary service. • This service is available only to SNS agency providers who are also child placing agencies.
Clinical Exclusions	Severity of child's issues precludes provision of services in this level of care.
Documentation	• There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. • A case note must be completed for each service event that includes • code or service name • a summary of the intervention • client's response to the intervention • relation to the case plan • location where service occurred • duration • start/stop time • signature of the provider and their title or credentials. • copy of the BSS Referral for Socially Necessary Services must be present in the case record. • A monthly progress summary must be completed and received by the BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: • A list of dates of services and the specific services rendered and/or attempts; • Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to the intervention; • Plan for further interventions.

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree. Related degrees are:

- Sociology
- Psychology
- Counseling
- Interpersonal Communication
    - Human Services
    - Primary or Secondary Education
    - Criminal Justice
    - Board of Regents with an emphasis in Human Service
    - Gerontology
    - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- An APS/CPS screen completed with no negative information.
- Transportation Providers must have valid Driver's licenses from the employee's state of residence and insurance.

This service is available only to SNS agency providers who are also child placing agencies.

CPS Reunification Services

Used when a child has been removed from the home and then **sent back** to live with the parent/guardian they were originally removed from.

- For example, use ‘reunification’ when the judge gives physical custody back to the parent, but leaves legal custody with BSS.
- Reunification may also be used if the judge dismisses the abuse/neglect case and BSS is ordered to provide additional services to the family now that the child is back in the home to help support a successful family reunification.
- Reunification may be referred when a child has been returned from BSS custody (out of home placement) to only one bio parent. For example, a child was removed from Parent A’s home due to an abuse/neglect petition and placed with a kinship foster placement while both Parent A and Non-Custodial Parent B participate in improvement periods. Parent B completes the court improvement plan just slightly ahead of Parent A so the court allows the child to ‘return’ to Parent B while Parent A completes services. If parent A or B needs SNS referred, then services from Reunification may be selected to help keep the reunification from disrupting.

Adult Skill Building 140390

Direct service in which the identified parent is assisted to increase basic home management skills and social/emotional support networks through hands-on implementation and role modeling. This service provides for the acquisition of skills needed to meet adult role expectations and carry out activities of daily living that directly impact the child's safety in the home. Adult Skill Building is intended to improve the capacity for solving problems and resolving conflicts. Possible Adult Skill Building activities include housekeeping, cleaning, food shopping, meal preparation, laundry, budgeting, utilizing community resources, accessing medical and school records and personal care/hygiene. This service is implemented when there is a lack of skill knowledge not due to a mental health condition and implies that there is not a lack of motivation. SNS Provider will work with client on needs identified on the life skills assessment and/or needs outlined by the BSS service plan.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit = One hour 35 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● CPS Initial Assessment/Ongoing Assessment indicates parents' lack of basic life skills to maintain safety, health and well-being of children in their care are directly related to the child's involvement with Child Protective Services. ● The Case Plan documents the need for the service with specific objectives targeting the identified areas of improvement. ● Service recommended by the BSS Child Welfare Worker, family and BSS Supervisor. ● The SNS Provider should assess the parent to determine which life skills need enhanced. The Casey Life Skills Assessment may be utilized or the SNS provider may use any propriety life skill assessment they have developed. ● Service cannot be met appropriately through other community resources such as adult education classes, personal care or Extension Services. ● Family has explored appropriate social support system members capable of providing service to the identified client.
Continuing Stay Criteria	● BSS Child Welfare Worker, family and BSS supervisor have reviewed case and determined family/ community placement is still appropriate. ● Service cannot be met appropriately through other community resources. ● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● Prior to re-authorizing the Adult Skill Building service, the SNS Provider should reassess the client using a life skills

	assessment to identify continued deficits. ● BSS expects a detailed update be completed each 90 days on any client progress made in identified deficit areas-this should be included in the monthly summary and discussed at the MDT. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the Case Plan and recommend the service continue. ● Family continues to explore social support system members capable of providing service to the identified client. ● The caretaker continues to display behaviors documented on the CPS Initial Assessment/ Ongoing Assessment that indicate the need for a safety plan.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have substantially been met and a safety plan is no longer required. ● Parent requests discharge. ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of goals/objectives on the service plan. ● No outlook for improvement with this level of service. ● Child(ren) are removed from the home and placed back into the physical and legal custody of BSS. ● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. These skills should be addressed through the parent's residential habilitation plan. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS.

Clinical Exclusions	● Severity of the parent's impairment due to a mental illness or substance use, misuse or substance use disorder problem may preclude provision of service in this level of care. If the parent previously had the skill and lost the ability to perform the task due to the severity of their mental illness/substance use, misuse or substance use disorder, a mental health professional should be consulted to determine if the parent meets medical necessity for Basic Living Skills in the Medicaid Rehabilitation Manual. ● Severity of the parent's impairment due to Intellectual Developmental Delay or developmental delays may preclude provision of this service. A mental health professional should be consulted to evaluate the possibility of short-term Day Treatment Services. ● Severity of parent's impairment due to traumatic brain injury (TBI) may preclude provision of this service. A rehab professional should be consulted to evaluate the possibility of rehabilitation services. ● Continued stay has been noted for cases in which a parent diagnosed with Borderline Intellectual Functioning or Mild Intellectual Developmental Delay is not eligible for other service options. One additional authorization may be granted with documentation of the diagnosis.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the CPS Initial Assessment, Case Plan and current safety plan must be present in the case record. A copy of the client's Casey Life Skills Assessment(s) should be maintained as part of the provider's case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

	A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- All providers must have a CIB and an APS/CPS screen completed with no negative information.

Agency Transportation 140106

Definition:
This code is utilized for providers' mileage encumbered when the following services from the Child Protective Services Reunification Program Option have been implemented within the child/family's home and are explicitly documented on the child/family's service plan.

- Adult Skill Building
- Child Community Connection
- CPS Safety Services
- Court Attendance
- Daily Respite
- Hourly Respite
- Individualized Parenting
- MDT Attendance
- Supervised Family Time One
- Supervised Family Time Two
- Scheduled In-Person Observation
- Transportation Time
- Unscheduled In-Person Observation

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

If a provider is unable to deliver the identified service upon traveling to the home, this code may be billed up to three times within the ninety-two (92) day authorization period when the following conditions are met:

- The provider/agency has a policy and procedure regarding the expectations of the families being served. The importance of keeping scheduled appointments, notifying the provider when an appointment needs to be cancelled and the means in which the BSS will be notified if appointments are not kept are reviewed with the client(s).
- The provider/agency has a policy and procedure about notifying the Department regarding youth/family's non-compliance with established scheduled appointments.
- There is documentation of the visit being scheduled within the case record.

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit= 1 mile 1000 units
Maximum Total Authorizations Available	3

Admission Criteria	● Documentation of the parent's inability to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Safety plan and/or Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● BSS Child Welfare Worker and BSS supervisor agree that due to the nature of the complaint, the child can be safely served in the home/community with supportive services.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● BSS Child Welfare Worker and BSS Supervisor agree that the child is appropriate to remain in their home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Parent requests discharge. ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of needs and case plan goals. ● No outlook for improvement within this level of service.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● Excludes tolls, parking and waiting time. ● IDD waiver or ICF recipients are not eligible for this service ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The only services that may be billed concurrently with this service are Transportation Time or Intervention Travel Time. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a

	currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip, signature of the provider and their title or credentials. ● A copy of the BSS 's current safety plan and/or Case Plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and clear APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance. All required trainings must be completed as indicated in the provider agreement.

Child Community Connection 140915

Definition: The Child Community Connection (CCC) service seeks to engage with and empower families to identify needed supports and facilitate referral and linkage to formal and informal community resources once their child(ren) have returned home from placement. These resources should be available at no cost or be affordable to the family without additional financial assistance from the WV Bureau for Social Services. These services include, but are not limited to, tutoring, mentoring, counseling or mental health services, self-help and other support groups, educational, arts, or science programs which will continue to support the family after BSS case closure. SNS Providers should make the family aware of resources available to all/most West Virginians such as WV Works, Family Assistance, Children with Serious Emotional Disorder Waiver services, as well as applicable mental health crisis phone numbers. BSS will make available a resource directory for families that the SNS provider will be required to utilize as part of the CCC service. SNS providers of CCC will be expected to make at least 3 attempts to contact Resource for/with the family to make linkage but will not be held to the expectation that the family successfully enrolls/completes a referred resource. Providers will need to document the specific resources identified and what actions they took to facilitate the family's linkage to the resource.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit= One hour 35 units per 92 days
Maximum Total Authorizations Available	1 – No reauthorizations available
Admission Criteria	● This service may not be referred to an SNS Provider prior to the completion of a BSS ongoing assessment in an open CPS case. ● Family is engaged in an active Child Protective Services case. ● Child must remain in their home. ● Children in BSS custody who have returned home for a trial period are eligible to receive this service. ● Service recommended by the BSS Child Welfare Worker, family and BSS supervisor. ● BSS will require CCC providers, at the minimum, to relay to families these four resources: WV211, Help4WV, their area Family Resource Network and an applicable Suicide Hotline such as WV 988. ● Family lacks a social support system capable of providing service to the identified client.
Continuing Stay Criteria	● Not Applicable

Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child is placed/remains in BSS custody **and** removed from the home. ● Child's case is closed. ● Family has gained a social support system capable of providing service to the family. ● Family needs can now be met through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Child Community Connection will not be authorized concurrently with CPS Safety Services. This service is not related to the child's safety in the home. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials SNS Providers of Child Community Connection must document specifically what resources the child/family were linked to during the service provision including the name of the person/entity, service being referred, date and number of attempts made to contact the resource and the outcome of contact.

	A copy of the BSS Ongoing Assessment must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: A list of dates of service and the specific services rendered and/or attempts. ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention. ● Plan for further interventions. ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information.
- All trainings be completed as indicated in the provider agreement.

CPS Safety Services 140450

Definition: A grouping of services for families to assist in assuring safety for children by controlling Impending Safety Threats identified during the CPS Initial Assessment. The bundled services must be carefully coordinated with other formal and informal safety services to assure that the safety threat is controlled at the level necessary for the child to remain with their caregivers. The mix of these services and other services provided is based upon the safety plan completed by the BSS Child Welfare Worker. Eighty percent of the services must occur in the family's home or community. The remaining twenty percent of the activities may be administrative functions/activities that directly relate to the control of the Impending Safety Threats. These activities correspond to the services identified in the bundle and target controlling the behavior and conditions that immediately threaten the child. This service must commence within 24 hours of referral. Community refers to the places that are natural locations where the family would be together, not office settings. Provider must have contact with the BSS Child Welfare Worker, (telephone, mail or face-to-face) at least once each week to discuss and determine whether identified impending Safety Threats are being controlled by the safety services. Safety Services cannot be implemented while a Temporary Protection Plan is in place. The BSS Child Welfare Worker will be required to provide SNS Provider with the Initial Assessment upon completion and approval by BSS Supervisor.

Scheduled In-Person Observation: "Eyes on" in-person oversight of the child or family which provides an active, ongoing assessment of stressors which affect safety and may result in necessary action. Assessing for safety is the responsibility of the BSS Child Welfare Worker but the ASO Safety Services Provider may need to notify the BSS Child Welfare Worker, the WV Centralized Intake for Abuse and Neglect or law enforcement of any change in circumstance as outlined on the BSS Safety Plan. ***If the child(ren) are believed to be in Imminent Danger as defined in WV Code §49-1-201(see definition below) the provider, in consultation with their supervisor, will immediately contact*** **WV Centralized Intake for Abuse and Neglect (within 24 hours of -1-800-352-6513)** ***to initiate a report and shall call law enforcement. If safe, the provider shall remain in the home until either law enforcement or child protective services arrives to make a safety determination for the care and custody of the child.*** The emphasis here is that the provision of Scheduled In-Person Observation will assist in controlling one or more of the identified impending Safety Threats in the CPS Initial Assessment. The identified child or family requiring service must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety. The service controls for conditions created by a parent's reaction to stress, parents being inconsistent about caring for children, parents being out of control, parents reacting impulsively and parents having detrimental expectations of children. This service **cannot** be used for spot checks, surprise visits, safety checks or unannounced visits.

Unscheduled In-Person Observation: "Eyes on" in-person oversight required to ensure safety for the identified client, family and/or community. The identified child or family requiring observation must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety. The BSS Safety Plan will have been completed and sent to the SNS provider outlining specifically what safety concerns the SNS Provider should be monitoring. The BSS Child Welfare Worker will provide the SNS Provider with the appropriate staff contact information/hotlines and protocols to follow if the SNS provider finds the family in violation of the current safety plan, case plan, protective order, court order, etc. The identified client/family should have been educated by the BSS Child Welfare Worker during the safety planning process about BSS expectations for maintaining safety in the household. The ASO Safety Services Provider may need to notify BSS Child Welfare Worker, the WV Centralized Intake for Abuse and Neglect or law enforcement of any change in circumstance as outlined on the BSS Safety Plan. ***If the child(ren) are believed to be in Imminent Danger WV*** Code ***49-1-201 (See definition below) the provider, in consultation with their supervisor, will immediately contact*** **WV Centralized Intake for Abuse and**

Neglect (within 24 hours -1-800-352-6513) ***to initiate a report and shall call law enforcement. If safe, the provider shall remain in the home until either law enforcement or child protective services arrives to make a safety determination for the care and custody of the child.*** This service is intended for unannounced safety checks as outlined in the BSS Safety Plan. The family may not be penalized in any way for not being at home/available when provider arrives for unscheduled observation.

Basic Parenting Skills: Direct face-to-face service to assist caregivers in performing basic parental duties or responsibilities which caregiver has been unable or unwilling to perform. Basic parental duties and responsibilities include such activities as feeding, bathing, basic medical care, basic social/emotional attention and supervision. The lack of these basic parenting skills must affect the child's safety. The services must have an immediate effect on controlling the impending Safety Threats identified in the CPS Initial Assessment. This service is different than parenting education in that it is strictly for controlling Impending Safety Threats identified on the BSS Safety Plan or concerns observed by the ASO Provider during Scheduled or Unscheduled Observation of the family.
Only the areas directly relating to safety are to be addressed.

Navigation and Support: Provision of basic community resource referrals and linkage. SNS Provider will provide the family with area resource directories to address family needs as identified during the CPS Initial Assessment. The service must have an immediate impact on controlling the impending Safety Threats that affect the child's safety. Once formal linkage to community support systems or access to supportive services, such as therapy or counseling, has been established, this service ends. The SNS Provider may also use this service to provide the family with an overview of the Child Welfare Process in West Virginia. The provider may educate the family on the roles and expectations of all those involved with the child welfare case and help keep the family informed of current BSS staff and contact information as well as next steps in the case management process. The ASO Provider should empower the family to begin the change process as the case transitions to BSS Case Management. The ASO Provider should encourage the family to become active participants in their BSS safety/case plan through community resource linkage and referral activities.

Urgent Adult Skill Building: To provide fast and efficient education to the caregivers on topics that are impacting the child's ability to safely remain in the home. Possible Adult Skill Building activities include housekeeping, cleaning, food shopping, meal preparation, laundry, budgeting, accessing medical and school records and personal care/hygiene. The emphasis of this service remains controlling Impending Safety Threats identified in the BSS Safety Plan.

Urgent Home Sanitation: The ASO Provider will assist caregivers to resolve unsanitary/unsafe conditions within the home as outlined in the BSS Safety Plan. The SNS Provider may demonstrate appropriate cleaning and child proofing techniques for the family in order to create a physically safe residence. The focus of the home sanitation should be related to controlling impending Safety Threats identified in the CPS Initial Assessment.

Imminent Danger

An emergency situation in which the welfare or the life of the child is threatened. Such emergency exists when there is reasonable cause to believe that any child in the home is or has been sexually abused or sexually exploited or reasonable cause to believe that the following conditions threaten the health or life of any child in the home:

1) Non-accidental trauma inflicted by a parent, guardian, sibling or a babysitter or other caretaker;

2) A combination of physical and other signs indicating a pattern of abuse which may be medically diagnosed as battered child syndrome;
3) Nutritional deprivation;
4) Abandonment by the parent, guardian or custodian;
5) Inadequate treatment of serious illness or disease;
6) Substantial emotional injury inflicted by a parent, guardian or custodian; or
7) Sale or attempted sale of the child by the parent, guardian or custodian; or
8) The parent, guardian or custodian's abuse of alcohol, or drugs or other controlled substance as defined in W. Va. Code §60A-1-101, has impaired their parenting skills to a degree as to pose an imminent risk to a child's health or safety. See W. Va. Code §49-1-201.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 Days Unit = One hour 200 hours direct contact
Maximum Total Authorizations Available	1 – any additional authorizations will require Regional BSS approval
Admission Criteria	● BSS Child Welfare Worker identifies **no** Immediate Safety Threats but does identify Impending Safety Threats during the CPS Initial Assessment. ● A BSS safety plan has been developed based on the Impending Safety Threats identified in the CPS Initial Assessment. ● SNS Provider will be required to provide Acentra Health a copy of the completed, signed BSS Safety Plan prior to the authorization of Safety Service Bundle. ● Service cannot be safely provided through a community resource or the family support system.
Continuing Stay Criteria	● None
Discharge Criteria (Any element may result in discharge or transfer)	● BSS Child Welfare Worker, family and BSS supervisor have reviewed safety plan and agree that the child can remain safely in the home without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system. ● Service is not able to maintain safety in home environment resulting in removal of the child from the home.
Service Exclusions	● ASO Safety Services may NOT be used if BSS Child

	Welfare Worker has identified Immediate Safety Threats. ● ASO Safety Services may NOT be used during a Temporary Protection Plan. ● The only Socially Necessary codes that may be authorized in conjunction with Safety Services are Hourly Respite, and Transportation (public, private, or agency), for the first 30 days until BSS Child Welfare Worker, family and BSS supervisor meet to review progress. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● CPS Safety Services may not be referred while a BSS Protection Plan is in place. ● If a crisis is behavioral in nature for a child, the family should access 844-HELP-4WV (Children's Mobile Crisis Response). ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issue(s) precludes provision of services in this level of care. ● Need for the service is not solely to clinically monitor for homicidal and/or suicidal behaviors.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials ● A copy of the CPS Initial Assessment and the current safety plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

	A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. BSS Standard Form must be used. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

For Navigation and Support

• Staff providing this service at a minimum must have a BSW with social work licensure or related four-year degree with social work licensure. Related degrees are:

- o Sociology
- o Psychology
- o Counseling
- o Interpersonal Communication
- o Human Services o Primary or Secondary Education
- o Criminal Justice
- o Board of Regents with an emphasis in Human Service
- o Gerontology
- o Family and Consumer Science or

• A master's degree in social work, counseling or psychology with licensure and

• Experience providing direct service to families.

• All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information.

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

- All required trainings completed as indicated in the provider agreement.

If you are an agency with LBHC, childcare or child-placing license, you can have 4-year degree and be supervised, but private providers must be licensed.

For Scheduled In-Person Observation, Unscheduled In-Person Observation, Basic Parenting Skills, Urgent Adult Skills Building, Urgent Home Sanitation:

• Paraprofessional staff with a High School Diploma/GED Certificate **and**

• Experience providing direct service to families **and**

• Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist or counseling license who has two years post college experience providing direct service to families **and**

• All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information.

- All required trainings completed as indicated in the provider agreement **and**

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Court Attendance 140755

Definition: Reimbursement for an SNS agency/independent provider **subpoenaed** to testify in a Circuit Court hearing related to an open BSS Child Welfare Case. Provider should be present at the hearing prepared to testify to answer questions, give updates on service participation, and assist in establishing the appropriate plan for the identified child and/or family. The provider must be actively working with the client and submitting monthly summaries to the BSS child welfare worker. For Reunification cases there **must be** circuit court involvement with a petition filed and/or it is mandated in BSS Policy or WV Statute.

Eligible for any subpoenaed representative per agency for:

- SNS Providers actively providing a treatment or safety service
- Mental Health Professionals providing direct treatment (Example: Therapist)

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit = One Event
Maximum Total Authorizations Available	As Required
Admission Criteria	● CPS Initial Assessment or Ongoing Assessment was completed and indicated a safety plan was needed to maintain the child in the home. ● There is circuit court involvement with an abuse/neglect petition filed. ● SNS Provider will submit a copy of the subpoena to Acentra at the time of prior auth request. If multiple SNS staff were subpoenaed for testimony additional units may be authorized. ● If a subpoena is not issued for staff requested at court by DoHS then a court order showing that testimony was given by SNS provider(s) may be accepted in lieu of subpoena.
Continuing Stay Criteria	● Child(ren) returned to the home of parent(s) with services. ● Case remains open.
Discharge Criteria (Any element may result in discharge or transfer)	● Case is closed ● Child(ren) are returned to the custody of the BSS and are no longer placed with a parent.

Service Exclusions	● Provider is not already receiving reimbursement for administrative case management through a Provider Agreement with BSS. ● No individual fee for service code including Medicaid Clinic or Targeted Case Management may be billed concurrently while this code is being utilized. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. The provider must retain documentation showing they attended the Circuit Court hearing. If the County does not issue subpoenas prior to court the SNS provider may submit a copy of the court order showing provider testimony was given to Acentra to obtain authorization for service. The standard 10-day timeline for prior authorization will not apply to the Court Attendance service code. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and presented to the MDT and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please

	include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Functional Family Therapy 140800

FFT is a family intervention program for dysfunctional youth with disruptive, externalizing problems. Target populations range from at-risk pre-adolescents to youth with moderate to severe problems such as conduct disorder, violent acting-out, and substance use, misuse or substance use disorder. While FFT targets youth aged 11-18, younger siblings of referred adolescents often become part of the intervention process.

FFT Program goals are to eliminate the youth's referral problems, improve prosocial behaviors and improve family and individual skills. The program is broken down into five phases of intervention:

- Engagement- Maximize family initial expectation of positive change;
- Motivation- Create a motivational context for long-term change;
- Relational Assessment- Complete relational (functional) assessment of family relationships to provide foundation for changing behaviors in subsequent phases;
- Behavior Change- Facilitate individual and interactive/ relational change;
- Generalizations- Maintain individual and family change and facilitate change in multiple systems.

Outpatient Clinics or In home setting permitted	Unit= One Day Authorization 120 units per 120 days
Admission Criteria:	● Service must be referred by BSS ● Child must remain in their home ● Children in BSS custody who have returned home for a trial period ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement.
Continued Stay:	● Child must have remained in their home ● Children in BSS custody have returned home for a trial period ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement.
Discharge Criteria	● Goals have been accomplished ● Family/youth is not participating ● No progress has been demonstrated ● Youth enters BSS custody

	● Youth turns 19 years of age
Service Exclusions:	● Behavioral or mental health therapy ● Any transportation codes related to service provision ● Other parenting education programs
Clinical Exclusions:	● In active withdrawal ● In acute psychiatric care
Documentation:	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed within 15 days for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials ● A copy of the CPS Initial Assessment, and current Case Plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring

	worker. BSS Standard Form must be used. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Prerequisite/Minimum Provider Qualifications:

- Qualifications can vary for therapists, but to become an onsite Program Supervisor a minimum of master's level education is required. A formal certification must be present in provider/employee records.
- Trauma-informed care training.

*Agencies must sign an affiliate agreement indicating they will adhere to the Essential Requirements to meet model fidelity.

Daily Respite 140430

Definition: Planned break for primary caretakers who are in challenging situations in which a trained provider, friend or family member assumes care giving and supervision of a child(ren) for a brief period of time. Service may be provided in or out of the natural home on a daily basis. Service may also be utilized if the caretaker has a scheduled inpatient medical procedure.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit = One day 3 units per 92 days
Maximum Total Authorizations Available	14 units Maximum within 12-month period per provider
Admission Criteria	● Parent(s) are in need of a break from supervision and care giving responsibilities.
Continuing Stay Criteria	● Service continues to be needed to provide support to maintain client's placement as identified on the service plan. ● Case Plan identifies the current plan is for the child to remain in the identified foster home placement if possible.
Discharge Criteria (Any element may result in discharge or transfer)	● Child's case is closed.
Service Exclusions	● No other fee-for-service Socially Necessary Service may be billed concurrently with this service ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information.
- All trainings be completed as indicated in the provider agreement.

Healthy Families America 140810

HEALTHY FAMILIES AMERICA (HFA) is a voluntary evidence-based home visiting program serving pregnant women and families of infants and young children. HFA is a prevention program dedicated to supporting families in their quest to be the best parents they can be. Program services are designed to strengthen families during the critical first years of a child's life. The child's age at HFA enrollment is prenatal to age 24 months as services are focused primarily on prevention through education and support in the homes of new parents. All HFA Program criteria are based on proven best practice standards. Intensity of services is based on each family's needs, beginning weekly and moving gradually to quarterly home visits as families become more self-sufficient. The Bureau of Social Services contracts with community providers who implement the program in their local communities.

The goals of Healthy Families America (HFA) are:

- Build and sustain community partnerships to systematically engage overburdened families in home visiting services prenatally or at birth
- Cultivate and strengthen nurturing parent-child relationships
- Promote healthy childhood growth and development
- Enhance family functioning by reducing risk and building protective factors

HFA is theoretically rooted in the belief that early, nurturing relationships are the foundation for life-long, healthy development. Building upon attachment, bio-ecological systems theories, and the tenets of trauma-informed care, interactions between direct service providers and families are relationship-based; designed to promote positive parent-child relationships and healthy attachment; services are strengths-based; family-centered; culturally sensitive; and reflective.

The HFA model is based upon 12 critical elements. These are:

1. Initiate services prenatally or at birth and can continue until the child is five years of age.
2. Use standardized screening and assessments such as the Family Resilience and Opportunities for Growth to systematically identify and assess families most in need.
3. Offer services voluntarily and use positive, persistent outreach efforts to build family trust.
4. Offer services intensely and over the long-term, with well-defined criteria and a process for increasing or decreasing frequency of service.
5. Consider the culture of families in the services offered such that staff understands, acknowledges, and respects cultural differences of families.
6. Focus on supporting the parent(s) as well as the child through services that cultivate the growth of nurturing, responsive parent-child relationships and promote healthy childhood growth and development.
7. Link all families to a medical provider to ensure optimal health and development and other services to meet their assessed needs.
8. Ensure Family Support Specialists have an adequate time to spend with each family to meet their needs and to plan for future activities.
9. Select service providers based on:
    a. Their personal characteristics
    b. Their willingness to work in, or their experience working with, culturally diverse communities
    c. Their knowledge and skills to do the job

10. Provide intensive training to service providers specific to their role to understand the essential components of family assessment, home visiting, and supervision.
11. Ensure service providers have a framework, based on education or experience, for handling the variety of experiences they may encounter when working with at-risk families
12. Give service providers ongoing, effective supervision so they can develop realistic and effective plans to empower families.

Only in- home setting where the child is/will be living is permitted. Any alternate locations must be approved in writing.	
Initial Authorization	365 days Unit= One day 365 units per 365 days
Admission Criteria:	● Parent must be pregnant or parenting a newborn, children can be enrolled up to 24 months and continue to age 5. ● Intake assessments must occur, and program accepted by the family prior to the target child turning 24 months ● Service must be referred by BCF caseworker ● Child must remain in their home ● Children in BSS physical custody who have returned home for a trial visit ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement. ● May also be used for children in foster care who are pregnant and/or parenting.
Continued Stay:	● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● BSS worker, family and BSS supervisor recommend the service continue and agree that placement in the home is still appropriate. ● Service cannot be met appropriately through other community resources.
Discharge Criteria	● Goals have been accomplished ● Family/child is not participating ● No progress has been demonstrated

	● Child reenters BSS Legal Custody
Service Exclusions:	Targeted Case Management and other parenting education curricula.
Clinical Exclusions:	Parent is in active hospital or residential based treatment without the child(ren).
Documentation:	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed within 15 days for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the current Safety Plan and the CPS Initial Assessment and/or Ongoing Assessment must be present in the case record. WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart and one sent to the referring worker. BSS Standard Form must be used. This monthly progress report must contain:

	● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Prerequisites/minimum qualifications:

Agencies must sign an affiliate agreement indicating they will adhere to the Essential Requirements to meet model fidelity.

Hourly Respite 140530

Definition: Planned or unplanned break for primary caretakers who are in challenging situations in which a trained provider, friend or family member assumes care giving and supervision of a child(ren) for a brief period of time. Service may be provided in or out of the natural home or on an hourly/daily basis. Temporary relief from parenting responsibilities is provided to avoid an abuse, neglect or abandonment situation or a placement disruption.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit = One hour 30 Units per 92 days Maximum 120 units (5 days)
Maximum Total Authorizations Available	4
Admission Criteria	● BSS Child Welfare Worker, family and BSS supervisor agree that the children can be maintained safely in the home. ● BSS Child Welfare Worker, family and BSS supervisor recommend this service. ● Family has explored appropriate social support system members capable of providing service to the identified client. ● A registered SNS provider must be utilized for Hourly Respite unless exceptional circumstances are documented.
Continuing Stay Criteria	● Parents/caretakers continue to display behaviors that were documented on the CPS Initial Assessment that indicated the need for a safety plan. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Family has explored appropriate social support system members capable of providing service to the identified client. ● Service continues to be needed to provide support to maintain client's placement as identified on the service plan. ● Case plan identifies the current plan is for the child to remain in the identified home.
Discharge Criteria (Any element may result in discharge or transfer)	● Parent requests discharge. ● Another service is warranted by change in the child's condition. ● Service is not able to maintain safety in home environment, resulting in a change of placement. ● No outlook for improvement with this level of service. ● Service can now be provided through a community resource.

	● Family has developed a social support system capable of providing the service to the identified client.
Service Exclusions	● Excludes placement at Emergency Shelters for children not in custody. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● The child can effectively and safely be treated at a lower level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● If a safety plan exists for this case, a copy of the current safety plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information.
- All required trainings completed as indicated in the provider agreement.

Individualized Parenting 140300

Definition: Direct face-to-face services to improve parental competence and knowledge of:

- Discipline
- Appropriate supervision
- Encouragement of child/adolescent care, age-appropriate development
- Realistic expectations and standards of child/adolescent behavior of identified child

This service should be used to correct specific deficits in parenting. This service is provided in a one-on-one setting and is highly individualized to meet the parents' needs. Specific examples include individualized behavior management techniques or understanding a child's specific mental or physical health condition. As the Bureau for Social Services moves toward quality outcome measures, providers are **required** as of 7/1/2026 to use an evidence-based parenting curriculum as applicable for each client. Some examples include Active Parenting, Positive Parenting, and Common Sense Parenting. Contact bsssnsprogram@wv.gov for the full list of WV BSS approved evidence-based parenting curriculums.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit = One hour 39 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	1. Parent must demonstrate one or more of the following: a. Inappropriate expectations of the child/adolescent b. Inability to be empathetically aware of child/adolescent needs c. Difficulty assuming role of parent d. Lack of knowledge in feeding, bathing, basic medical treatment, and basic supervision –**and** – 2. Case Plan documents a need for the service with specific goals and objectives identifying areas for improvement. 3. Service recommended by the BSS worker, family and BSS Supervisor. 4. Service cannot be met through other community resources (as in disability-specific support groups such as CHADD for those with ADHD) or family's support system. 5. CPS Initial Assessment or Continuing Formal Evaluation of Child Safety was completed and indicated a safety plan was needed to maintain the child in the home.

Continuing Stay Criteria	● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● BSS worker, family and BSS supervisor recommend the service continue and agree that placement in the home is still appropriate. ● Service cannot be met appropriately through other community resources. ● The caretaker continues to display behaviors documented on the CPS Initial Assessment or Continuing Formal Evaluation of Child Safety that indicated the need for a safety plan.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Parent requests discharge. ● Another service is warranted by change in the family's condition. ● No outlook for improvement within this level of service.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If more than one parent in the same household is involved with this intervention, bill the service through one parent. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. These skills should be addressed in the residential habilitation plan. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● Parent's individual mental health impairments and/or substance use, misuse or substance use disorder preclude provision of service in this level of care. ● Lack of social support systems indicates that a more intensive service is needed.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred

	● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the CPS Initial Assessment or Continuing Formal Evaluation of Child Safety and/or Ongoing Assessment, Case Plan and current safety plan must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
- Sociology
- Psychology
- Counseling
- Interpersonal Communication
- Human Services
- Primary or Secondary Education
- Criminal Justice
- Board of Regents with an emphasis in Human Service
- Gerontology
- Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and a**n APS/CPS screen completed with no negative information.
- All required trainings completed as indicated in provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.
- Providers are advised that submission of verification regarding evidence-based curriculum training or certification to the Community Partnership Unit is required to continue providing Individuated Parenting services and is a prerequisite for reimbursement.

Intervention Travel Time 140105

Definition:
This code is for reimbursing providers who are traveling to a home to perform a Socially Necessary Service listed below. The time taken to travel from the provider's business **exceeds one hour one way**. Mileage encumbered when transporting is billed separately. The service has been documented in the BSS 's safety plan or Case Plan and all other natural supports/options have been explored.

Service Codes:
- Adult Skill Building
- Child Community Connection
- Court Attendance
- Daily Respite
- Hourly Respite
- Individualized Parenting
- MDT Attendance
- CPS Safety Services
- Supervised Family Time One
- Supervised Family Time Two
- Scheduled In-Person Observation

This service covers actual time traveled using the shortest and/or quickest practical route to the traveler's destination. The billable service begins after the provider leaves their identified place of business and ends when provider reaches the family's home or identified location. If the provider is doing concurrent home visits, the time traveling from one home to the next must exceed one hour one way to be billed. It cannot replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties. Maximum of 16 units per day are allowable.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit= 15 min 416 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● Provider has been referred one of the designated services
Continuing Stay Criteria	● Service continues to be provided ● Progress towards goals noted on BSS safety plan and/or Case Plan has been documented ● BSS Child Welfare Worker/supervisor agrees to continue service
Discharge Criteria (Any element may result in discharge or transfer)	● No progress has been made ● Case is closed ● Family refuses in-home services
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized.

	● Excludes tolls and parking ● Does not replace the responsibility of parents, family members or family friends ● IDD waiver or ICF recipients are not eligible for this service ● If multiple people are on one transport, they must be from the same case. The trip will be billed on the case member that is farthest distance from the identified destination. If a protection order is in place between members within the case, they must be transported separately. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS 's current safety plan and/or Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance. All required trainings as indicated in the provider agreement.

Lodging 140120

Definition: Hotel or motel accommodation required for biological family members/guardians when transportation is authorized in extenuating circumstances. Lodging does not cover other convenience/entertainment services that may be available through the hotel/motel. Reimbursement will be for the least expensive single room rate available up to the current WV State rate. Charges incurred due to the failure of the transportation provider to notify the lodging facility of cancellation will be considered a personal expense of the provider.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	Unit = One night
Maximum Total Authorizations Available	As required
Admission Criteria	● Child must have a case in circuit court where rights of one parent are at issue. ● Extenuating circumstances exist related to distance, time and frequency. ● Service must be noted on the service plan. ● Goals/objectives must be present to address how utilization of this service will occur in the future. ● All transportation reimbursement for biological parents/guardians/foster/kinship placements are at the discretion of the BSS Child Welfare Worker.
Continuing Stay Criteria	● Progress toward goals/objectives has been made, but not satisfactorily achieved. ● Extenuating circumstances continue to exist related to distance, time and frequency.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals/objectives have been satisfactorily achieved. ● Child's case has been closed. ● Child has been adopted or reunified with family.
Service Exclusions	● Lodging referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for lodging reimbursement through this code. ● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the visitation plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of hotel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

MDT Attendance 140455

Definition: Reimbursement for an agency/independent provider participating in the individual Multi-Disciplinary Team Meeting to present written reports of progress, answer questions and assist in establishing the appropriate plan for the identified child and/or family. The Provider must be actively working with the client and submitting monthly summaries to the BSS worker. For Reunification service category, there **must be** circuit court involvement with a petition filed and/or it is mandated in BSS Policy or WV Statute.

Eligible for one representative per agency for:

- ASO Providers actively providing a treatment or safety service.
- Mental Health Professionals providing direct treatment (Example: Therapist)

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit = One Meeting Three units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● CPS Initial Assessment was completed and indicated a safety plan was needed to maintain the child in the home. ● There is circuit court involvement with a petition filed.
Continuing Stay Criteria	● Child(ren) returned to the home of biological parents with services. ● Case remains open
Discharge Criteria (Any element may result in discharge or transfer)	● Case is closed. ● Child(ren) are returned to the custody of BSS and are no longer placed with a biological parent.
Service Exclusions	● Provider is not already receiving reimbursement for administrative case management through a Provider agreement with BSS. ● No individual fee for service code including Medicaid Clinic or Targeted Case Management may be billed concurrently while this code is being utilized. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that

	includes: ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. The provider must be able to provide documentation showing they attended the MDT. This could be the sign-in sheet or any other type of documentation that would provide proof of their presence at the meeting. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and presented to the MDT and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Meals 140125

Definition: Food for one identified transportation provider. Meal reimbursement is intended for biological family members/guardians when transportation is authorized in extenuating circumstances. Reimbursement is limited to the actual expenses for food not to exceed the current state reimbursement rate for ASO Meals.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	Unit = One Day Cannot exceed three meals per one day
Maximum Total Authorizations Available	As required
Admission Criteria	● Child must have previously been in the custody of the BSS and returned to the caretaker from which they were removed. ● Extenuating circumstances exist related to distance, time and frequency. ● Service must be noted on the service plan. ● Goals/objectives must be present to address how utilization of this service will occur in the future. ● All transportation reimbursement for biological parents/guardians/foster/kinship placements are at the discretion of the BSS Child Welfare Worker.
Continuing Stay Criteria	● Progress toward goals/objective has been made, but not satisfactorily achieved. ● Extenuating circumstances continue to exist related to distance, time and frequency.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals/objectives have been satisfactorily achieved. ● Child's case has been closed. ● Child has been removed and placed back into BSS custody.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Expenses for entertainment and alcoholic beverages are not covered. ● Meal referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for meal reimbursement through this code. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service.

Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the visitation plan must be present in the case record. ● A copy of meal receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Parents as Teachers (PAT) 140805

Parents as Teachers (PAT) is a home-visiting parent education program that teaches new and expectant parents skills intended to promote positive child development and prevent child maltreatment. The program can target certain risk factors, or it may be used as an overall preventative program. Families can begin the program prenatally and continue through when their child enters kindergarten. Sessions are typically held for one hour in the family's home, but can also be delivered in schools, childcare centers, or other community spaces. The goals of PAT are:

- increase parent knowledge of early childhood development;
- improve parenting practices;
- promote early detection of developmental delays and health issues;
- prevent child abuse and neglect, and;
- increase school readiness and success.

The four core components are:

- personal home visits;
- supportive group connection events;
- child health and developmental screenings, and;
- community resource networks.

Only in- home setting permitted	
Initial Authorization	365 days Unit= One day 365 units per 365 days
Admission Criteria:	● At least one parent must be pregnant or parenting a newborn. ● Family is engaged in an active Child Protective Services case. ● Service must be referred by a case worker within the Bureau for Social Services or staff contracted to act in the caseworker role. ● Child must remain in their home. ● Children in BSS custody who have returned home for a trial period are eligible to receive this service. ● WV BSS Prevention or Case Plan must be provided, or the service cannot be authorized. A provider plan will not substitute this requirement.
Continued Stay:	NA
Discharge Criteria	● Goals have been accomplished. ● Family/child is not participating. ● No progress has been demonstrated. ● Child enters BSS Custody.

	● Child reaches age outside the scope of service.
Service Exclusions:	Targeted Case Management and other parenting education curricula may not be provided concurrently.
Clinical Exclusions:	Parent is in active hospital or residential based treatment without the child(ren).
Documentation:	Documentation must occur within 15 calendar days of delivery of service. ● How often the service is to be provided There must be a progress note describing: ● Each service provided ● The relationship of the service to the case ● The family's response to the service. Documentation must also include the following: • Signature with credentials • Place of service • Date of service • Start-and-Stop times

Prerequisite/Minimum Provider Qualifications:

- Agencies must sign an affiliate agreement indicating they will adhere to the essential requirements to meet model fidelity.

Private Transportation 140100

Definition: Reimbursement for the provision of transportation services in a personal vehicle. The activity(ies) that the child/youth and/or family need transportation for must be explicitly documented on the BSS safety plan or Case Plan. Examples include medical appointments for which non-emergency medical transportation could **not** be accessed, respite, and visitation, etc.

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

Please note non-emergency medical transportation (NEMT) is utilized for medically necessary services. NEMT is accessed through Modivcare. NEMT must be used for transportation to and from medical and behavioral health appointments when the person has traditional Medicaid coverage.

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit= One mile 1000 units
Maximum Total Authorizations Available	As required
Admission Criteria	● Documentation of the parent's inability to afford to pay for transportation (gas money, depreciation of vehicle, etc.) and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Safety plan or Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● BSS Child Welfare Worker, family and BSS supervisor must recommend this service. ● The child has returned to the biological/family of origin.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service.

	● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● BSS Child Welfare Worker, family and Supervisor agree that the child is appropriate to remain in their home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● NEMT can be accessed ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the Referral for Socially Necessary Services and receipts must be kept for submission to MDT if requested. ● A log of trips with date, miles and reason for trip.

Additional Service Criteria:

For relatives or non-custodial friends of the family, all credentialing and training requirements are waived. The expectations are that a family member or non-custodial friend of the family will ensure that they have a valid driver's license and minimum required insurance or will arrange the transportation with a member of their family's support group who has a driver's license, insurance, and no history of legal offenses that may endanger those being transported.

Foster/Adoptive Families are automatically eligible once they have been approved by the supervising agency. Specialized and Therapeutic Foster Care Agencies are responsible for submitting service requests to Acentra Health and reimbursing their foster families.

Public Transportation 140110

Definition: Reimbursement for the provision of transportation on buses, planes, and/or trains. This code may be used for local bus passes or long-distance bus tickets. Rental cars, tolls if a rental car is used, taxi fares and parking are also included in this service. The activity(ies) that the child/youth and/or family need transportation for must be explicitly documented on the BSS 's Case Plan. Examples include medical appointments for which non-emergency medical transportation could **not** be accessed or respite, visitation, etc. The least costly means available must be utilized. This service covers the fare for the shortest practical route to/from the traveler's destination.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit= Event
Maximum Total Authorizations Available	As required
Admission Criteria	● Documentation of the parent's inability to afford to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● BSS Child Welfare Worker, family and BSS supervisor must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT or BSS Child Welfare Worker, family and BSS supervisor agree that the youth is appropriate to remain in the home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's case is closed.

	● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes waiting time ● NEMT can be accessed ● In cases where more than one member of the family is receiving this service, bill under one identified child and reflect all present in the documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of travel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Additional Service Criteria:

- Agencies and /or private companies providing this service must be regulated through the appropriate state or federal transportation department/accrediting body.
- Individual family members, children/youth, or people identified within the case record may be enrolled for this service as a means to obtain pre-paid transportation when a provider is not enrolled. The individual is responsible for reconciling the transportation with the WV BSS when the trip is completed. The BSS Child Welfare Worker must directly assist the family in the process of accessing pre-paid transportation.

SAFE Together – Safety Management 140950

Definition: SAFE Together - Safety Management is a community-based model for safety management that involves a collaborative partnership between Child Protective Services (Ongoing Specialist) and community-based family service agencies (Safety Manager) to oversee provisions of in-home safety plans and deliver in-home safety services to ensure child safety. During this process the Safety Manager oversees and manages the services being provided in an in-home safety plan and directly provides in-home safety services to families, while the Ongoing Specialist has final decision-making authority for type of safety plan, scope of safety plan, and changes to safety plan.

Out-of-home Safety Plans also include development of Conditions for Return that are directly based on the findings of the Safety Plan Analysis. Conditions for Return statements are required, and must identify and describe the specific behaviors, conditions, or circumstances that must exist within the home environment before a child can return to the home. Aligned with reasonable efforts or active efforts, Conditions for Return entail returning a child to the parental home when impending dangers can be managed with an in-home safety plan.

Ultimately, through the ongoing application of SAFE Together - Safety Management services, the Safety Manager is focused on development of the least-restrictive and least-intrusive plan that fully ensures child safety while appropriate services are put in place while impending dangers are still active.

Provisions for service are customized to address unique family requirements. Direct interactions fluctuate between one and seven instances weekly, determined by the manifestation of safety threats, though typically occurring two to four times per week. Each personal engagement generally lasts one hour, resulting in a monthly average of twelve face-to-face service hours.

Practice Objectives of the Safety Manager are:

6. To participate in the safety planning process occurring at key decision-making points in the SAFE model intervention process.
7. To deliver safety services/resources that effectively manage Impending Danger in accordance with the in-home safety plan's specifications.
8. To proactively manage, oversee, and coordinate safety categories and safety services/resources provided by other informal safety service providers, as set forth in an in-home safety plan.
9. To help families meet Conditions for Return when there are signs that prompt reunification may be possible with more support.
10. To ensure timely communication about and coordination of the implementation and management of in-home safety plans with Child Protective Services.

Responsibilities of the Safety Manager are:

- Safety Manager is available and responsive to inquiries from the Ongoing Specialist regarding potential for involvement with an in-home safety plan in a timely manner.
- Safety Manager collaborates on the development of an in-home safety plan.
- Safety Manager contacts safety service providers to assess and determine suitability; safety manager provides information regarding suitability of safety service providers to Ongoing Specialists for necessary background checks to be completed.
- Safety Manager ensures understanding and ability to manage the safety plan as written.
- Safety Manager seeks clarification from Ongoing Specialists as needed.
- Safety Manager prepares safety service providers and ensures understanding and ability to manage the safety plan as written.
- Safety manager attends a safety management meeting when discussion is required regarding sufficiency of the safety plan and any changes that need to be made.
- Safety Manager updates the Ongoing Specialist weekly on safety service provision and the status of safety plan sufficiency.
- Safety Manager has the flexibility to go to the home beyond what is prescribed in the safety plan as dictated by the family's needs and situation.
- Safety Manager makes arrangements with safety service providers to provide coverage if a safety service cannot be delivered as scheduled and updates Ongoing Specialist.
- Safety Manager carries out tasks associated with day-to-day management of the safety plan, including contacting other safety service resources, both formal and informal, as outlined in the safety plan to assure continued safety plan sufficiency and immediately notifying the Ongoing Specialist if the safety plan is deteriorating (becomes insufficient).

Based on a referral from the Ongoing Specialist, the Safety Manager assists caregivers in meeting Conditions for Return (CFR).

- Safety manager communicates regularly with caregivers and meets with them personally as planned to facilitate attainment of Conditions for Return, discuss progress, identify continued areas of need, barriers, and involvement of caregivers.
- Safety Manager develops necessary steps and activities to address the Conditions for Return. Safety Manager updates the Ongoing Specialist weekly on progress towards achieving Conditions for Return.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	30 day authorization period 1 unit equals 1 hour 20 units per authorization period (additional units would require DoHS Review Committee approval)

Maximum Total Authorizations Available	9
Admission Criteria	● Parents/caregivers and children (0-17) who are determined by Child Protective Services to be unsafe with their families and who have cases opened for ongoing services. ● Identified as unsafe in the home that they primarily reside, but safety can be managed through an in-home safety plan. ● Imminent risk of placement ● Traumatic experiences ● Parent/Caregiver is willing to work towards Conditions for Return. ● SNS Provider is required to provide Acentra Health a copy of the completed, signed BSS Safety Plan prior to the authorization of SAFE Together - Safety Management services.
Continuing Stay Criteria	● Parents/caregivers and children (0-17) who are determined by Child Protective Services continue to be unsafe with their families and who have cases opened for ongoing services. ● Identified as unsafe in the home that they primarily reside, but safety can continue to be managed through an in-home safety plan. ● Imminent risk of placement without services. ● Parent/Caregiver remains willing to work towards Conditions for Return.
Discharge Criteria (Any element may result in discharge or transfer)	● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that the child can remain safely in the home without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system.
Service Exclusions	● ASO Safety Services can NOT be used while SAFE Together services are active. ● Safe at Home Services can NOT be used while SAFE Together services are active. ● Any transportation codes related to service provision. ● If a crisis is behavioral in nature for a child, the family should access 844-HELP-4WV (Children's Mobile Crisis Response). ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS.

Clinical Exclusions	● Severity of family' s issue(s) precludes provision of services in this level of care. ● Need for the service is not solely to clinically monitor for homicidal and/or suicidal behaviors.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. ● A copy of the completed, signed BSS Safety Plan and a copy of the conditions for return, when applicable. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:
Supervisor with a Master's degree or Bachelor's degree
Safety Managers with a Bachelor's degree or Associate degree

● Staff providing this service must have a BSW or related four-year degree. Related degrees are:
● Sociology
● Psychology
● Counseling
● Interpersonal Communication
● Human Services
● Primary or Secondary Education
● Criminal Justice
● Board of Regents with an emphasis in Human Service
● Gerontology
● Family and Consumer Science and
● Experience providing direct service to families.
● Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision and
● All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information and
● All required trainings completed as indicated in the provider agreement and
● Transportation Providers must have valid Driver's licenses from the employee's state of residence and insurance.

Supervised Family Time One 140771

Definition: Service in which visitation between family members (parent to child or child to child) is observed to ensure general safety and appropriate interaction is maintained during visitation. Visitation provider either looks in on visits between family members periodically (as determined by BSS visitation plan) or observes the visit while sitting in the room with the family members. Visitation provider will observe to ensure that no abuse, either physical or emotional, takes place during visitation. Provider will also ensure that parents do not inappropriately try to influence the child to recant prior statement to CPS/police officers. Provider will further ensure that family member visiting with the child continues to interact with the child during visitation instead of stepping outside to smoke or take phone calls, falling asleep or carrying on a conversation with the visitation provider instead of the child. During events such as these, the visitation provider will either re-direct the adult family member or if severe enough, end the visit after consultation with the child's assigned BSS Child Welfare Worker. If the visitation provider needs to contact the BSS Child Welfare Worker, they should take precaution to ensure that the visit is covered so that no further inappropriate interaction takes place while the visitation provider is out of the room contacting the BSS Child Welfare Worker. This type of visitation can be done at the family's home, an outdoor recreational setting, or in an office, whichever provides the needed safety of the children and provider. Supervised Visitation Family Time referred under Reunification can be utilized when the child has already been reunified with one parent, but the MDT has determined other parents still need supervised family time prior to reunification with all parties.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit = One half hour 104 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● Children must have an open CPS case. ● The goal of visitation must be eventual reunification with parents and/or siblings or maintenance of family ties. ● If maintenance of family ties is the goal, then an alternative plan for supervision of the visit involving an informal/unpaid provider must be arranged for as soon as possible. ● MDT has reviewed the case and determined that visitation with parents/relatives should be supervised due to threats to the child's safety. ● The visitation plan notes that supervision is required.
Continuing Stay Criteria	● Progress toward goals/objectives has been documented, but not achieved. ● MDT recommends the service continue. ● Child remains in the legal custody of the BSS and safety threats that require supervision continue to be present with at least one parent that still requires supervised family time.

Discharge Criteria **(Any element may result in discharge or transfer)**	● Goals and objectives have been substantially met. ● Supervision of family time is no longer deemed necessary and unsupervised family time and or overnight visits have begun. ● Child has been reunified with biological family. ● Parental rights have been terminated or are in the process of termination. ● Child's case is closed. ● Visitation is deemed detrimental to the child's safety and well-being.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● In cases where more than one member of the family is receiving this service, bill under one identified client and reflect all present in the documentation. ● Specialized and Therapeutic foster homes are to be the provider of this service for the youth residing in their homes; the SNS referrals for this service should be made to the Child Placing Agencies for the youth in their homes. ● The delivery of all Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials.

Documentation continued	● A copy of the CPS Initial Assessment, current Case Plan and BSS visitation plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts. ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention. ● Plan for further interventions. ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month. If more than one child present, document all participants in the intervention within the note.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Supervised Family Time Two 140770

Definition: Service in which visitation between parents and children is observed to evaluate appropriateness and level of interaction. The observer/assessor will intervene if abuse or inappropriate behavior is occurring. The purpose is to assess and monitor the appropriateness of family interaction and possible reunification. The service must be identified on the service plan. Before each visit the provider will complete the following tasks:

- Meet with the child's caseworker to learn the child's needs as identified in the CPS/YS Safety plan and to jointly develop a specified needs list to be met during the initial visits.
- Actions the provider must take to keep the child safe during visitation will be part of the list (e.g., if parent has a history of fondling child when they tickle the child or holds the child on their lap, then BSS Child Welfare Worker will tell provider not to allow the parent to tickle the child or have the child sit on the parent's lap). Also, things that the parent should bring to the visit like a well-stocked diaper bag if infant, food if the visit takes place during the child's lunch time or snack time, books or toys the child likes to have present when visiting with the parent will be included on this needs list. The provider will always suggest that the visitation take place in the parent's home and as soon as possible after the child was removed from the home. If the BSS Child Welfare Worker does not agree that the visitation can take place in the parent's home, the provider will document reason why that is not possible. If face-to-face visitation is not possible, the provider should discuss what other types of contact are possible between the parents and child such as letters, text messages, emails, phone calls, etc. (none of these can be supervised by the provider). Also, the provider will obtain the BSS Visitation Plan from the BSS Child Welfare Worker. If the provider is unable to obtain the plan, the provider will write a visitation plan.
- Call Resource/Foster Parents to obtain information related to the impact of separation on the child and the child's behaviors in order to refine the list of needs to be met during visits. Provider will discuss any behaviors the child has been exhibiting leading up to the visit. Provider will inquire about what the Resource/Foster Parent did to prepare the child for the visit each time. This preparation needs to be consistent with the court order, if it is specific.
- Contact parent(s) to confirm the visit time and place, identify any barriers to visits and arrange to meet with the parent one hour before the visit. During this time, the provider will collect any letters or cards, gifts, etc. that the parent has brought for the child to inspect them and check for appropriateness. If any questions, provider will explain to parent that the item or items will be kept by provider until they have inspected them with the BSS Child Welfare Worker. If there are items from the last visit that were not approved by the worker, the provider will give them back and instruct the parent that if they have any questions why there not approved, to contact the BSS Child Welfare Worker. Provider and BSS Child Welfare Worker will meet with parents to explain what is expected of them during the visitation – such as not discussing the court case with the child, not speaking negatively about the Resource/Foster Parents, showing up on time, calling to cancel well in advance if unable to attend the visit, the need to remain the parent during the visit meaning that the parent is in charge of controlling their child during the visit, pacify the child if child becomes upset during the visit, no cell phone usage during the visit, no unapproved visitors, and in general making the most of the visit time. The provider will explain to the parent that the provider will not be interacting with the parent during the visit, only observing, so that the parent does not become upset if the provider does not "visit" with the parent.
- Notify the Resource/Foster Parent(s) of the planned visit and schedule transportation as needed. Provider will always ask if the Resource/Foster Parents can transport the child to the visit or at least part of the way to the visit.

By the end of the first month, the provider will have arranged visitations to continue as documented in the Child's Case Plan by:

- Clarifying what needs must be met during future visits.
- Deciding what special arrangements will be made for visits.
- Identifying the level of support the parent requires during visits and consider who might replace the visitation specialist in the future, such as Resource/Foster Parent, family member, etc.
- Arranging for transportation as necessary, even in those cases when it is determined that continued supervision of visits is unnecessary.
- Maintaining weekly contact with the BSS Child Welfare Worker to update placement information.

The provider will perform the following functions for each visit:

- Meet with the parent before the visit to help the parent anticipate their own and the child's reactions during the visit and to discuss the needs to be met during the visit.
- Assist the parent as necessary during the visit.
- Meet with the parent after the visit to discuss how the parent met the child's needs and to plan changes in the next visit.
- Help the parent understand the importance of keeping his or her commitment to visit the child.
- Speak with the Resource/Foster Parent after the visit to discuss any behaviors or for the child reactions the child may display.
- Prepare notes about the parent's skill in meeting the child's needs during the visit and continuously refine the needs list.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit = One half hour 104 units per 92 days
Maximum Total Authorizations Available	2
Admission Criteria	● Child remains in the legal custody of BSS and safety threats that require supervision continue to be present with at least one parent that still requires supervised family time. ● MDT has reviewed the case and determined that visitation with parent/relatives needs to be supervised due to threats to child's safety **and** the case requires the SNS provider make an assessment and recommendation as to if reunification is possible/advisable. ● The visitation plan notes that supervision is required. ● The Case Plan notes that assessment and recommendation regarding reunification are necessary. ● The needs list indicates what specific issues are to be monitored/observed during the Family Time.
Continuing Stay Criteria	● Progress toward goals/objectives has been documented, but not achieved. ● MDT recommends the service continue.

Discharge Criteria **(Any element may result in discharge or transfer)**	● Goals and objectives have been substantially met. ● Child has been reunified with biological family. ● Parental rights have been terminated or are in the process of termination. ● Child's case is closed. ● Visitation is deemed detrimental to the child's safety and well-being.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● In cases where more than one member of the family is receiving this service, bill under one identified client and reflect all present in the documentation. ● Specialized and Therapeutic foster homes are to be the provider of this service for the youth residing in their homes; the SNS referrals for this service should be made to the Child Placing Agencies for the youth in their homes. ● The delivery of all Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials ● A copy of the CPS Initial Assessment, current Case Plan and BSS visitation plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month If more than one child present, document all participants in the intervention within the note.

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree. Related degrees are:
- • Sociology
- • Psychology
- • Counseling
- • Interpersonal Communication
- • Human Services
- • Primary or Secondary Education
- • Criminal Justice

- Board of Regents with an emphasis in Human Service
- Gerontology
- Family and Consumer Science **and**

• Experience providing direct service to families.
• Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
• All providers must have an acceptable CIB through WV Cares **and**
• An APS/CPS screen completed with no negative information **and**
- All trainings completed as indicated in the provider agreement **and**

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Scheduled In-Person Observation 140780

Definition: "Eyes on" oversight required to provide structure and ensure performance of developmentally appropriate activities necessary to carry out Activities of Daily Living and to ensure safety for the identified client, family and/or community. The identified child or family requiring supervision must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety, permanency and well-being. This service can't be used for spot checks, surprise visits, safety checks or unannounced visits, please see the Unscheduled *In-Person Observation* service code.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit = One hour 39 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● Structure and environmental control are needed to monitor child or parent's reaction to stress, inconsistent parenting techniques, impulsive reactions or detrimental expectations, and maintain safety; **- or -** ● Structure and environmental control are needed to ensure safety of a child and the family due to the volatile, aggressive and/or self-harmful behaviors of a child or family member; **-or-** ● Previous attempts at appropriate structure and environmental control are documented and have been unsuccessful; **-and-** ● CPS Initial Assessment was completed, and it was determined a safety plan was needed; **-and-** ● Scheduled In-Person Observation is identified on the Safety Plan that has been reviewed by the BSS Child Welfare Worker, family and BSS Supervisor; **-and-** ● Service cannot be safely provided through a community resource or the family support system.
Continuing Stay Criteria	● Progress toward the needs and case plan goals on the plan has been documented but not reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement is still appropriate. ● No less restrictive service/intervention is available. ● Service cannot be safely provided through a community resource or the family support system. ● Family continues to display behaviors documented on the CPS Initial Assessment that indicated the need for a safety plan.

Discharge Criteria **(Any element may result in discharge or transfer)**	● Progress toward the needs and case plan goals on the plan has been documented and reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement can be maintained without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system. ● Another service is warranted by lack of positive change in the youth/family's behavior.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's or adult's issues precludes provision of services in this level of care. ● Need for the service is not solely due to clinically monitor for homicidal and/or suicidal behaviors. ● This service cannot be implemented during school/day care hours if child is enrolled or should be enrolled and attending school.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials

	● A copy of the CPS Initial Assessment and the current safety plan and/or Case Plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Step-By-Step Parenting Program 140905

Definition: Utilizing skill sets and materials obtained through the Step-by-Step Parenting Program Workshops to provide direct face-to-face services to improve parental competence and knowledge of:

- Home Safety and First Aid
- Parent-Child Interactions
- Problem Solving
- Discipline
- Appropriate supervision
- Encouragement of child/adolescent care, age-appropriate development
- Realistic expectations and standards of child/adolescent behavior of identified child

This service should be used to correct specific parenting skill deficits for parents with learning differences. This can include parents with intellectual disabilities, acquired brain injury, slow learners, learning disabilities, and low reading skills. This service is provided in a one-on-one setting and is highly individualized to meet the parent's needs. Specific examples include individualized behavior management techniques or understanding a child's specific mental or physical health condition. Providers will utilize the Step-by-Step Parenting Program Manual as well as the step-by-step checklist to assess and teach child-care skills to parents. As the Bureau for Social Services moves toward quality outcome measures, providers are required to attend the Step-by-Step Parenting Program Workshop before services can start.

<u>Goals of the Program:</u>

- Objectively identify impediments and supports to successful parenting, and specific parenting skill deficits, to design a comprehensive family intervention.
- Help the family organize supports and services to meet the family's needs and keep the child safe.
- Increase parenting skills to reduce the risk of, or actual, child neglect through in-home step-by-step parent training.
- Improve child health, development, and behavior problems related to parenting skill deficits.
- Have the parents maintain learned skills over time.
- Have the parents generalize learned skills to all situations in which they are needed.
- Reduce need for out-of-home care placements and permanent removal of the child.
- Help parents to decrease reliance on paid supports.
- Help parents to develop a natural support network for the family.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	• 92 days • Unit = One hour • 39 units per 92 days
Maximum Total Authorizations Available	4

Admission Criteria	**Admission Criteria** 1.Parent must demonstrate one or more of the following: a. Learning difficulty and/or an IDD Condition b. Inappropriate expectations of the child/adolescent c. Inability to be empathetically aware of child/adolescent needs d. Difficulty assuming role of parent e. Lack of parenting skills, parents with learning differences, risk of child neglect, risk of child developmental delay and behavior problems f. Lack of knowledge in feeding, bathing, basic medical treatment, and basic supervision –**and** - 1. Treatment plan documents a need for the service with specific goals and objectives identifying areas for improvement. 2. Service recommended by the BSS Worker, family, and BSS Supervisor. 3. Service cannot be met through other community resources. 4. CPS Initial Assessment or Continuing Formal Evaluation of Child Safety was completed and indicated a safety plan was needed to maintain the child in the home for family preservation.
Continuing Stay Criteria	• Progress toward treatment plan goals/objectives is documented but has not been achieved. • BSS worker, family and BSS supervisor recommend the service continue and agree that the current placement is still appropriate. • Service cannot be met appropriately through other community resources. • The caretaker continues to display behaviors documented on the CPS Initial Assessment that indicated the need for a safety plan.
Discharge Criteria (Any element may result in discharge or transfer)	• Goals and objectives have been met substantially. • Parent requests discharge. • Another service is warranted by change in the family's condition. • No outlook for improvement within this level of service.
Service Exclusions	• No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. • If more than one parent in the same household is involved with this intervention, bill the service through one parent.

	• Those receiving ICF/IDD services are not eligible for this service. • The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. • Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	• Severity of child's issues precludes provision of services in this level of care. • Parent's individual mental health impairments and/or substance or alcohol abuse preclude provision of service in this level of care. • Lack of social support systems indicates that a more intensive service is needed.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes: • Code or service name • Summary of the intervention • Client's response to the intervention • Relation to the service plan • Location where service occurred • Duration • Start/stop time • Signature of the provider and his/her title or credentials A copy of the CPS Initial Assessment, treatment plan and current safety plan must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart and one sent to the referring worker. This monthly progress report must contain: • A list of dates of service and the specific services rendered and/or attempts • Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention • Plan for further interventions • Any identified unmet concrete or service needs • Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
    - Sociology
    - Psychology
    - Counseling
    - Interpersonal Communication
    - Human Services
    - Primary or Secondary Education
    - Criminal Justice
    - Board of Regents with an emphasis in Human Service
    - Gerontology
    - Family and Consumer Science **and**
- Experience providing direct service to families.
- **Staff must also show proof of attendance for the Step-by-Step Parenting Program Workshop and The Family Game Workshop.**
- Staff person must be under supervision of a licensed social worker, counselor, or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and a**n APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.
- The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS.

Transportation Time 140104

Definition:

This code is for providers whose only service is transporting a BSS client(s). These providers/transports are not associated with their own provision of a socially or behavior health medically necessary service. The provider is not engaged in an otherwise billable activity. Mileage encumbered when transporting is billed separately. The service has been documented in the BSS child/family's safety and/or Case Plan and all other natural supports/options have been explored including BSS staff and are not available for this event.

Activities:

- Drugs Screens
- Not eligible for NEMT

The billable service begins when the provider leaves their identified place of business or home, whichever is shortest, and ends when provider returns to this location. Waiting time at the identified destination is included. The maximum number of hours this service may be provided in a 24-hour period is 12 hours or 48 units. Ten hours for when consumers are in the vehicle and up to 12 hours total. If an overnight trip is required, no more than 12 hours or 48 units may be invoiced. When not in the vehicle, the provider must remain at the location with the client.

If Non-Emergency Transport (NEMT) is available, this service may not be used. It can't replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties.

No providers may utilize this service to transport a child to a residential placement in or out of state.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	208 units/92 days Unit= 15 minutes Maximum of 48 units within a 24-hour period
Maximum Total Authorizations Available	3
Admission Criteria	● Documentation of the parent's inability to transport themselves or the child to a service necessary for safety, permanency or wellbeing for the child and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Safety plan and/or Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement.

	● BSS Child Welfare Worker and supervisor agree that due to the nature of the complaint, the child can be safely served in the home/community with supportive services.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● BSS Child Welfare Worker and Supervisor agree that the child is appropriate to remain in their home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Parent requests discharge. ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of goals/objectives on the service plan. ● No outlook for improvement within this level of service
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● Excludes tolls and parking ● NEMT is available ● Does not replace the responsibility of parents, family members or family friends ● IDD waiver or ICF recipients are not eligible for this service ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip, signature of the provider and their title or credentials. ● A copy of the BSS 's current safety plan and/or Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance. All required trainings be completed as indicated in the provider agreement.

If multiple people are on one transport, they must be from the same case. The trip will be billed on the case member that is farthest distance from the identified destination. If a protection order is in place between members within the case, they must be transported separately.

Unscheduled In-Person Observation 140665

Definition: "Eyes on" oversight required to ensure safety for the identified client, family and/or community. The identified child or family requiring supervision must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety, permanency and well-being. **This service is intended for safety checks or unannounced visits.** The BSS Safety Plan will have been completed and sent to the SNS provider outlining specifically what safety concerns the SNS Provider should be checking. The BSS Child Welfare Worker will provide the SNS Provider with the appropriate staff contact information/hotlines and protocols to follow if the SNS provider finds the family in violation of the current safety plan, case plan, protective order, court order, etc. The identified client/family should have been educated by the BSS Child Welfare Worker during the safety planning process about BSS expectations for maintaining safety in the household. The identified client/family will not be held at fault for not being at home when SNS provider arrives for an unscheduled In-Person Observation visit. Unscheduled In-Person Observation referred under Reunification can be utilized when the child has already been reunified with one parent, but the MDT has determined other parents still need supervised family time prior to reunification with all parties.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit = 15 min 156 units per 92 days
Maximum Total Authorizations Available	As Required
Admission Criteria	● Structure and environmental control are needed to ensure safety of a child and the family due to the volatile, aggressive and/or self-harmful behaviors of a child or family member; **-or-** ● CPS Initial Assessment was completed, and it was determined a safety plan was needed; **-and-** ● Unscheduled In-Person Observation is identified on the Safety Plan that has been reviewed by the BSS Child Welfare Worker, family and WVBSS Supervisor; **-and-** ● Service cannot be safely provided through a community resource or the family support system. ● BSS Safety Plan has been completed and submitted to provider at time of service referral with instructions for what situations provider is to be monitoring and listing of next steps for provider if situation is found present in home. ● The MDT **or** BSS Child Welfare Worker, Family and BSS supervisor have reviewed progress since removal of the child and recommend reunification which has occurred with one biological parent.

Continuing Stay Criteria	● Progress toward the identified goals/objectives on the plan has been documented but not reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement is still appropriate. ● No less restrictive service/intervention is available. ● Service cannot be safely provided through a community resource or the family support system. ● Family continues to display behaviors documented on the CPS Initial Assessment that indicated the need for a safety plan.
Discharge Criteria **(Any element may result in discharge or transfer)**	● Progress toward the identified goals/objectives on the plan has been documented and reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement can be maintained without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system. ● Another service is warranted by lack of positive change in the youth/family's behavior.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's or adult's issues precludes provision of services in this level of care. ● Need for the service is not solely due to clinically monitor for homicidal and/or suicidal behaviors. ● This service cannot be implemented during school/day care hours if child is enrolled or should be enrolled and attending school.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies.

	A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the CPS Initial Assessment and the current safety plan and/or Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

CPS Adoption Preservation Services

Used when there are no CPS or YS issues for families who have a finalized adoption of a child from the WV BSS and still live in West Virginia. Left open for payment purposes.

Agency Transportation 150106

Definition: Reimbursement for the provision of transportation services. The activity(ies) that the child/youth and/or family need transportation for must be explicitly documented in the child/family's service plan Examples include medical appointments for which non-emergency medical transportation could **not** be accessed or respite, recreation activities, etc.

This code may also be utilized for providers' mileage encumbered when the following services from the Adoption Preservation Program Option have been implemented within the child/family's home:

- Individualized Parenting
- Case Management
- Crisis Respite

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

If a provider is unable to deliver the identified service upon traveling to the home, this code may be billed up to three times within the ninety-two (92) day authorization period when the following conditions are met:

- The provider/agency has a policy and procedure regarding the expectations of the families being served. The importance of keeping scheduled appointments, notifying the provider when an appointment needs to be cancelled and the means in which the BSS will be notified if appointments are not kept are reviewed with the client(s).
- The provider/agency has a policy and procedure about notifying the Department regarding youth/family's non-compliance with established scheduled appointments.
- There is documentation of the visit being scheduled within the case record.

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Child Protective Services
Program Option	Adoption Preservation
Initial Authorization	92 days Unit= One mile 1000 miles
Maximum Total Authorizations Available	2
Admission Criteria	● Assessment and/or service plan must document the need for one of the specified services ● Provider, family and BSS Adoption Preservation Contact recommend the service.
Continuing Stay Criteria	● Family continues to explore social support system members to provide the service. ● Provider, family and BSS Adoption Preservation Contact recommend the service continue.

	● Service cannot be appropriately provided through a community resource. ● Provider, family and BSS Adoption Preservation Contact agree that the child is appropriate to remain in their home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's adoption preservation case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Case is formally opened with Child Protective Services or Youth Services.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● If more than one member of a case is being transported, bill under one FACTS Client ID and note all present in documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. A monthly progress summary must be completed, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain:

	● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect (CPS) or behavioral issues (YS) were reported within the month

Additional Service Criteria:

Paraprofessional staff with a High School Diploma/GED Certificate and one year's experience providing direct service to families is the minimum requirement to provide this service. Paraprofessional staff must be under supervision of an individual with a BSW or related four-year degree, a social work license and have two years post college experience providing direct service to families. All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative findings. All required trainings be completed as indicated in the provider agreement. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Case Management Services 150400

Definition: Case Management services are defined as those services that assist families to gain access to needed medical, behavioral health, social, educational and other services. Case Management Services are to be provided at a level of intensity required by the recipient. Services must be provided in settings accessible to the recipient face to face. The individual must be given the option of whether or not to utilize case management services. Within case management there are a number of activities that are recognized as components of case management. These components include case planning, linkage/referral, advocacy, family crisis response planning, and service plan evaluation.

Case planning: The case manager will assure and facilitate the development of a comprehensive individualized service plan. The service plan records the full range of services, treatment and/or other support needs necessary to meet the recipient's goals.

Linkage/Referral: Case managers assure linkage to all internal and external services and supports that have been identified in the recipient's service plan.

Advocacy: Case management advocacy refers to the actions undertaken on behalf of the recipient in order to ensure continuity of services, system flexibility, integrated services, proper utilization of facilities and resources and accessibility to services. Case management advocacy includes assuring that the recipient's legal and human rights are protected.

Family Crisis Response Planning: The case manager must assure that adequate and appropriate crisis response procedures are available to the recipient and identified in the individual service plan.

Service Plan Evaluation: The case manager will continually evaluate the appropriateness of the individual's service plan and make appropriate modifications, establish new linkages or engage in other dispositions as necessary. The case manager will have face-to-face contact with the recipient.

Supervision: "Eyes on" oversight required to confirm implementation and review progress of service plan.

Target Population	Child Protective Services
Program Option	Adoption Preservation
Initial Authorization	92 Days Units = 15 minutes 72 units per 92 days
Maximum Total Authorizations Available	4
Admission Criteria	● Families must have post-finalized adopted children -**and**- ● The children must have previously been in the custody of the West Virginia Department of Human Services (the Department or child placing agency contracted with the Department to provide adoptive homes for foster children) -**and**- ● Consumer/Family has been identified by the WV BSS as having risk factors that may lead to possible disruption of an adoption. **-and**- ● BSS Child Welfare Worker and supervisor agree that due to the nature of the current situation, the child can be safely served in their home/community with supportive services.
Continuing Stay Criteria	● Service cannot be met appropriately through other community resources.

	● Parents/caretakers or child/youth continue to display the behaviors that were documented in the family assessment that indicated the need for services. ● Family has explored appropriate social support system members capable of providing service to the identified client. ● Service continues to be needed to provide support to maintain adoption as identified in the service plan. ● Service plan identifies the current plan for the child to remain in the legal custody of the adoptive parent(s).
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have substantially been met. ● Parent requests discharge. ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of goals/objectives on the service plan. ● No outlook for improvement with this level of service. ● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client. ● Case is formally opened with Child Protective Services or Youth Services.
Service exclusions	● Consumers with Waiver or ICF/IDD funding should receive this service through a Service Coordination Provider. ● Children adopted within the state who were not adopted from the custody of the WV BSS. ● An adoption that disrupts outside of the state of West Virginia. ● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized.
Clinical Exclusions	● Consumer needs do not indicate the need for the service based on the family assessment.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time

	● Signature of the provider and their title or credentials A monthly progress summary must be completed, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Name of BSS staff and date of any new allegations of abuse/neglect (CPS) or behavioral issues (YS) reported within the month

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology
  - Psychology
  - Counseling
  - Interpersonal Communication
  - Human Services
  - Primary or Secondary Education
  - Criminal Justice
  - Board of Regents with an emphasis in Human Service
  - Gerontology
  - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and** an APS/CPS screen completed with no negative information **and**
- All required trainings be complete as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

*Note: Providers are recommended to have or participate in training in the National Training and Development Curriculum (NTDC) Training, foster care, RAD and adoption issues.

Crisis Respite 150207

Definition: Planned break for primary caretakers who are in challenging situations in which a trained provider, friend or family member assumes care giving and supervision of child(ren) for a brief period of time. Service may be provided in or out of the natural home on a daily basis. Service may also be utilized if the caretaker has a scheduled inpatient medical procedure.

Target Population	Child Protective Services
Program Option	Adoption Preservation
Initial Authorization	92 days Unit= One day 3 units per 92 days
Maximum Total Authorizations Available	14 days
Admission Criteria	● Families must have post-finalized adopted children -**and**- ● The children must have previously been in the custody of the West Virginia Department of Human Services (the Department or child placing agency contracted with the Department to provide adoptive homes for foster children) –**and**- ● Family has explored appropriate social support system members capable of providing service to the identified client. ● BSS has referred the child/family for the service ● Parent(s) are in need of a break from supervision and care-giving responsibilities due to continual stress or planned inpatient medical procedure.
Continuing Stay Criteria	● Parents/caretakers or child/youth continue to display the behaviors that were documented in the assessment that indicated the needed services. ● Progress towards the goals and objectives on the service plan has been noted, but not satisfactorily achieved. ● Family continues to explore appropriate social support system members capable of providing service to the identified client. ● Service continues to be needed to provide support to maintain the adoption as identified on the service plan. ● The service plan identifies the current plan as the child is to remain in the custody of the adoptive parents.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met. ● Parent requests discharge. ● Another service is warranted by change in the child's condition. ● No progress has been documented toward achievement of goals/objectives on the service plan. ● No outlook for improvement with this level of service.

	● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client.
Service Exclusions	● No individual fee for service social necessity may be billed concurrently while this code is being utilized. ● Excludes placement at Emergency Shelters for children not in custody. ● Excludes children who have never been in the custody of the WV BSS. ● Excludes children/youth receiving Waiver Services. ● Excludes those 18 or older ● Excludes adoptions that disrupt outside of West Virginia.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● The child can effectively and safely be treated at a lower level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the service plan must be present in the case record.

Additional Service Criteria: Paraprofessional staff with a High School Diploma/GED Certificate and one year's experience providing direct service to families is the minimum requirement to provide this service. Paraprofessional Staff must be under supervision of an individual with a BSW with social work licensure or related four-year degree, a social work license and have two years post college experience providing direct service to families. All providers must have an acceptable CIB through WV Cares and an APS/CPS screen with no negative findings. All required trainings completed as indicated in the provider agreement. See Appendix 1.

Respite Provider Qualifications:

- Provider must be age eighteen (18) or older.
- Provider must have a high school diploma or GED.
- Must have a Criminal Investigation Bureau (CIB) background check meeting WV BSS policy standards. See Appendix 1.
- An APS/CPS screen is completed with no negative outcome. See Appendix 1.
- Current certification in CPR- documentation must include the name of the course, name of participant, the signature of the instructor and date of class. Unless otherwise specified by the instructor, certification will be valid for a one (1) year period.
- Current certification in First Aid- documentation of First Aid certification must include the course name, the name of participant, the signature of the instructor and the date of class.

Unless otherwise specified by the instructor, certification will be valid for a three (3) year period.

- Training indicating an overview of adoption issues, behavioral health conditions and developmental disabilities.
- Consumer Rights and Confidentiality Training.
- Recognition and Reporting Abuse and Neglect Training.
- Documentation Training.

Functional Family Therapy 150800

FFT is a family intervention program for dysfunctional youth with disruptive, externalizing problems. Target populations range from at-risk pre-adolescents to youth with moderate to severe problems such as conduct disorder, violent acting-out, and substance use, misuse or substance use disorder. While FFT targets youth aged 11-18, younger siblings of referred adolescents often become part of the intervention process.

FFT Program goals are to eliminate the youth's referral problems, improve prosocial behaviors and improve family and individual skills. The program is broken down into five phases of intervention:

- Engagement- Maximize family initial expectation of positive change;
- Motivation- Create a motivational context for long-term change;
- Relational Assessment- Complete relational (functional) assessment of family relationships to provide foundation for changing behaviors in subsequent phases;
- Behavior Change- Facilitate individual and interactive/ relational change;
- Generalizations- Maintain individual and family change and facilitate change in multiple systems.

Outpatient Clinics or in home setting permitted	Unit= One Day Authorization 120 units per 120 days
Admission Criteria:	● Service must be referred by BSS ● Child must remain in their home ● Children in BSS custody who have returned home for a trial period
Continued Stay:	● Child must remain in their home or ● Children in BSS custody have returned home for a trial period ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement.
Discharge Criteria	● Goals have been accomplished ● Family/youth is not participating ● No progress has been demonstrated ● Youth enters BSS custody ● Youth turns 19 years of age
Service Exclusions:	● Behavioral or mental health therapy ● Any transportation codes related to service provision

	● Other parenting education programs
Clinical Exclusions:	● In active withdrawal ● In acute psychiatric care
Documentation:	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed within 15 days for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the referral for Functional Family Therapy. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. BSS Standard Form must be used. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if

	family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Prerequisite/Minimum Provider Qualifications:

- Qualifications can vary for therapists, but to become an onsite Program Supervisor a minimum of master's level education is required. A formal certification must be present in provider/employee records;
- Trauma-informed care training.

*Agencies must sign an affiliate agreement indicating they will adhere to the Essential Requirements to meet model fidelity.

Healthy Families America 150810

HEALTHY FAMILIES AMERICA (HFA) is a voluntary evidence-based home visiting program serving pregnant women and families of infants and young children. HFA is a prevention program dedicated to supporting families in their quest to be the best parents they can be. Program services are designed to strengthen families during the critical first years of a child's life. The child's age at HFA enrollment is prenatal to age 24 months as services are focused primarily on prevention through education and support in the homes of new parents. All HFA Program criteria are based on proven best practice standards. Intensity of services is based on each family's needs, beginning weekly and moving gradually to quarterly home visits as families become more self-sufficient. The Bureau of Social Services contracts with community providers who implement the program in their local communities.

The goals of Healthy Families America (HFA) are:

•Build and sustain community partnerships to systematically engage overburdened families in home visiting services prenatally or at birth

•Cultivate and strengthen nurturing parent-child relationships

•Promote healthy childhood growth and development

•Enhance family functioning by reducing risk and building protective factors

HFA is theoretically rooted in the belief that early, nurturing relationships are the foundation for life-long, healthy development. Building upon attachment, bio-ecological systems theories, and the tenets of trauma-informed care, interactions between direct service providers and families are relationship-based; designed to promote positive parent-child relationships and healthy attachment; services are strengths-based; family-centered; culturally sensitive; and reflective.

The HFA model is based upon 12 critical elements. These are:

1. Initiate services prenatally or at birth and can continue until the child is five years of age.
2. Use standardized screening and assessments such as the Family Resilience and Opportunities for Growth to systematically identify and assess families most in need.
3. Offer services voluntarily and use positive, persistent outreach efforts to build family trust.
4. Offer services intensely and over the long-term, with well-defined criteria and a process for increasing or decreasing frequency of service.
5. Consider the culture of families in the services offered such that staff understands, acknowledges, and respects cultural differences of families.
6. Focus on supporting the parent(s) as well as the child through services that cultivate the growth of nurturing, responsive parent-child relationships and promote healthy childhood growth and development.
7. Link all families to a medical provider to ensure optimal health and development and other services to meet their assessed needs.
8. Ensure Family Support Specialists have an adequate time to spend with each family to meet their needs and to plan for future activities.

9. Select service providers based on:
    a. Their personal characteristics
    b. Their willingness to work in, or their experience working with, culturally diverse communities
    c. Their knowledge and skills to do the job
10. Provide intensive training to service providers specific to their role to understand the essential components of family assessment, home visiting, and supervision.
11. Ensure service providers have a framework, based on education or experience, for handling the variety of experiences they may encounter when working with at-risk families
12. Give service providers ongoing, effective supervision so they can develop realistic and effective plans to empower families.

Only in- home setting where the child is/will be living is permitted. Any alternate locations must be approved in writing.	
Initial Authorization	365 days Unit= One day 365 units per 365 days
Admission Criteria:	● Parent must be pregnant or parenting a newborn, children can be enrolled up to 24 months and continue to age 5. ● Intake assessments must occur, and program accepted by the family prior to the target child turning 24 months ● Service must be referred by BCF caseworker ● Child must remain in their home ● Children in BSS physical custody who have returned home for a trial visit ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement. ● May also be used for children in foster care who are pregnant and/or parenting.
Continued Stay:	● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● BSS worker, family and BSS supervisor recommend the service continue and

	agree that placement in the home is still appropriate. ● Service cannot be met appropriately through other community resources.
Discharge Criteria	● Goals have been accomplished ● Family/child is not participating ● No progress has been demonstrated ● Child enters BSS Legal Custody
Service Exclusions:	Targeted Case Management and other parenting education curricula.
Clinical Exclusions:	Parent is in active hospital or residential based treatment without the child(ren).
Documentation:	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed within 15 days for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the current Safety Plan and the CPS Initial Assessment and/or Ongoing Assessment must be present in the case record. WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A

	provider plan will not substitute this requirement. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart and one sent to the referring worker. BSS Standard Form must be used. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Prerequisites/minimum qualifications:

Agencies must sign an affiliate agreement indicating they will adhere to the Essential Requirements to meet model fidelity.

Individualized Parenting 150300

Definition: Direct face-to-face services to improve parental competence and knowledge of:

- Basic child/adolescent care skills
- Nurturing
- Discipline strategies
- Appropriate supervision
- Encouragement of child/adolescent care, age-appropriate development
- Realistic expectations and standards of child/adolescent behavior

This service should be used to correct specific deficits in parenting. This service is provided in a one-on-one setting and is highly individualized to meet the parents' needs. Specific examples include individualized behavior management techniques or understanding a child's specific mental or physical health condition. As the Bureau for Social Services moves toward quality outcome measures, providers are **required** as of 7/1/2026 to use an evidence-based parenting curriculum as applicable for each client. Some examples include Active Parenting, Positive Parenting, and Common Sense Parenting. Contact bsssnsprogram@wv.gov for the full list of WV BSS approved evidence-based parenting curriculums.

Target Population	Child Protective Services
Program Option	Adoption Preservation
Initial Authorization	92 days Unit = One hour 39 units per 92 days
Maximum Total Authorizations Available	2
Admission Criteria	• Families must have post-finalized adopted children -**and**- • The children have previously been in the custody of the West Virginia Department of Human Services (the Department or child-placing agency contracted with the Department to provide adoptive homes for foster children) -**or**- • Family has explored appropriate social support system members capable of providing service to the identified client. • Service recommended by the BSS worker, family and BSS Supervisor. • Service cannot be met through other community resources (as in disability-specific support groups such as CHADD for those with ADHD) or family's support system.
Continuing Stay Criteria	• Progress toward service plan goals/objectives is documented but has not been achieved. • BSS worker, family and BSS supervisor recommend the service continue and agree that placement in the home is still appropriate. • Service cannot be met appropriately through other community resources.
Discharge Criteria (Any element may result in discharge or transfer)	• Goals and objectives have been met substantially. • Parent requests discharge. • Another service is warranted by change in the family's condition.

	● No outlook for improvement within this level of service. ● Case is formally opened with Child Protective Services or Youth Services.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If more than one parent in the same household is involved with this intervention, bill the service through one parent. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● Parent's individual mental health impairments preclude provision of service in this level of care. ● Lack of social support systems indicates that a more intensive service is needed.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the service plan generated by the provider must be present in the case record. A monthly progress summary must be completed, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs

	● Date and name of BSS staff to which any new allegations of abuse/neglect (CPS) or behavioral issues (YS) were reported within the month

Additional Service Criteria

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology
  - Psychology
  - Counseling
  - Interpersonal Communication
  - Human Services
  - Primary or Secondary Education
  - Criminal Justice
  - Board of Regents with an emphasis in Human Service
  - Gerontology
  - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and** an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.
- Providers are advised that submission of verification regarding evidence-based curriculum training or certification to the Community Partnership Unit is required to continue providing Individuated Parenting services and is a prerequisite for reimbursement.

*Note: Providers are recommended to have or participate in training in the PRIDE curriculum, foster care, RAD and adoption issues.

Meals 150125

Definition: Food for one identified transportation provider. Meal reimbursement is intended for biological family members/guardians when transportation is authorized in extenuating circumstances. Reimbursement is limited to the actual expenses for food not to exceed the current state reimbursement rate for ASO Meals.

Target Population	Child Protective Services
Program Option	Adoption Preservation
Initial Authorization	92 Days Unit = One day of meals
Maximum Total Authorizations Available	As required
Admission Criteria	● Documentation of the parent's inability to afford to provide this service and the subsequent reason must be in the consumer's record. ● Assessment must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● Provider, family and BSS Adoption Preservation Contact must recommend this service.
Continuing Stay Criteria	● Progress toward obtaining meals has been noted, but family still does not have the financial means to provide. ● Family continues to explore social support system members to provide the service. ● Provider, family and BSS Adoption Preservation Contact recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● Provider, family and BSS Adoption Preservation Contact agree that the child is appropriate to remain in their home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's adoption preservation case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Case is formally opened with Child Protective Services or Youth Services.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized.

	● Expenses for entertainment and alcoholic beverages are not covered. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Meal referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for meal reimbursement through this code. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of meal receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. BSS Adoption Preservation Contact may request to review receipts and invoices at any time.

Lodging 150120

Definition: Hotel or motel accommodation required for biological family members/guardians when transportation is authorized in extenuating circumstances. Lodging does not cover other convenience/entertainment services that may be available through the hotel/motel. Reimbursement will be for the least expensive single room rate available up to the current WV State rate. Charges incurred due to the failure of the transportation provider to notify the lodging facility of cancellation will be considered a personal expense of the provider.

Target Population	Child Protective Services
Program Option	Adoption Preservation
Initial Authorization	92 Days Unit = One night
Maximum Total Authorizations Available	As required
Admission Criteria	● Documentation of the parent's inability to provide this service and the subsequent reason must be in the consumer's record. Assessment must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● Provider, family and BSS Adoption Preservation Contact must recommend this service.
Continuing Stay Criteria	● Progress toward lodging has been noted, but family still does not have the financial means to provide. ● Family continues to explore social support system members to provide the service. ● Provider, family and BSS Adoption Preservation Contact recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● Provider, family and BSS Adoption Preservation Contact agree that the child is appropriate to remain in their home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's adoption preservation case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Case is formally opened with Child Protective Services or Youth Services.

Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of hotel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Adoption Preservation Contact may request to review receipts and invoices at any time.

Private Transportation 150100

Definition: Reimbursement for the provision of transportation services. The activity(ies) that the child/youth and/or family need transportation for must be explicitly documented in the child/family's service plan. Examples include medical appointments for which non-emergency medical transportation could **not** be accessed or respite, recreation activities, etc.

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

Please note: the rate will be based upon the current BSS reimbursement rate

Target Population	Child Protective Services
Program Option	Adoption Preservation
Initial Authorization	92 days Unit= One mile 1000 miles total
Maximum Total Authorizations Available	2
Admission Criteria	● Documentation of the parent's inability to afford to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Assessment must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● BSS must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service. ● Provider, family and BSS Adoption Preservation Contact recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● Provider, family and BSS Adoption Preservation Contact agree that the child is appropriate to remain in their home setting.

Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's adoption preservation case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Case is formally opened with Child Protective Services or Youth Services.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● If more than one member of a case is being transported, bill under one FACTS Client ID and note all present in documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the Referral for Socially Necessary Services. ● Log of trips with miles traveled

Additional Service Criteria:
For relatives or non-custodial friends of the family, all credentialing and training requirements are waived. The expectations are that a family member or non-custodial friend of the family will ensure that they have a valid driver's license and the minimum required insurance or will arrange the transportation with a member of their family's support group who has a driver's license, insurance and no history of legal offenses that may endanger those being transported.

Public Transportation 150110

Definition: Reimbursement for the provision of transportation on buses, planes, and/or trains. This code may be used for local bus passes or long-distance bus tickets. Rental cars and taxi fares are also included in this service. The activity(ies) that the child/youth and/or family needs transportation for must be explicitly documented on the child/family's service plan. Examples include medical appointments for which non-emergency medical transportation could **not** be accessed or respite, recreation activities, etc. The least costly means available must be utilized. This service covers the fare for the shortest practical route to/from the traveler's destination.

The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS.

Target Population	Child Protective Services
Program Option	Adoption Preservation
Initial Authorization	92 days Unit= Event
Maximum Total Authorizations Available	2
Admission Criteria	● Documentation of the parent's inability to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Assessment must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● BSS Child Welfare Worker, family and BSS supervisor must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● Provider and Supervisor agree that the child is appropriate to remain in their home setting.
Discharge Criteria (Any element may result	● Goals and objectives have been met substantially. ● Family refuses service.

in discharge or transfer)	● Family's case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Case is formally opened with Child Protective Services or Youth Services.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the Referral for Socially Necessary Services. ● Copy of receipts

Additional Service Criteria:

- Agencies and/or private companies providing this service must be regulated through the appropriate state or federal transportation department/accrediting body
- Individual family members, children/youth or people identified within the case record may be enrolled for this service as a means to obtain pre-paid transportation when a provider is not enrolled. The individual is responsible for reconciling the transportation costs with the WV BSS when the trip is completed. The BSS Child Welfare Worker must directly assist the family in the process of accessing pre-paid transportation.

YS Family Support

This category only consists of 2 services: Needs Assessment/Service Plan and Case Management. These two services are to be referred along with Family Support Agency Transportation to a provider when you have a Maltreatment Only Case. This means there was substantiated maltreatment, but there were no Impending Dangers. Deliver to the provider the Referral for Socially Necessary Services and the Initial Assessment. Provider will do services if family cooperates. The provider is not to refer to BSS for services – must refer to community resources.

This can also be used in CPS and YS for backlog cases to determine the need for case closure only with approval from the Social Services Program Manager (formerly known as the Regional Program Managers).

Case Management Services 210400

Definition: Short term case management services may be utilized for clearing backlog Youth Service cases with approval from BSS Regional Program Manager. Case Management services are defined as those services which assist child welfare recipients to gain access to needed medical, behavioral health, social, educational and other services. Case Management Services are to be provided at a level of intensity required by the recipient. Services must be provided in settings accessible to the recipient face to face. The individual must be given the option of whether or not to utilize case management services. Within case management there are a number of activities that are recognized as components of case management. These components include linkage/referral, advocacy, family crisis response planning and service plan evaluation. Referrals from PATH for this service may only be made by the BSS Supervisor after receiving BSS Regional Program Manager approval. Family Support Case Management services must be provided face to face with families and take place within the home.

Linkage/Referral: Case managers assure linkage to all internal and external services and supports that have been identified in the recipient's service plan. Provider will link family to agencies other than BSS for services.

Advocacy: Case management advocacy refers to the actions undertaken on behalf of the recipient in order to ensure continuity of services, system flexibility, integrated services, proper utilization of facilities and resources and accessibility to services. Case management advocacy includes assuring that the recipient's legal and human rights are protected.

Family Crisis Response Planning: The case manager must assure that adequate and appropriate crisis response procedures are available to the recipient and identified in the individual service plan.

Service Plan Evaluation: The case manager will continually evaluate the appropriateness of the individual's service plan and make appropriate modifications, establish new linkages or engage in other dispositions as necessary. The case manager will have face-to-face contact with the recipient.

Target Population	Youth Services
Program Option	Family Support
Initial Authorization	92 Days Unit =15 min. 36 units per 92 days
Maximum Total Authorizations Available	1 – No reauthorizations available
Admission Criteria	● Family Advocacy Support Tool (FAST) or Youth Services Safety Plan completed by BSS Child Welfare Worker ● Family & Needs Assessment indicates that there are unmet needs that could be met through community services. ● BSS Child Welfare Worker and supervisor agree that due to the nature of the complaint, the child can be safely served in their home/community with supportive services. ● PATH referral for this service must be made by BSS Regional Program Manager or their proxy with written approval.
Continuing Stay Criteria	● Reauthorizations are not available

Discharge Criteria (Any element may result in discharge or transfer)	● Family refuses service. ● The family's case is closed. ● Youth was placed in BJS custody for detention/incarceration.
Service Exclusions	● Child(ren) are no longer in the home ● Consumer need is not indicated based on the Needs Assessment. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Not applicable
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and his/her title or credentials A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts. ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention. ● Plan for further interventions. ● Any identified unmet concrete or service needs ● A copy of the FAST or Youth Services Safety Plan must be present in the case record (only used on backlog cases). ● Copy of the Family & Needs assessment/service plan signed by the family ● Notice to BSS if family accepted or refused services based on provider-generated assessment/service plan

	● Notice to BSS that family will not cooperate and list of attempts ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month. A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree. Related degrees are:
- Sociology
- Psychology
- Counseling
- Interpersonal Communication
- Human Services
- Primary or Secondary Education
- Criminal Justice
- Board of Regents with an emphasis in Human Service
- Gerontology
- Family and Consumer Science **and**

• Experience providing direct service to families.

• Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**

• All providers must have an acceptable CIB through WV Cares **and**

• An APS/CPS screen completed with no negative information and

● All required trainings completed as indicated in the provider agreement.

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Family Needs Assessment/Service Plan 210165

Definition: Face-to-face interview to evaluate family needs precipitated by a report(s) made to the Bureau for Social Services regarding at risk children. The provider must see the home. The provider will evaluate information from the Family Advocacy Support Tool (FAST) or Youth Services Safety Plan and meet with the family. Once they have completed these tasks, the provider will determine what community services the family requires. The needs assessment and service plan must be completed within thirty (30) days of the generation of the referral for socially necessary services. If service is to be used for backlog YS cases the PATH referral must be made by BSS Regional Program Manager or their proxy with written approval.

Target Population	Youth Services
Program Option	Family Support
Initial Authorization	92 Days Unit= One hour Maximum of four units
Maximum Total Authorizations Available	1 – No reauthorizations available
Admission Criteria	● Service must be referred by BSS. ● Youth must remain in the home. ● FAST was completed and it was determined a Youth Services Safety Plan with service provided to the parent was needed to maintain the child in the home. ● Backlog usage must be approved per BSS Regional Program Manager ● PATH referral for this service must be made by BSS Regional Program Manager or their proxy with written approval.
Continuing Stay Criteria	● Reauthorizations are not available
Discharge Criteria (Any element may result in discharge or transfer)	● Family refuses service. ● Family's case is closed. ● Youth was placed in BJS custody for detention/incarceration.
Service Exclusions	● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

	A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and his/her title or credentials. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts. ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention. ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month ● A copy of the FAST or Youth Services Safety Plan must be present in the case record. (only used on backlog cases).

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree. Related degrees are:
- Sociology
- Psychology
- Counseling
- Interpersonal Communication
- Human Services
- Primary or Secondary Education
- Criminal Justice
- Board of Regents with an emphasis in Human Service
- Gerontology
- Family and Consumer Science **and**

• Experience providing direct service to families.

• Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**

• All providers must have an acceptable CIB through WV Cares **and**

• An APS/CPS screen completed with no negative information **and**

- All required trainings be completed as indicated in the provider agreement.

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Agency Transportation 210106

Definition:

This code may be utilized for providers' mileage encumbered when the following services from the Youth Services Family Support Program Option have been implemented within the child/family's home:

- Case Management
- Family & Needs Assessment/Service Plan

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

If a provider is unable to deliver the identified service upon traveling to the home, this code may be billed up to three times within the ninety-two (92) day authorization period when the following conditions are met:

- The provider/agency has a policy and procedure regarding the expectations of the families being served. The importance of keeping scheduled appointments, notifying the provider when an appointment needs to be cancelled and the means in which the BSS will be notified if appointments are not kept are reviewed with the client(s).
- The provider/agency has a policy and procedure about notifying the Department regarding youth/family's non-compliance with established scheduled appointments.
- There is documentation of the visit being scheduled within the case record.

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Youth Services
Program Option	Family Support
Initial Authorization	92 days Unit = one mile 1000 units
Maximum Total Authorizations Available	1 – No reauthorizations available
Admission Criteria	● Service must be referred by BSS in conjunction with YS Needs Assessment/Service Plan and YS Case Management services. ● Youth must remain in the home. ● FAST was completed and it was determined a Youth Services Safety Plan with service provided to the parent was needed to maintain the child in the home.
Continuing Stay Criteria	● Not applicable

Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● The family's case is closed. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. ● Excludes parking, tolls and waiting time ● If more than one member of a case is being transported, bill under one FACTS Client ID and note all present in documentation.
Clinical Exclusions	● None
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the FAST or Youth Services Safety Plan must be present in the case record. (only used on backlog cases). ● A copy of the BSS 's current safety plan and/or Case Plan must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB and APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

YS Family Preservation

Used when child is still in the home with the parent. The State **does not have custody of the child**. Must be monitored by BSS as either an investigation or open case. Can also be used when child is removed from one parent and placed with another parent pending ongoing BSS proceedings. Can be used when child is with relative as part of a safety plan (*but BSS has no custody*), as well.

Adult Skill Building 220390

Definition: Direct service in which the identified parent is assisted to increase basic home management skills and social/emotional support networks through hands-on implementation and role modeling. This service provides for the acquisition of skills needed to meet adult role expectations and carry out activities of daily living. Adult Skill Building is intended to improve the capacity for solving problems and resolving conflicts. Possible Adult Skill Building activities include housekeeping, cleaning, food shopping, meal preparation, laundry, budgeting, utilizing community resources, accessing medical and school records and personal care/hygiene. This service is implemented when there is a lack of skill knowledge not due to a mental health condition and implies that there is not a lack of motivation. SNS Provider will work with client on needs identified on the life skills assessment and/or needs outlined by the BSS service plan.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One hour 35 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● FAST was completed and it was determined that a Youth Services Safety Plan with service provided to the parent was needed to maintain the child in the home. ● The plan documents the need for the service with specific objectives targeting of the identified areas of improvement. ● Service recommended by the BSS Child Welfare Worker, family and BSS Supervisor. ● The SNS Provider should assess the parent to determine which life skills need enhanced. The Casey Life Skills Assessment may be utilized or the SNS provider may use any propriety life skill assessment they have developed. ● Service cannot be met appropriately through other community resources such as adult education classes, personal care or Extension Services. ● Family has explored appropriate social support system members capable of providing service to the identified client.
Continuing Stay Criteria	● BSS Child Welfare Worker, family and BSS supervisor have reviewed case and determined family/ community placement is still appropriate. ● Progress toward needs and case plan goals is documented but has not been achieved. ● Prior to re-authorizing the Adult Skill Building service, the SNS Provider should reassess the client using a life skills assessment to identify continued deficits. ● BSS expects a detailed update be completed each 90 days on any client progress made in identified deficit areas-this should be included in the monthly summary and discussed at the MDT.

	● Service cannot be met appropriately through other community resources. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the Case Plan and recommend the service continue. ● Family continues to explore social support system members capable of providing service to the identified client.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have substantially been met. ● Parent requests discharge. ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of goals/objectives on the Case Plan. ● No outlook for improvement with this level of service. ● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. These skills should be addressed through the parent's residential habilitation plan. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● This service cannot be provided to the primary client in a YS case and under the age of 18. It is expected that the Casey Life Skills assessment will be completed on all children 14 and older that are clients in open YS cases. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.

Clinical Exclusions	● Severity of the parent's impairment due to a mental illness or substance use, misuse or substance use disorder problem may preclude provision of service in this level of care. If the parent previously had the skill and lost the ability to perform the task due to the severity of their mental illness/substance use, misuse or substance use disorder, a mental health professional should be consulted to determine if the parent meets medical necessity for Basic Living Skills in the Medicaid Rehabilitation Manual. ● Severity of the parent's impairment due to Intellectual Developmental Delay or developmental delays may preclude provision of this service. A mental health professional should be consulted to evaluate the possibility of short-term Day Treatment Services. ● Severity of parent's impairment due to traumatic brain injury (TBI) may preclude provision of this service. A rehab professional should be consulted to evaluate the possibility of rehabilitation services. ● Continued stay has been noted for cases in which a parent diagnosed with Borderline Intellectual Functioning or Mild Intellectual Developmental Delay is not eligible for other service options. One additional authorization may be granted with documentation of the diagnosis.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the FAST and/or the Youth Services Safety Plan must be present in the case record. A copy of the client's Casey Life Skills Assessment(s) should be maintained as part of the provider's case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month,

	a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect or behavioral issues were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- All providers must have a CIB and an APS/CPS screen completed with no negative information.

Agency Transportation 220106

Definition:

This code may be utilized for providers' mileage encumbered when the following services from the Youth Services Family Preservation Program Option have been implemented within the child/family's home:

- Adult Skill Building
- Child Community Connection
- Court Attendance
- Daily Respite
- Hourly Respite
- Individualized Parenting
- MDT Attendance
- YS Safety Services (Includes entire group of services)
- Scheduled In-Person Observation
- Supervised Family Time One
- Transportation Time
- Unscheduled In-Person Observation

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

If a provider is unable to deliver the identified service upon traveling to the home, this code may be billed up to three times within the ninety-two (92) day authorization period when the following conditions are met:

- The provider/agency has a policy and procedure regarding the expectations of the families being served. The importance of keeping scheduled appointments, notifying the provider when an appointment needs to be cancelled and the means in which the BSS will be notified if appointments are not kept are reviewed with the client(s).
- The provider/agency has a policy and procedure about notifying the Department regarding youth/family's non-compliance with established scheduled appointments.
- There is documentation of the visit being scheduled within the case record.

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = one mile 1000 units
Maximum Total Authorizations Available	3

Admission Criteria	● Documentation of the parent's inability to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored/exhausted. ● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT **or** BSS Child Welfare Worker, family and BSS supervisor must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore support system members to provide the service. ● MDT **or** BSS Child Welfare Worker, family and BSS supervisor recommends the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT **or** BSS Child Welfare Worker, family and BSS supervisor agrees that the youth is appropriate to remain in the home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● The family's case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● Excludes parking, tolls and waiting time.

	● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS Case Plan and/or Youth Services Safety Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen . All required trainings be completed as indicated in the provider agreement. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Child Community Connection 220915

Definition: The Child Community Connection (CCC) service seeks to engage with and empower families to identify needed supports and facilitate referral and linkage to formal and informal community resources. These resources should be available at no cost or be affordable to the family without additional financial assistance from the WV Bureau for Social Services. These services include, but are not limited to, tutoring, mentoring, counseling or mental health services, self-help and other support groups, educational, arts, or science programs. SNS Providers should make the family aware of resources available to all/most West Virginians such as WV Works, Family Assistance, Children with Serious Emotional Disorder Waiver services, as well as applicable mental health crisis phone numbers. BSS will make available a resource directory for families that the SNS provider will be required to utilize as part of the CCC service. SNS providers of CCC will be expected to make at least 3 attempts to contact Resource for/with the family to make linkage but will not be held to the expectation that the family successfully enrolls/completes a referred resource. Providers will need to document the specific resources identified and what actions they took to facilitate the family's linkage to the resource.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit= One hour 35 units per 92 days
Maximum Total Authorizations Available	1 – No reauthorizations available
Admission Criteria	● This service may not be referred to an SNS Provider prior to the completion of a FAST Assessment in an open Youth Service case. ● Service recommended by the BSS Child Welfare Worker, family and BSS supervisor. ● BSS will require CCC providers, at the minimum, to relay to families these four resources: WV211, Help4WV, their area Family Resource Network and an applicable Suicide Hotline such as WV 988. ● Family lacks a social support system capable of providing service to the identified client.
Continuing Stay Criteria	● Not Applicable
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child is placed in BJS custody. ● Child's case is closed. ● Family has gained a social support system capable of providing service to the family. ● Family needs can now be met through a community resource. ● Youth was placed in BJS custody for detention/incarceration

Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Child Community Connection will not be authorized concurrently with YS Safety Services. This service is not related to the child's safety in the home.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials SNS Providers of Child Community Connection must document specifically what resources the child/family were linked to during the service provision including the name of the person/entity, service being referred, date and number of attempts made to contact the resource and the outcome of contact. A copy of the FAST Assessment must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: A list of dates of service and the specific services rendered and/or attempts. ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention. ● Plan for further interventions. ● Any identified unmet concrete or service needs

	● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All trainings be completed as indicated in the provider agreement.

Court Attendance 220755

Definition: Reimbursement for an SNS agency/independent provider **subpoenaed** to testify in a Circuit Court hearing related to an open BSS Child Welfare Case. Provider should be present at the hearing prepared to testify to answer questions, give updates on service participation, and assist in establishing the appropriate plan for the identified child and/or family. The provider must be actively working with the client and submitting monthly summaries to the BSS child welfare worker. For Family Preservation there must be circuit court involvement with a petition filed and/or it is mandated in BSS Policy or WV Statute.

Eligible for any subpoenaed representative per agency for:

- SNS Providers actively providing a treatment or safety service
- Mental Health Professionals providing direct treatment (Example: Therapist)

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One event
Maximum Total Authorizations Available	As Required
Admission Criteria	● FAST was completed and indicated a safety plan was needed to maintain the child in the home. ● There is circuit court involvement with a petition filed. ● SNS Provider will submit a copy of the subpoena to Acentra at the time of prior auth request. If multiple SNS staff were subpoenaed for testimony additional units may be authorized. ● If a subpoena is not issued for staff requested at court by DoHS then a court order showing that testimony was given by SNS provider(s) may be accepted in lieu of subpoena.
Continuing Stay Criteria	● Child(ren) remain in the home of a biological parents with services. ● BSS Child Welfare Case remains open.
Discharge Criteria (Any element may result in discharge or transfer)	● Case is closed. ● Child(ren) are placed in the custody of the BSS and are no longer placed with a biological parent. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● Provider is not already receiving reimbursement for administrative case management through a Provider Agreement with BSS. ● No individual fee for service code including Medicaid Clinic or Targeted Case Management may be billed concurrently while this code is being utilized. ● Code is not intended to reimburse providers who transport clients attending court hearings, only to be used if the SNS provider is subpoenaed to appear in court. ● The delivery of all ASO Socially Necessary Services must occur

	within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. The provider must retain documentation showing they attended the Circuit Court hearing. If the County does not issue subpoenas prior to court the SNS provider may submit a copy of the court order showing provider testimony was given to Acentra to obtain authorization for service. The standard 10-day timeline for prior authorization will not apply to the Court Attendance service code. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and presented to the MDT and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Daily Respite 220430

Definition: Planned break for primary caretakers who are in challenging situations in which a trained provider, friend or family member assumes care giving and supervision of a child(ren) for a brief period of time. Service may be provided in or out of the natural home on a daily basis. Service may also be utilized if the caretaker has a scheduled inpatient medical procedure.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One day 3 units per 92 days
Maximum Total Authorizations Available	14 units Maximum within 12-month period
Admission Criteria	● Parent(s) are in need of a break from supervision and care giving responsibilities.
Continuing Stay Criteria	● Service continues to be needed to provide support to maintain client's placement as identified on the service plan. ● Case Plan identifies the current plan is for the child to remain in the identified foster home placement if possible.
Discharge Criteria (Any element may result in discharge or transfer)	● Child's case is closed. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No other fee-for-service Socially Necessary Service may be billed concurrently with this service ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information.
- All trainings be completed as indicated in the provider agreement.

Functional Family Therapy 220800

FFT is a family intervention program for dysfunctional youth with disruptive, externalizing problems. Target populations range from at-risk pre-adolescents to youth with moderate to severe problems such as conduct disorder, violent acting-out, and substance use, misuse or substance use disorder. While FFT targets youth aged 11-18, younger siblings of referred adolescents often become part of the intervention process.

FFT Program goals are to eliminate the youth's referral problems, improve prosocial behaviors and improve family and individual skills. The program is broken down into five phases of intervention:

- Engagement- Maximize family initial expectation of positive change;
- Motivation- Create a motivational context for long-term change;
- Relational Assessment- Complete relational (functional) assessment of family relationships to provide foundation for changing behaviors in subsequent phases;
- Behavior Change- Facilitate individual and interactive/ relational change;
- Generalizations- Maintain individual and family change and facilitate change in multiple systems.

Outpatient Clinics or In home setting permitted	Unit= One Day Authorization 120 units per 120 days
Admission Criteria:	● Service must be referred by BSS ● Child must remain in their home ● Children in BSS custody who have returned home for a trial period ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement. ● May be used for children in foster care who are pregnant and/or parenting.
Continued Stay:	● Child must have remained in their home ● Children in BSS custody have returned home for a trial period ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement.
Discharge Criteria	● Goals have been accomplished ● Family/youth is not participating ● No progress has been demonstrated

	● Youth enters BSS custody ● Youth turns 19 years of age
Service Exclusions:	● Behavioral or mental health therapy ● Any transportation codes related to service provision ● Other parenting education programs
Clinical Exclusions:	● In active withdrawal ● In acute psychiatric care
Documentation:	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed within 15 days for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the youth services case plan and the CANS and/or Family Service Plan must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring

	worker. BSS Standard Form must be used. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Prerequisite/Minimum Provider Qualifications:

- Qualifications can vary for therapists, but to become an onsite Program Supervisor a minimum of master's level education is required. A formal certification must be present in provider/employee records.
- Trauma-informed care training.

*Agencies must sign an affiliate agreement indicating they will adhere to the Essential Requirements to meet model fidelity.

Healthy Families America 220810

HEALTHY FAMILIES AMERICA (HFA) is a voluntary evidence-based home visiting program serving pregnant women and families of infants and young children. HFA is a prevention program dedicated to supporting families in their quest to be the best parents they can be. Program services are designed to strengthen families during the critical first years of a child's life. The child's age at HFA enrollment is prenatal to age 24 months as services are focused primarily on prevention through education and support in the homes of new parents. All HFA Program criteria are based on proven best practice standards. Intensity of services is based on each family's needs, beginning weekly and moving gradually to quarterly home visits as families become more self-sufficient. The Bureau of Social Services contracts with community providers who implement the program in their local communities.

The goals of Healthy Families America (HFA) are:

•Build and sustain community partnerships to systematically engage overburdened families in home visiting services prenatally or at birth

•Cultivate and strengthen nurturing parent-child relationships

•Promote healthy childhood growth and development

•Enhance family functioning by reducing risk and building protective factors

HFA is theoretically rooted in the belief that early, nurturing relationships are the foundation for life-long, healthy development. Building upon attachment, bio-ecological systems theories, and the tenets of trauma-informed care, interactions between direct service providers and families are relationship-based; designed to promote positive parent-child relationships and healthy attachment; services are strengths-based; family-centered; culturally sensitive; and reflective.

The HFA model is based upon 12 critical elements. These are:

1. Initiate services prenatally or at birth and can continue until the child is five years of age.
2. Use standardized screening and assessments such as the Family Resilience and Opportunities for Growth to systematically identify and assess families most in need.
3. Offer services voluntarily and use positive, persistent outreach efforts to build family trust.
4. Offer services intensely and over the long-term, with well-defined criteria and a process for increasing or decreasing frequency of service.
5. Consider the culture of families in the services offered such that staff understands, acknowledges, and respects cultural differences of families.
6. Focus on supporting the parent(s) as well as the child through services that cultivate the growth of nurturing, responsive parent-child relationships and promote healthy childhood growth and development.
7. Link all families to a medical provider to ensure optimal health and development and other services to meet their assessed needs.

8. Ensure Family Support Specialists have an adequate time to spend with each family to meet their needs and to plan for future activities.
9. Select service providers based on:
    a. Their personal characteristics
    b. Their willingness to work in, or their experience working with, culturally diverse communities
    c. Their knowledge and skills to do the job
10. Provide intensive training to service providers specific to their role to understand the essential components of family assessment, home visiting, and supervision.
11. Ensure service providers have a framework, based on education or experience, for handling the variety of experiences they may encounter when working with at-risk families
12. Give service providers ongoing, effective supervision so they can develop realistic and effective plans to empower families.

Only in- home setting where the child is/will be living is permitted. Any alternate locations must be approved in writing.	
Initial Authorization	365 days Unit= One day 365 units per 365 days
Admission Criteria:	● Parent must be pregnant or parenting a newborn, children can be enrolled up to 24 months and continue to age 5. ● Intake assessments must occur, and program accepted by the family prior to the target child turning 24 months ● Service must be referred by BCF caseworker ● Child must remain in their home ● Children in BSS physical custody who have returned home for a trial visit ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement. ● May also be used for children in foster care who are pregnant and/or parenting.
Continued Stay:	● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● BSS worker, family and BSS supervisor recommend the service continue and

	agree that placement in the home is still appropriate. ● Service cannot be met appropriately through other community resources.
Discharge Criteria	● Goals have been accomplished ● Family/child is not participating ● No progress has been demonstrated ● Child enters BSS Legal Custody
Service Exclusions:	Targeted Case Management and other parenting education curricula.
Clinical Exclusions:	Parent is in active hospital or residential based treatment without the child(ren).
Documentation:	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed within 15 days for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the current Safety Plan and the CPS Initial Assessment and/or Ongoing Assessment must be present in the case record. WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A

	provider plan will not substitute this requirement. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart and one sent to the referring worker. BSS Standard Form must be used. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Prerequisites/minimum qualifications:

Agencies must sign an affiliate agreement indicating they will adhere to the Essential Requirements to meet model fidelity.

Home Study 220150

Definition: A Home Study is an assessment of an individual who has been identified as a potential foster/adoptive parent for a child who is in the custody of the department. A total assessment includes, but is not limited to, the home (health standards), personal history, education/preparation, family income, documentation of identity/status, employment status, health, police/criminal record check and references, coping skills, communication skills, attitude, support system, use of community resources, and emotional stability.

For Kinship/Relative Homestudies the assessment consists of three units and includes at a minimum:
Criminal Background Checks
Child Abuse/Neglect Checks
Safety of the Home's Environment
Ability to Provide Protection
Child's Relationship with potential relative
Physical Health
Emotional Stability
Ability and willingness to support placement goals
Compliance with car seat safety
Ability and willingness to participate with MDT, Assessment and Case Planning
Understanding of and willingness to comply with BSS 's Discipline Policy
References
Recommendation

The following areas may also be added or requested at the time of referral to a Kinship/Relative Home Study as directed by the BSS Child Welfare Worker and consists of four units:
Personal history
Education/preparation
Family income
Documentation of identity/status
Employment status
Support system
Use of community resources

The BSS will stipulate the extent of the information required for each Home Study. This must be completed by a licensed provider recognized by the WV BSS.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Maximum of 4 Units = One Regular Study Maximum of 3 Units= One Relative Study
Maximum Total Authorizations Available	1 per home being studied
Admission Criteria	● Client desires to become a foster/adoptive parent.

	● Client has completed and submitted a Foster/Adoptive Parent Inquiry Form or has contacted the local county BSS office. ● Department recommends an assessment.
Continuing Stay Criteria	● Not Applicable
Discharge Criteria (Any element may result in discharge or transfer)	● Evaluation is completed. ● Client has been approved or rejected as a prospective placement.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If the study is for a group of siblings, bill service to one child and specify in report the entire sibling group.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	A completed home study adhering to BSS policy as outlined in foster care policy. There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the referral for socially necessary services must be present in the case record.

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree with social work licensure. Related degrees are:

- Sociology
- Psychology
- Counseling
- Interpersonal Communication
- Human Services
- Education
- Criminal Justice
- Board of Regents with an emphasis in Human Service
- Gerontology

• Family and Consumer Science **or**
• A master's degree in social work, counseling or psychology with licensure **and**
• Experience providing direct service to families
• All providers must have an acceptable CIB through WV Cares **and**
• An APS/CPS screen completed with no negative information **and**
● All trainings be completed as indicated on the provider agreement.
• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.
•The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.

Contracted Home Study Guidelines for Partial Payments of a total Home Study:

1 Unit Activities include:

- Contact with family/individual either by telephone, mail, or in-person; or
- Some initial background check on family/individual completed; and
- Family/individual withdraws application or agency withdraws request for study; and
- Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor.

2 Units Activities include:

- Contact with the family/individual through an interview for the study; and
- First home safety check; or
- Contact with references by mail, telephone, or in-person; and
- Family/individual withdraws application or agency withdraws request for study or the family/individual's study has been denied; and
- Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor; and
- Contractor will need to submit a copy of the denial letter to the Homefinding Supervisor, when necessary.

3 Units Activities include:

- More than one in-person contact with the family/individual through an interview for the study; and
- Home safety checks completed; and
- Reference checks completed; and
- Family/individual withdraws application or agency withdraws request for study; and
- Contractor provides a partial written home study report; and/or
- Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor; and
- Contractor will need to submit a copy of the denial letter to the Homefinding Supervisor, when necessary.

4 Units Activities:

- All interviews completed with family/individual for the study; and
- Home safety checks completed; and
- Reference checks completed; and
- Home Study report completed and submitted to Homefinding Supervisor (including both approved and denied home studies); and
- Contractor will need to submit a copy of the denial letter to the Homefinding Supervisor, if the home was denied.

Contracted Kinship/Relative Home Study Guidelines for Partial Payments

1 Unit Activities include:

- Contact with family/individual either by telephone, mail, or in-person; or
- Some initial background check on family/individual completed; and
- Family/individual withdraws application or agency withdraws request for study; and
- Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor.

2 Units Activities include:

- Contact with family/individual in-person; and
- Some initial background check on family/individual completed; and
- Home safety checks completed.
- Assessment completed of the designated components/areas.
- Family/individual withdraws application or agency withdraws request for study; and
- Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor.

3 Units Activities include:

- Contact with family/individual in-person; and
- Criminal background check on family/individual completed; and
- Home safety checks completed; and
- Assessment completed of all ~~seven~~ designated components/areas.
- Family/individual withdraws application or agency withdraws request for study; and
- Contractor would need to submit a complete report to the Homefinding Supervisor.

Hourly Respite 220530

Definition: Planned or unplanned break for primary caretakers who are in challenging situations in which a trained provider, friend or family member assumes care giving and supervision of a child(ren) for a brief period of time. Service may be provided in or out of the natural home or on an hourly/daily basis. Temporary relief from parenting responsibilities is provided to avoid an abuse, neglect or abandonment situation or a placement disruption.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One hour 30 Units per 92 days Maximum 120 units (5 days)
Maximum Total Authorizations Available	3
Admission Criteria	● BSS Child Welfare Worker, family and BSS supervisor agree that the children can be maintained safely in the home. ● BSS Child Welfare Worker, family and BSS supervisor recommend this service. ● Family has explored appropriate social support system members capable of providing service to the identified client. ● A registered SNS provider must be utilized for Hourly Respite unless exceptional circumstances are documented.
Continuing Stay Criteria	● Parents/caretakers continue to display behaviors that were documented on the CPS Initial Assessment that indicated the need for a safety plan. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Family has explored appropriate social support system members capable of providing service to the identified client. ● Service continues to be needed to provide support to maintain client's placement as identified on the service plan. ● Case plan identifies the current plan is for the child to remain in the identified home.
Discharge Criteria (Any element may result in discharge or transfer)	● Parent requests discharge. ● Another service is warranted by change in the child's condition. ● Service is not able to maintain safety in home environment, resulting in a change of placement. ● No outlook for improvement with this level of service.

	● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● Excludes placement at Emergency Shelters for children not in custody. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● The child can effectively and safely be treated at a lower level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● If a safety plan exists for this case, a copy of the current safety plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings be completed as indicated on the provider agreement.

Individualized Parenting 220300

Definition: Direct face-to-face services to improve parental competence and knowledge of:

- Basic child/adolescent care skills
- Nurturing
- Discipline strategies
- Appropriate supervision
- Encouragement of child/adolescent care, age-appropriate development
- Realistic expectations and standards of child/adolescent behavior

This service should be used to correct specific deficits in parenting. This service is provided in a one-on-one setting and is highly individualized to meet the parents' needs. Specific examples include individualized behavior management techniques or understanding a child's specific mental or physical health condition. As the Bureau for Social Services moves toward quality outcome measures, providers are **required** as of 7/1/2026 to use an evidence-based parenting curriculum as applicable for each client. Some examples include Active Parenting, Positive Parenting, and Common Sense Parenting. Contact bsssnsprogram@wv.gov for the full list of WV BSS approved evidence-based parenting curriculums.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = one hour 39 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	1. Parent must demonstrate one or more of the following: a. Inappropriate expectations of the child/adolescent b. Inability to be empathetically aware of child/adolescent needs c. Difficulty assuming role of parent d. Lack of knowledge in feeding, bathing, basic medical treatment, and basic supervision 2. Case Plan documents a need for the service with specific goals and objectives identifying areas for improvement. 3. The MDT **or** BSS worker, family and BSS supervisor recommends the service. 4. Service cannot be met through other community resources (as in disability specific support groups such as CHADD for those with ADHD) or family's support system. 5. FAST was completed and it was determined a Youth Services Safety Plan with service provided to the parent was needed to maintain the child in the home.
Continuing Stay Criteria	● Progress toward Case Plan goals/objectives is documented but has not been achieved.

	● MDT recommends the service continue. ● MDT **or** BSS worker, family and BSS supervisor agrees that placement in the home is still appropriate. ● Service cannot be met appropriately through other community resources.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Parent requests discharge. ● Another service is warranted by change in the family's condition. ● No outlook for improvement within this level of service. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● Youth 18 or older are not eligible. ● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If more than one parent in the same household is involved with this intervention, bill the service through one parent. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● Lack of social support systems indicates that a more intensive service is needed. ● Severity of the parent's impairment due to a mental illness or substance use, misuse or substance use disorder problem may preclude provision of service in this level of care.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time

	● Signature of the provider and their title or credentials A copy of the Fast or Youth Services Safety must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect or behavioral issues were reported within the month

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology
  - Psychology
  - Counseling
  - Interpersonal Communication
  - Human Services
  - Primary or Secondary Education
  - Criminal Justice
  - Board of Regents with an emphasis in Human Service
  - Gerontology
  - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and** an APS/CPS screen completed with no negative information **and**
- All required trainings be completed as indicated on the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.
- Providers are advised that submission of verification regarding evidence-based curriculum training or certification to the Community Partnership Unit is required to continue providing Individuated Parenting services and is a prerequisite for reimbursement.

Intervention Travel Time 220105

Definition: This code is for reimbursing providers who are traveling to an MDT or to complete a home visit in which a Socially Necessary Service is being provided when the time to reach the home from the providers business **exceeds one hour one way**. Mileage encumbered when transporting is billed separately. The service has been documented in the BSS 's child/family's Case Plan and all other natural supports/options have been explored.

Service Codes:

- Adult Skill Building
- Child Community Connection
- Court Attendance
- Daily Respite
- Hourly Respite
- Individualized Parenting
- MDT Attendance
- YS Safety Services
- Supervised Family Time One
- Scheduled In-Person Observation
- Unscheduled In-Person Observation

This service covers actual time traveled using the shortest and/or quickest practical route to the traveler's destination. The billable service begins after the provider leaves their identified place of business and ends when provider reaches the family's home or identified location. If the provider is doing concurrent home visits, the time traveling from one home to the next must exceed one hour one way to be billed. It cannot replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties. Maximum of 16 units per day are allowable.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit= 15 min 416 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● Provider has been referred one of the designated services
Continuing Stay Criteria	● Service continues to be provided ● Progress towards goals noted on BSS Case Plan has been documented ● BSS Child Welfare Worker/supervisor agrees to continue service
Discharge Criteria (Any element may result in discharge or transfer)	● No progress has been made ● Case is closed ● Family refuses in home services ● Youth was placed in BJS custody for detention/incarceration

Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If multiple people are on one transport, they must be from the same case. The trip will be billed on the case member that is farthest distance from the identified destination. If a protection order is in place between members within the case, they must be transported separately. ● Excludes tolls and parking ● IDD waiver or ICF recipients are not eligible for this service ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS 's Case Plan or Youth Services Safety Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance. All required trainings be completed as indicated in the provider agreement.

Lodging 220120

Definition: Hotel or motel accommodation required for biological family members/guardians when transportation is authorized in extenuating circumstances. Lodging does not cover other convenience/entertainment services that may be available through the hotel/motel. Reimbursement will be for the least expensive single room rate available up to the current WV State rate. Charges incurred due to the failure of the transportation provider to notify the lodging facility of cancellation will be considered a personal expense of the provider.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	Unit = One night
Maximum Total Authorizations Available	As required
Admission Criteria	● Child must be placed with a biological parent with a permanency plan. ● Extenuating circumstances exist related to distance, time and frequency. ● Service must be noted on the Case Plan. ● Goals/objectives must be present to address how utilization of this service will occur in the future. ● All transportation reimbursement for biological parents/guardians/foster/kinship placements are at the discretion of the BSS Child Welfare Worker.
Continuing Stay Criteria	● Progress toward goals/objectives has been made, but not satisfactorily achieved. ● Extenuating circumstances continue to exist related to distance, time and frequency. ● Permanency plan is still appropriate to receive this service.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals/objectives have been satisfactorily achieved. ● Child's case has been closed. ● Childs has been adopted or reunified with family. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● Lodging referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for lodging reimbursement through this code. ● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service.

Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the visitation plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of hotel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Meals 220125

Definition: Food for one identified transportation provider. Meal reimbursement is intended for biological family members/guardians when transportation is authorized in extenuating circumstances. Reimbursement is limited to the actual expenses for food not to exceed the current state reimbursement rate for ASO Meals.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	Unit = One Day Cannot exceed three meals per one day
Maximum Total Authorizations Available	As required
Admission Criteria	● Child must be with a biological parent with a permanency plan. ● Extenuating circumstances exist related to distance, time and frequency. ● Service must be noted on the Case Plan. ● Goals/objectives must be present to address how utilization of this service will occur in the future. ● All transportation reimbursement for biological parents/guardians/foster/kinship placements are at the discretion of the BSS Child Welfare Worker.
Continuing Stay Criteria	● Progress toward goals/objective has been made, but not satisfactorily achieved. ● Extenuating circumstances continue to exist related to distance, time and frequency. ● Permanency plan is still appropriate to receive this service.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals/objectives have been satisfactorily achieved. ● Child's case has been closed. ● Child has been adopted or reunified with family. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Expenses for entertainment and alcoholic beverages are not covered. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Meal referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for meal reimbursement through this code. ● Those receiving Safe at Home services are not eligible for this socially necessary service.

Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the visitation plan must be present in the case record. ● A copy of meal receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

MDT Attendance 220455

Definition: Reimbursement for an agency/independent provider participating in the individual Multi-Disciplinary Team Meeting to present written reports of progress, answer questions and assist in establishing the appropriate plan for the identified child and/or family. The Provider must be actively working with the client and submitting monthly summaries to the BSS worker. For Family Preservation there **must be** court involvement with a petition filed and/or it is mandated in BSS Policy or WV Statute.

Eligible for one representative per agency for:

- ASO Providers actively providing a treatment or safety service.
- Mental Health Professionals providing direct treatment (Example: Therapist)

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One Meeting Three units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● Youth remains in their home placement while receiving services. ● Youth is at risk of removal from the home due to an inability to control the youth's behavior.
Continuing Stay Criteria	● Youth remains in the community ● Youth or family is actively receiving safety or treatment services from a provider that is not receiving administrative case management through their provider agreement with BSS.
Discharge Criteria (Any element may result in discharge or transfer)	● Case is closed. ● Youth is placed in custody of BSS or BJS
Service Exclusions	● Provider is not already receiving reimbursement for administrative case management through a Provider agreement with BSS or BJS is legally mandated to attend. ● No individual fee for service code including Medicaid Clinic or Targeted Case Management may be billed concurrently while this code is being utilized. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and

	agency record-keeping policies. A case note must be completed for each service event that includes: ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. A copy of the FAST or Youth Services Safety Plan must be present in the case record. The provider must be able to provide documentation showing they attended the MDT. This could be the sign-in sheet or any other type of documentation that would provide proof of their presence at the meeting. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and presented to the MDT and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect (CPS) or behavioral issues (YS) were reported within the month

Private Transportation 220100

Definition: Reimbursement for the provision of transportation services in a personal vehicle. The activity(ies) that the child/youth and/or family need transportation for must be explicitly documented on the BSS safety plan or Case Plan. Examples include medical appointments for which non-emergency medical transportation could **not** be accessed, respite, and visitation, etc.

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

Please note non-emergency medical transportation (NEMT) is utilized for medically necessary services. NEMT is accessed through Modivcare. NEMT must be used for transportation to and from medical and behavioral health appointments when the person has traditional Medicaid coverage.

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit= One mile 1000 units
Maximum Total Authorizations Available	As required
Admission Criteria	● Documentation of the parent's inability to afford to pay for transportation (gas money, depreciation of vehicle, etc.) and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Safety plan or Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● BSS Child Welfare Worker, family and BSS supervisor must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service.

	● MDT or BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● BSS Child Welfare Worker, family and Supervisor agree that the child is appropriate to remain in their home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Youth was placed in BJS custody for detention/incarceration.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes parking, tolls and waiting time. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● NEMT can be accessed ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the Referral for Socially Necessary Services and receipts must be kept for submission to MDT if requested. ● A log of trips with date, miles and reason for trip.

Additional Service Criteria:

For relatives or non-custodial friends of the family, all credentialing and training requirements are waived. The expectations are that a family member or non-custodial friend of the family will ensure that they have a valid driver's license and minimum required insurance or will arrange the transportation with a member of their family's support group who has a driver's license, insurance, and no history of legal offenses that may endanger those being transported.

Kinship/Foster Parents are automatically eligible once they have been approved by the supervising agency. Specialized and Therapeutic Foster Care Agencies are responsible for submitting service requests to Acentra Health and reimbursing their foster families.

Public Transportation 220110

Definition: Reimbursement for the provision of transportation on buses, planes, and/or trains. This code may be used for local bus passes or long-distance bus tickets. Rental cars, tolls if a rental car is used, taxi fares and parking are also included in this service. The activity(ies) that the child/youth and/or family need transportation for must be explicitly documented on the BSS 's Case Plan. Examples include medical appointments for which non-emergency medical transportation could **not** be accessed or respite, visitation, etc. The least costly means available must be utilized. This service covers the fare for the shortest practical route to/from the traveler's destination.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit= Event
Maximum Total Authorizations Available	As required
Admission Criteria	● Documentation of the parent's inability to afford to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● BSS Child Welfare Worker, family and BSS supervisor must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT or BSS Child Welfare Worker, family and BSS supervisor agree that the youth is appropriate to remain in the home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's case is closed.

	● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Youth was placed in BJS custody for detention/incarceration.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes waiting time ● NEMT can be accessed ● In cases where more than one member of the family is receiving this service, bill under one identified child and reflect all present in the documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of travel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Additional Service Criteria:

- Agencies and /or private companies providing this service must be regulated through the appropriate state or federal transportation department/accrediting body.
- Individual family members, children/youth, or people identified within the case record may be enrolled for this service as a means to obtain pre-paid transportation when a provider is not enrolled. The individual is responsible for reconciling the transportation with the WV BSS when the trip is completed. The BSS Child Welfare Worker must directly assist the family in the process of accessing pre-paid transportation.

YS Safety Services 220450

Definition: A grouping of services for families to reduce and/or eliminate conditions/behaviors leading to out-of-home placement of children or families who are at imminent risk of out-of-home care due to Youth Services (including juvenile court) involvement. This grouping includes scheduled and unscheduled in person observation and Navigation and Support. The mix of these services provided is based upon the Youth Services Safety Plan completed by the BSS Child Welfare Worker and these services cannot be met appropriately through other community resources, such as adult education classes, personal care or Extension Services. Eighty percent of the services must occur in the family's home or community. The remaining twenty percent of the activities may be administrative functions/activities that directly relate to the control of the Safety Threats. These activities correspond to the services identified in the bundle and target controlling the behavior and conditions that immediately threaten the children/family/community. This service must commence within 24 hours of referral. 'Community' refers to the places that are natural locations the family would be together, not office settings.

Scheduled In-Person Observation: "Eyes on" in-person oversight of the child or family which provides an active, ongoing assessment of stressors which affect safety and may result in necessary action. The emphasis here is that the provision of Scheduled In-Person Observation will assist in controlling one or more of the identified impending Safety Threats identified in the FAST. The identified child or family requiring service must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety, permanency, and wellbeing. Structure and environmental control are needed to ensure safety of family and community from the impulsive, delinquent or criminal behavior of the identified client or to ensure safety of a child and the family due to the volatile, aggressive and/or self-harmful behaviors of a child or family member. In some cases, previous attempts at appropriate structure and environmental control are documented and have been unsuccessful. This service cannot be implemented during school hours.

Unscheduled In-Person Observation: "Eyes on" in-person oversight required to ensure safety for the identified client, family and/or community. The identified child or family requiring observation must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety. The ASO Safety Services Provider may need to notify BSS Child Welfare Worker, the WV Centralized Intake for Abuse and Neglect or law enforcement of any change in circumstance as outlined on the BSS Safety Plan. ***If the child(ren), family, and/or community are believed to be experiencing an Immediate Safety Threat, as defined in YS Policy 3.8 (see definition below), the provider, in consultation with their supervisor, will immediately contact*** **WV Centralized Intake for Abuse and Neglect (within 24 hours 1-800-352-6513)** ***to initiate a report and shall call law enforcement. If safe, the provider shall remain in the home until either law enforcement or youth services arrives to make a safety determination for the care and custody of the child.*** This service is intended for unannounced safety checks as outlined in the BSS Safety Plan. The family may not be penalized in any way for not being at home/available when the provider arrives for unscheduled observation.

Navigation and Support: ASO Provider will provide families with a general overview of the WV Child Welfare Process and assigned BSS staff contact information. ASO provider will support the family as they contact community resources to address food insecurity, substance use disorder treatment, mental health counseling, job services, housing as needed, and other concrete needs related to child/family safety. The ASO Provider may also use this service to make referrals to address structural safety within the home such as damaged flooring or exposed wiring as it is related to the child's safety. The ASO Provider should empower the family to begin the change process as the case transitions to BSS Case Management. The

ASO Provider should encourage the family to become active participants in their BSS safety/case plan through community resource linkage and referral activities.

Immediate Safety Threats are instances where the safety of a child or children in the home is at immediate risk of severe harm. These safety threats are significant, clearly observable, presently occurring, and require no guesswork as its status of being a dangerous situation. Immediate Safety Threats may be caused by the actions or inactions of a parent or guardian, or the living environment When a child welfare worker encounters these situations, action must be taken immediately, and appropriate steps must be taken to remove or prevent the threat prior to the worker leaving the situation

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	Unit = one hour 200 direct contact hours per 92 days
Maximum Total Authorizations Available	1 – Any additional authorizations will require BSS Regional Staff approval
Admission Criteria	● A Family Advocacy Support Tool (FAST) been completed, and child has been found to be at imminent risk of out-of-home placement. ● Open Youth Services case. ● The individualized Youth Service Case Plan contains a safety component containing strategies designed to address Safety Threats determined in the FAST. ● Referral was received directly from Department staff. ● Service cannot be safely provided through a community resource or the family support system. ● SNS Provider will be required to provide Acentra Health a copy of the completed, signed BSS Youth Service Safety Plan prior to the authorization of Safety Service Bundle. ● MDT must be involved for those youth who have been adjudicated.
Continuing Stay Criteria	● None
Discharge Criteria (Any element may result in discharge or transfer)	● Progress towards the needs and case plan goals on the Case Plan has been documented and reasonably accomplished. ● MDT (BSS Child Welfare Worker, family and BSS supervisor, if youth is non-adjudicated) has reviewed Case Plan and agrees that the family placement can be maintained without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system. ● Another service is warranted by readiness for positive change in the youth/family's behavior. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently

	while this code is being utilized. ● Respite, Transportation, and Child Community Connection are the only services that may be provided outside of the safety service bundle for the first 30 days until MDT meets. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● If a crisis is behavioral in nature for a child, the family should access 844-HELP-4WV (Children's Mobile Crisis Response). ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of ● care. Need for the service is not just to clinically monitor for homicidal and/or suicidal behaviors.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the FAST and the Youth Services Safety Plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect or behavioral issues were reported within the month

	● A written exit summary

Additional Service Criteria:

For Navigation and Support

• Staff providing this service at a minimum must have a BSW with social work licensure or related four-year degree with social work licensure. Related degrees are:

- o Sociology
- o Psychology
- o Counseling
- o Interpersonal Communication
- o Human Services o Primary or Secondary Education
- o Criminal Justice
- o Board of Regents with an emphasis in Human Service
- o Gerontology
- o Family and Consumer Science or

• A master's degree in social work, counseling or psychology with licensure and

• Experience providing direct service to families.

• All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information.

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

- All required trainings completed as indicated in the provider agreement.

If you are an agency with LBHC, childcare or child-placing license, you can have 4-year degree and be supervised, but private providers must be licensed.

For Scheduled In-Person Observation, Unscheduled In-Person Observation:

• Paraprofessional staff with a High School Diploma/GED Certificate **and**

• Experience providing direct service to families **and**

• Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist or counseling license who has two years post college experience providing direct service to families **and**

• All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information **and**

- All required trainings completed as indicated on the provider agreement.

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Scheduled In-Person Observation 220780

Definition: "Eyes on" oversight required to provide structure and ensure performance of developmentally appropriate activities necessary to carry out Activities of Daily Living and to ensure safety for the identified client, family and/or community. The identified child or family requiring supervision must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety, permanency and well-being. This service can't be used for spot checks, surprise visits, safety checks or unannounced visits, please see the Unscheduled *In-Person Observation* service code.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One hour 39 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● Structure and environmental control are needed to monitor child or parent's reaction to stress, inconsistent parenting techniques, impulsive reactions or detrimental expectations, and maintain safety; **- or -** ● Structure and environmental control are needed to ensure safety of a child and the family due to the volatile, aggressive and/or self-harmful behaviors of a child or family member; **-or-** ● Previous attempts at appropriate structure and environmental control are documented and have been unsuccessful; **-and-** ● FAST was completed and it was determined a Youth Services Safety Plan was needed, **-and-** ● Scheduled In-Person Observation is identified on the Safety Plan that has been reviewed by the BSS Child Welfare Worker, family and BSS Supervisor; **-and-** ● Service cannot be safely provided through a community resource or the family support system.
Continuing Stay Criteria	● Progress toward the needs and case plan goals on the plan has been documented but not reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement is still appropriate. ● No less restrictive service/intervention is available. ● Service cannot be safely provided through a community resource or the family support system. ● Youth continues to display behaviors documented on the FAST that indicated the need for a Youth Services Safety Plan.

Discharge Criteria **(Any element may result in discharge or transfer)**	● Progress toward the needs and case plan goals on the plan has been documented and reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement can be maintained without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system. ● Another service is warranted by lack of positive change in the youth/family's behavior. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's or adult's issues precludes provision of services in this level of care. ● Need for the service is not solely due to clinically monitor for homicidal and/or suicidal behaviors. ● This service cannot be implemented during school/day care hours if child is enrolled or should be enrolled and attending school.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials

	A copy of the FAST or Youth Services Safety Plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated on the provider agreement.

Step-By-Step Parenting Program 220905

Definition: Utilizing skill sets and materials obtained through the Step-by-Step Parenting Program Workshops to provide direct face-to-face services to improve parental competence and knowledge of:

- Home Safety and First Aid
- Parent-Child Interactions
- Problem Solving
- Discipline
- Appropriate supervision
- Encouragement of child/adolescent care, age-appropriate development
- Realistic expectations and standards of child/adolescent behavior of identified child

This service should be used to correct specific parenting skill deficits for parents with learning differences. This can include parents with intellectual disabilities, acquired brain injury, slow learners, learning disabilities, and low reading skills. This service is provided in a one-on-one setting and is highly individualized to meet the parent's needs. Specific examples include individualized behavior management techniques or understanding a child's specific mental or physical health condition. Providers will utilize the Step-by-Step Parenting Program Manual as well as the step-by-step checklist to assess and teach child-care skills to parents. As the Bureau for Social Services moves toward quality outcome measures, providers are required to attend the Step-by-Step Parenting Program Workshop before services can start.

<u>Goals of the Program:</u>

- Objectively identify impediments and supports to successful parenting, and specific parenting skill deficits, to design a comprehensive family intervention.
- Help the family organize supports and services to meet the family's needs and keep the child safe.
- Increase parenting skills to reduce the risk of, or actual, child neglect through in-home step-by-step parent training.
- Improve child health, development, and behavior problems related to parenting skill deficits.
- Have the parents maintain learned skills over time.
- Have the parents generalize learned skills to all situations in which they are needed.
- Reduce need for out-of-home care placements and permanent removal of the child.
- Help parents to decrease reliance on paid supports.
- Help parents to develop a natural support network for the family.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	• 92 days • Unit = One hour • 39 units per 92 days
Maximum Total Authorizations Available	3

Admission Criteria	1.Parent must demonstrate one or more of the following: a. Learning difficulty and/or an IDD Condition b. Inappropriate expectations of the child/adolescent c. Inability to be empathetically aware of child/adolescent needs d. Difficulty assuming role of parent e. Lack of parenting skills, parents with learning differences, risk of child neglect, risk of child developmental delay and behavior problems f. Lack of knowledge in feeding, bathing, basic medical treatment, and basic supervision –**and** - 1. Treatment plan documents a need for the service with specific goals and objectives identifying areas for improvement. 2. Service recommended by the BSS Worker, family, and BSS Supervisor. 3. Service cannot be met through other community resources. 4. FAST was completed and it was determined a Youth Services Safety Plan with service provided to the parent was needed to maintain the child in the home.
Continuing Stay Criteria	• Progress toward Case Plan goals/objectives is documented but has not been achieved. • MDT recommends the service continue. • MDT or BSS worker, family and BSS supervisor agrees that the current placement is still appropriate. • Service cannot be met appropriately through other community resources.
Discharge Criteria (Any element may result in discharge or transfer)	• Goals and objectives have been met substantially. • Parent requests discharge. • Another service is warranted by change in the family's condition. • No outlook for improvement within this level of service. • Youth was placed in BJS custody for detention/incarceration.
Service Exclusions	• No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. • If more than one parent in the same household is involved with this intervention, bill the service through one parent. • Those receiving ICF/IDD services are not eligible for this service. • The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been

	granted by BSS. • Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	• Severity of child's issues precludes provision of services in this level of care. • Lack of social support systems indicates that a more intensive service is needed. • Severity of the parent's impairment due to a mental illness or substance use, misuse or substance use disorder problem may preclude provision of service in this level of care
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes: • Code or service name • Summary of the intervention • Client's response to the intervention • Relation to the service plan • Location where service occurred • Duration • Start/stop time • Signature of the provider and his/her title or credentials A copy of the FAST, Youth Services Safety Plan, or case plan must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart and one sent to the referring worker. This monthly progress report must contain: • A list of dates of service and the specific services rendered and/or attempts • Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention • Plan for further interventions • Any identified unmet concrete or service needs • Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
    - Sociology
    - Psychology

    - Counseling
    - Interpersonal Communication
    - Human Services
    - Primary or Secondary Education
    - Criminal Justice
    - Board of Regents with an emphasis in Human Service
    - Gerontology
    - Family and Consumer Science **and**
- Experience providing direct service to families.
- **Staff must also show proof of attendance for the Step-by-Step Parenting Program Workshop and The Family Game Workshop.**
- Staff person must be under supervision of a licensed social worker, counselor, or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and a**n APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated on the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Supervised Family Time One 220771

Definition: Service in which visitation between family members (parent to child or child to child) is observed to ensure general safety and appropriate interaction is maintained during visitation. Visitation provider either looks in on visits between family members periodically (as determined by BSS visitation plan) or observes the visit while sitting in the room with the family members. Visitation provider will observe to ensure that no abuse, either physical or emotional, takes place during visitation. Provider will also ensure that parents do not inappropriately try to influence the child to recant prior statement to CPS/police officers. Provider will further ensure that family member visiting with the child continues to interact with the child during visitation instead of stepping outside to smoke or take phone calls, falling asleep or carrying on a conversation with the visitation provider instead of the child. During events such as these, the visitation provider will either re-direct the adult family member or if severe enough, end the visit after consultation with the child's assigned BSS Child Welfare Worker. If the visitation provider needs to contact the BSS Child Welfare Worker, they should take precaution to ensure that the visit is covered so that no further inappropriate interaction takes place while the visitation provider is out of the room contacting the BSS Child Welfare Worker. This type of visitation can be done at the family's home, an outdoor recreational setting, or in an office, whichever provides the needed safety of the children and provider.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = One half hour 104 units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● FAST was completed and it was determined a Youth Services Safety Plan with service provided to the whole family unit was needed to maintain the child in the home. ● Youth is unable to visit a parent or relative without adult supervision due to negative family dynamics placing the youth at risk. ● Parent and/or child are unable to resolve crisis situations and conflicts without abuse and/or neglect or community safety. ● MDT **or** BSS Child Welfare Worker, family and BSS supervisor recommends the service, and the plan for the child to remain in the home is appropriate.
Continuing Stay Criteria	● Progress toward Case Plan goals/objectives has been documented, but goals/objectives have not been achieved. ● Service continues to be needed to maintain consumer's placement in the community. ● MDT **or** BSS Child Welfare Worker, family and BSS supervisor recommends the service continue. ● Service cannot be provided through community resources or family support system.
Discharge Criteria	● Goals and objectives have been substantially met.

(Any element may result in discharge or transfer)	● Consumer requests a discharge. ● Another service is warranted by a change in the consumer's condition. ● Service can now be met through a community resource or family support system. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● In cases where more than one member of the family is receiving this service, bill under one identified client and reflect all present in the documentation. ● Specialized and Therapeutic foster homes are to be the provider of this service for the youth residing in their homes; the SNS referrals for this service should be made to the Child Placing Agencies for the youth in their homes. ● The delivery of all Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ●
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials.

Documentation continued	● A copy of the FAST or Youth Services Safety Plan and BSS Visitation Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month If more than one child present, document all participants in the intervention within the note.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Transportation Time 220104

Definition:

This code is for providers whose only service is transporting a BSS client(s). These providers/transports are not associated with their own provision of a socially or behavior health medically necessary service. The provider is not engaged in an otherwise billable activity. Mileage encumbered when transporting is billed separately. The service has been documented in the BSS child/family's Case Plan and all other natural supports/options have been explored including BSS staff and are not available for this event.

The least costly means available must be utilized. This service covers actual time traveled using the shortest practical route to the traveler's destination.

Activities:

- Drugs Screens
- Visitations with extenuating circumstances for Resource/Foster parents
- Not eligible for NEMT

The billable service begins when the provider leaves their identified place of business or home, whichever is shortest, and ends when provider returns to this location. Waiting time at the identified destination is included. The maximum number of hours this service may be provided in a 24-hour period is 12 hours or 48 units. Ten hours for when consumers are in the vehicle and up to 12 hours total. If an overnight trip is required, no more than 12 hours or 48 units may be invoiced. When not in the vehicle, the provider must remain at the location with the client.

If Non-Emergency Transport (NEMT) is available, this service may not be used. It can't replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	208 units/92 days Unit= 15 minutes Maximum of 48 units within a 24-hour period
Maximum Total Authorizations Available	3
Admission Criteria	● Documentation of the parent's inability to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored/exhausted. ● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT or BSS Child Welfare Worker, family and BSS supervisor must recommend this service.

Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service. ● MDT or BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT or BSS Child Welfare Worker, family and BSS Supervisor agrees that the youth is appropriate to remain in the home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Youth was placed in BJS custody for detention/incarceration.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● Excludes tolls and parking ● NEMT is available ● IDD waiver or ICF recipients are not eligible for this service ● No providers may utilize this service to transport a child to a residential placement in or out of state. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip, signature of the provider and their title or credentials. ● A copy of the BSS 's current safety plan and/or Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. All required trainings completed as indicated in the provider agreement. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

If multiple people are on one transport, they must be from the same case. The trip will be billed on the case member that is farthest distance from the identified destination. If a protection order is in place between members within the case, they must be transported separately.

Unscheduled In-Person Observation 220665

Definition: "Eyes on" oversight required to ensure safety for the identified client, family and/or community. The identified child or family requiring supervision must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety, permanency and well-being. **This service is intended for safety checks or unannounced visits**. The BSS Safety Plan will have been completed and sent to the SNS provider outlining specifically what safety concerns the SNS Provider should be checking. The BSS Child Welfare Worker will provide the SNS Provider with the appropriate staff contact information/hotlines and protocols to follow if the SNS provider finds the family in violation of the current safety plan, case plan, protective order, court order, etc. The identified client/family should have been educated by the BSS Child Welfare Worker during the safety planning process about BSS expectations for maintaining safety in the household. The identified client/family will not be held at fault for not being at home when SNS provider arrives for an unscheduled In-Person Observation visit.

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	92 days Unit = 15 min 156 units per 92 days
Maximum Total Authorizations Available	As Required
Admission Criteria	● Structure and environmental control are needed to monitor child or parent's reaction to stress, inconsistent parenting techniques, impulsive reactions or detrimental expectations, and maintain safety; **- or -** ● Structure and environmental control are needed to ensure safety of a child and the family due to the volatile, aggressive and/or self-harmful behaviors of a child or family member; **-or-** ● Previous attempts at appropriate structure and environmental control are documented and have been unsuccessful; **-and-** ● FAST was completed and it was determined a Youth Services Safety Plan was needed, **-and-** ● Unscheduled In-Person Observation is identified on the Safety Plan that has been reviewed by the BSS Child Welfare Worker, family and BSS Supervisor; **-and-** ● Service cannot be safely provided through a community resource or the family support system.
Continuing Stay Criteria	● Progress toward the identified goals/objectives on the plan has been documented but not reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement is still appropriate. ● No less restrictive service/intervention is available.

	● Service cannot be safely provided through a community resource or the family support system. ● Family continues to display behaviors documented on the CPS Initial Assessment that indicated the need for a safety plan.
Discharge Criteria (Any element may result in discharge or transfer)	● Progress toward the identified goals/objectives on the plan has been documented and reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement can be maintained without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system. ● Another service is warranted by lack of positive change in the youth/family's behavior.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's or adult's issues precludes provision of services in this level of care. ● Need for the service is not solely due to clinically monitor for homicidal and/or suicidal behaviors. ● This service cannot be implemented during school/day care hours if child is enrolled or should be enrolled and attending school.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration

	● Start/stop time ● Signature of the provider and their title or credentials A copy of the CPS Initial Assessment and the current safety plan and/or Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Youth Services Foster Care

used when a child is **in state's custody** and placed in **any out of home placement**. This could be a relative/kinship placement, BSS foster home, therapeutic or specialized foster home, residential group home, PRTF (psychiatric residential treatment facility), etc.

Youth placed in BJS custody (detention) are not eligible for Socially Necessary Services.

Adult Skill Building 230390

Definition: Direct service in which the identified parent is assisted to increase basic home management skills and social/emotional support networks through hands-on implementation and role modeling. This service provides for the acquisition of skills needed to meet adult role expectations and carry out activities of daily living. Adult Skill Building is intended to improve the capacity for solving problems and resolving conflicts. Possible Adult Skill Building activities include housekeeping, cleaning, food shopping, meal preparation, laundry, budgeting, utilizing community resources, accessing medical and school records and personal care/hygiene. This service is implemented when there is a lack of skill knowledge not due to a mental health condition and implies that there is not a lack of motivation. This service is for the primary caregiver identified in the reunification plan and targets the family members of the expected discharge placement. SNS Provider will work with client on needs identified on the life skills assessment and/or needs outlined by the BSS service plan.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit = one hour 35 units per 92 days
Maximum Total Authorizations Available	4
Admission Criteria	● BSS Case Plan indicates parents' lack of basic life skills to maintain safety, health and wellbeing of children in their care are directly related to the child's involvement with Youth Services. ● The identified parent's child was removed from the home due to an inability to control the youth's behavior. ● The plan is for family reunification. ● Case Plan documents the need for the service with specific objectives targeting the identified areas of improvement. ● The SNS Provider should assess the parent to determine which life skills need enhanced. The Casey Life Skills Assessment may be utilized or the SNS provider may use any propriety life skill assessment they have developed. ● Service recommended by the MDT. ● Service cannot be met appropriately through other community resources, such as adult education classes, personal care or Extension Services. ● Family has explored social support system members capable of providing service to the identified client.
Continuing Stay Criteria	● MDT reviews case and determines reunification is still appropriate. ● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● Service cannot be met appropriately through other community resources.

	● MDT has reviewed the Case Plan and recommends the service continue. ● Prior to re-authorizing the Adult Skill Building service, the SNS Provider should reassess the client using a life skills assessment to identify continued deficits. ● BSS expects a detailed update be completed each 90 days on any client progress made in identified deficit areas-this should be included in the monthly summary and discussed at the MDT. ● Family continues to explore social support system members capable of providing service to the identified client. ● The caretakers continue to lack skills required to ensure safety, permanency and wellbeing of the children removed from their care as initially documented in the case record or family assessment. ● Caretaker has demonstrated acceptance of the changes that are necessary.
Discharge Criteria **(Any element may result in discharge or transfer)**	● Goals and objectives have substantially been met. ● Parent requests discharge. ● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client. ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of goals/objectives on the Case Plan. ● No outlook for improvement with this level of service. ● Reunification is no longer an appropriate option for the family. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Youth must be under 18 for identified parent to receive this service. ● This service cannot be provided to the primary client in a YS case and under the age of 18. It is expected that the Ansel Casey assessment will be completed on all children 14 and older that are clients in open YS cases.

Clinical Exclusions	● Severity of the parent's impairment due to a mental illness or substance use, misuse or substance use disorder problem may preclude provision of service in this level of care. If the parent previously had the skill and lost the ability to perform the task due to the severity of their mental illness/ substance use, misuse or substance use disorder, a mental health professional should be consulted to determine if the parent meets medical necessity for Basic Living Skills in the Medicaid Rehabilitation Manual. ● Severity of the parent's impairment due to Intellectual Developmental Delay or developmental delays may preclude provision of this service. A mental health professional should be consulted to evaluate the possibility of short-term Day Treatment Services. ● Severity of parent's impairment due to traumatic brain injury (TBI) may preclude provision of this service. A rehab professional should be consulted to evaluate the possibility of rehabilitation services.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. A copy of the FAST or Youth Services Safety Plan must be present in the case record. A copy of the client's Casey Life Skills Assessment(s) should be maintained as part of the provider's case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts

	● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect (CPS) or behavioral issues (YS) were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- All providers must have a CIB and an APS/CPS screen completed with no negative information.

Agency Transportation One 230107

Definition: This code may be utilized for providers' mileage encumbered when the following services from the Youth Services Foster Care Program Option have been implemented within the child/family's home and the permanency plan is reunification:

- Adult Skill Building
- Child Community Connection
- Connection Visit
- Court Attendance
- Daily Respite
- Family Time with Parent Coaching
- Home Study
- Hourly Respite
- Individualized Parenting
- MDT Attendance
- Pre-Reunification Support
- Supervised Family Time One
- Supervised Family Time Two
- Supervision for Temporary Lodging both Professional and Paraprofessional codes
- Transportation Time

If a provider is unable to deliver the identified service upon traveling to the home, this code may be billed up to three times within the ninety-two (92) day authorization period when the following conditions are met:

- The provider/agency has a policy and procedure regarding the expectations of the families being served. The importance of keeping scheduled appointments, notifying the provider when an appointment needs to be cancelled and the means in which the BSS will be notified if appointments are not kept are reviewed with the client(s).
- The provider/agency has a policy and procedure about notifying the Department regarding youth/family's non-compliance with established scheduled appointments.
- There is documentation of the visit being scheduled within the case record.

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit = one mile 1000 units
Maximum Total Authorizations Available	4

Admission Criteria	● Documentation of the Resource/Foster Parent's inability to access NEMT and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the Foster/Adoptive Family support system, public transportation or non-emergency medical transportation services, have been explored/ exhausted. ● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT must recommend this service.
Continuing Stay Criteria	● Foster/Adoptive Family continues to explore their social support system to provide the service. ● MDT recommends the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT agrees that the foster care placement is appropriate for the consumer.
Discharge Criteria **(Any element may result in discharge or transfer)**	● Goals and objectives have been met substantially. ● Child's case is closed. ● Foster/Adoptive Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee-for-service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● NEMT can be accessed. ● Excludes tolls, parking and waiting time. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● Residential Homes and transitional living programs for vulnerable youth should follow the directions in the annual agreements with the Department to determine eligibility for children in their care.

Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS 's Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. All required trainings completed as indicated in the provider agreement. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Agency Transportation Two 230108

Definition: Reimbursement for transportation related to visitation with parents when the child is in the car. Those eligible for this service must be documented in the visitation plan completed by the BSS Child Welfare Worker and visitation must be explicitly documented on the BSS child/family's Case Plan.

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit = one mile 1000 units
Maximum Total Authorizations Available	4
Admission Criteria	● Permanency plan must indicate reunification or that there is a court order mandating visitation. ● Documentation that the Foster/Adoptive Family or kinship/relative provider is unable to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation, have been explored/exhausted. ● Case Plan originated by BSS must document the need for this service. ● MDT must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but Foster/Adoptive Family or kinship/relative provider still does not have a reliable means of transportation. ● The family of origin is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family of origin lacks support system to provide the service. ● MDT recommends the service continue. ● Permanency plan remains reunification or there is a court order mandating visitation.

Discharge Criteria **(Any element may result in discharge or transfer)**	● Goals and objectives have been met substantially. ● Child's case is closed. ● Permanency has been obtained. ● Foster/Adoptive Family or kinship/relative now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes tolls, parking and waiting time. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● In cases where more than one member of the family is receiving this service, bill under one identified child and reflect all present in the documentation. ● All foster care providers are responsible for all costs associated with transportation not related to the following activities: MDT's, IEP's, court hearings, sibling visitation, relative visitation, biological parent visitation, foster/adoptive parent visitation, detention visits, residential placement visiting, placement changes, case staffing, and adoption promotion activities. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials.

	• A copy of the BSS ’s Case Plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. All required trainings completed as indicated in the provider agreement. Transportation Providers must have valid Driver’s licenses from employee’s state of residence and insurance.

Child Community Connection 230915

Definition: The Child Community Connection (CCC) service seeks to engage with and empower kinship families to identify needed supports and facilitate referral and linkage to formal and informal community resources. These resources should be available at no cost or be affordable to the family without additional financial assistance from the WV Bureau for Social Services. These services include, but are not limited to, tutoring, mentoring, counseling or mental health services, self-help and other support groups, educational, arts, or science programs. SNS Providers should make the family aware of resources available to all/most West Virginians such as WV Works, Family Assistance, Children with Serious Emotional Disorder Waiver services, as well as applicable mental health crisis phone numbers. BSS will make available a resource directory for kinship families that the SNS provider will be required to utilize as part of the CCC service. The kinship family should be empowered to reach out to the applicable Kinship Navigator program in their region. SNS providers of CCC will be expected to make at least 3 attempts to contact Resource for/with the family to make linkage but will not be held to the expectation that the family successfully enrolls/completes a referred resource. Providers will need to document the specific resources identified and what actions they took to facilitate the family's linkage to the resource.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit= One hour 35 units per 92 days
Maximum Total Authorizations Available	1 – No reauthorizations available
Admission Criteria	● Child has been placed in BSS custody and placed with a kinship relative or BSS resource foster home. ● Service recommended by the BSS Child Welfare Worker, family and BSS supervisor. ● BSS will require CCC providers, at the minimum, to relay to foster families these four resources: WV211, Help4WV, their area Family Resource Network and an applicable Suicide Hotline such as WV 988. ● Family lacks a social support system capable of providing service to the identified client. ● Child has been placed with a kinship/foster family resource. ● Child has been placed in a WV BSS foster home.
Continuing Stay Criteria	● Not Applicable
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child is removed from the placement. ● Kinship/Resource Foster Family requests discharge. ● Child's case is closed. ● Family has gained a social support system capable of providing service to the family. ● Family needs can now be met through a community resource. ● Youth was placed in BJS custody for detention/incarceration

Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● This service is not available to foster parents already certified through a Child Placing Agency. It is the responsibility of the Child Placing Agency to provide this information to their own foster homes. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● This service is not available to children placed in group residential treatment settings.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials SNS Providers of Child Community Connection must document specifically what resources the child/kinship family were linked to during the service provision including the name of the person/entity, service being referred, date and number of attempts made to contact the resource and the outcome of contact. A copy of the FAST must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring

	worker. This monthly progress report must contain: A list of dates of service and the specific services rendered and/or attempts. ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention. ● Plan for further interventions. ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Connection Visit 230206

Definition: This service is to reimburse foster families for hosting face-to-face visits to preserve the connections between children/youth who are in the custody of the BSS and living in a different Foster/Adoptive Family home, group home or who are college students living on campus. Connection Visits can be used for a child to visit with their siblings, relatives, or with former resource/foster parents or for pre-placement visits. Examples include a child in group care going to a former Foster/Adoptive Family for a holiday weekend, a college student returning to a former Foster/Adoptive Family for Thanksgiving or to visit a sibling group who are unable to be reunified in one placement. Service can also be used for a child in a foster care placement or residential facility, PRTF, etc. to do a trial face to face visit with a possible adoptive home or less restrictive foster care placement.

Target Population	Youth Services
Program Option	Foster Care (Kinship/Resource Families and Child Placing Agencies Only)
Initial Authorization	92 Days One Unit = One night
Maximum Total Authorizations Available	As necessary
Admission Criteria	● MDT has reviewed the case and determined that sibling visitation is safe and appropriate without formal supervision. ● The visitation plan notes that the siblings are to visit with one another and denotes frequency and duration of such visits. ● The siblings are placed in two or more separate placements where they are unable to visit with one another due to distance between placements or ● Child usually resides on campus at college but wants to return to a previous placement that they consider home for holidays and/or the summer or ● Child residing in a facility is allowed home visit for holidays and wants to return to a previous placement for the holiday. ● Child is participating in a Transitional Living Program and wants to return to a previous placement for a holiday or sibling visitation. ● Child residing in facility wants to do trial visit with a foster home that will possibly lead to a placement after completion of treatment.
Continuing Stay Criteria	● Siblings continue placement in separate homes or ● Child continues to reside on college campus during weekdays and non-holidays or ● Child continues to reside in facility.
Discharge Criteria (Any element may result in discharge or transfer)	● Siblings are placed together. ● Child(ren) achieve permanent placement through reunification, adoption, legal guardianship, etc. ● Child, who is in college, turns 23 years of age and is no longer in voluntary custody of BSS.

	● Child is discharged from facility and goes to live with the family they have been visiting. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● This service is available to SNS agency providers who are **also** child placing agencies with foster homes. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the BSS visitation plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

For relatives or non-custodial friend of the family, all credentialing and training requirements are waived. The expectations are that a family member or non-custodial friend of the family will ensure that they have a valid driver's license and minimum required insurance or will arrange the transportation with a member of their family's support group who has a driver's license, insurance and have no history of legal offenses that may endanger the passengers.

Resource/Foster Parents automatically eligible once they have been approved by the supervising agency.

Child Placing Agencies are responsible for submitting service requests to Acentra and reimbursing their own foster families.

Court Attendance 230755

Definition: Reimbursement for an SNS agency/independent provider **subpoenaed** to testify in a Circuit Court hearing related to an open BSS Child Welfare Case. Provider should be present at the hearing prepared to testify to answer questions, give updates on service participation, and assist in establishing the appropriate plan for the identified child and/or family. The provider must be actively working with the client and submitting monthly summaries to the BSS child welfare worker. For Foster Care the child **must be** in WV BSS custody and/or it is mandated in BSS Policy or WV Statute.

Eligible for any subpoenaed representative per agency for:

- SNS Providers actively providing a treatment or safety service
- Mental Health Professionals providing direct treatment (Example: Therapist)

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One Episode
Maximum Total Authorizations Available	As Required
Admission Criteria	● The identified parent's child was removed from the home due to an inability to control the youth's behavior. ● Youth is in the custody of the BSS. ● SNS Provider will submit a copy of the subpoena to Acentra at the time of prior auth request. If multiple SNS staff were subpoenaed for testimony additional units may be authorized. ● If a subpoena is not issued for staff requested at court by DoHS then a court order showing that testimony was given by SNS provider(s) may be accepted in lieu of subpoena.
Continuing Stay Criteria	● Youth remains in the BSS's custody. ● Youth or family is actively receiving services from a provider described as eligible from the above definition.
Discharge Criteria (Any element may result in discharge or transfer)	● Reunification has occurred and services were not ordered to continue after reunification. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● Residential Placements/Foster Care Agencies already receiving reimbursement for administrative case management through a Provider Agreement with BSS cannot use this service code. ● A potential provider(s) considering possible placement of a youth. ● No individual fee for service code including Medicaid Clinic or Targeted Case Management may be billed concurrently while this code is being utilized.

	● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. The provider must retain documentation showing they attended the Circuit Court hearing. If the County does not issue subpoenas prior to court the SNS provider may submit a copy of the court order showing provider testimony was given to Acentra to obtain authorization for service. The standard 10-day timeline for prior authorization will not apply to the Court Attendance service code. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and presented to the MDT and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Daily Respite 230430

Definition: Planned break for kinship caretakers who are in challenging situations in which a trained provider, friend, or family member assumes caregiving and supervision of the child(ren) for a brief period of time. Service may be provided in or out of natural home on a daily basis. Use prudent parenting standards and a general safety checklist/walk through to determine appropriateness instead of full homestudy.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One day 3 units per 92 days
Maximum Total Authorizations Available	14 units Maximum within 12-month period
Admission Criteria	● Kinship placement are in need of a break from supervision and care giving responsibilities.
Continuing Stay Criteria	● Service continues to be needed to provide support to maintain consumer's placement as identified on the service plan. ● Case Plan identifies the current plan is for the child to remain in the identified foster home placement if possible.
Discharge Criteria (Any element may result in discharge or transfer)	● Child's case is closed. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No other fee-for-service Socially Necessary Service may be billed concurrently with this service ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Family Time with Parent Coaching 230630

Definition: Service in which family time between parents and children is observed to evaluate appropriateness and level of interaction. The observer/assessor will intervene if abuse or inappropriate behavior is occurring to maintain/restore safety of the child. Prior to the family time together, the coach will review a parenting technique that the parent can employ during time with the child(ren). It can be a technique or techniques that the parent has been working to master or a new technique reviewed directly prior to family time. The technique should address an identified deficit in parenting knowledge/skills that impacts the safety or wellbeing of the child such as unreasonable expectations of children, "parenting from the couch" using only verbal cues for children under five years of age, lack of supervision appropriate to child's age, etc. The observer/assessor will coach the parent during the visit when the technique can be used naturally and effectively to achieve the desired result.

The provider will perform the following functions for each visit:

- Meet with the parent before family time to help the parent anticipate their own and the child's reactions during family time and to discuss the needs to be met during the visit and which techniques would be used to meet those needs.
- Coaching will occur during family time to allow or remind the parent to demonstrate their use of the learned techniques.
- Meet with the parent after family time to discuss how the parent met the child's needs using the techniques and to plan changes in the next visit.
- Help the parent understand the importance of keeping their commitment to visit the child(ren).
- Speak with the Foster/Adoptive Family(s) after the visit to discuss any behaviors or reactions the child may display.
- Prepare notes about parent's knowledge/skills in meeting the child's needs using the learned techniques during family time.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One half hour 104 units per 92 days
Maximum Total Authorizations Available	2
Admission Criteria	● The identified parent's child was removed from the home due to an inability to control the youth's behavior. ● Youth is in the custody of the BSS. ● The goal of visitation must be eventual reunification with parents and/or siblings or maintenance of family ties. ● Identified clients are currently participating in Individual Parenting with the same SNS agency authorized for Family Time with Parent Coaching service. ● The same Individual Parenting service provider should also be providing the Family Time with Coaching service. ● If maintenance of family ties is the goal, then an

	alternative plan for supervision of the visit involving an informal/unpaid provider must be arranged for as soon as possible. ● Youth is unable to visit a parent or relative without adult supervision due to negative family dynamics placing the youth at risk. ● The visitation plan notes that supervision is required. ● The needs list indicates what specific issues are to be monitored/observed during the visitations.
Continuing Stay Criteria	● Progress toward goals/objectives has been documented, but not achieved. ● MDT recommends the service continue. ● Child remains in the custody of the BSS and safety threats that require supervision continue to be present.
Discharge Criteria **(Any element may result in discharge or transfer)**	● Goals and objectives have been substantially met. ● Supervision of family time is no longer deemed necessary and unsupervised family time and or overnight visits have begun. ● Child has been reunified with biological family. ● Parental rights have been terminated or are in the process of termination. ● Child's case is closed. ● Visitation is deemed detrimental to the child's safety and well-being. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● In cases where more than one member of the family is receiving this service, bill under one identified client and reflect all present in the documentation. ● This service is designated for respondent parents/guardians. Service is not to be used for other family members granted 'family time' with the children in custody. ● Child Placing Agencies are not eligible for an SNS referral or authorization for this service. If this service is provided to families of children in their specialized or therapeutic homes, it is considered part of their bundled rate. ● The delivery of all Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS.

Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● A copy of the FAST or Youth Services Safety Plan and BSS Case Plan/Visitation Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials.

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology
  - Psychology
  - Counseling
  - Interpersonal Communication
  - Human Services
  - Primary or Secondary Education
  - Criminal Justice
  - Board of Regents with an emphasis in Human Service
  - Gerontology
  - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and** an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement **and**
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Functional Family Therapy 230800

FFT is a family intervention program for dysfunctional youth with disruptive, externalizing problems. Target populations range from at-risk pre-adolescents to youth with moderate to severe problems such as conduct disorder, violent acting-out, and substance use, misuse or substance use disorder. While FFT targets youth aged 11-18, younger siblings of referred adolescents often become part of the intervention process.

FFT Program goals are to eliminate the youth's referral problems, improve prosocial behaviors and improve family and individual skills. The program is broken down into five phases of intervention:

- Engagement- Maximize family initial expectation of positive change;
- Motivation- Create a motivational context for long-term change;
- Relational Assessment- Complete relational (functional) assessment of family relationships to provide foundation for changing behaviors in subsequent phases;
- Behavior Change- Facilitate individual and interactive/ relational change;
- Generalizations- Maintain individual and family change and facilitate change in multiple systems.

Outpatient Clinics or In home setting permitted	Unit= One Day Authorization 120 units per 120 days
Admission Criteria:	● Service must be referred by BSS ● Child remains in the custody of the WV BSS and is in foster care placement. ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement. ● May be used for children in foster care who are pregnant and/or parenting.
Continued Stay:	● Child remains in the custody of the BSS ● WV Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement.
Discharge Criteria	● Goals have been accomplished ● Family/youth is not participating ● No progress has been demonstrated ● Youth turns 19 years of age ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions:	● Behavioral or mental health therapy

	● Any transportation codes related to service provision ● Other parenting education programs
Clinical Exclusions:	● In active withdrawal ● In acute psychiatric care
Documentation:	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed within 15 days for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the FAST must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. BSS Standard Form must be used. This monthly progress report must contain:

	● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Prerequisite/Minimum Provider Qualifications:

- Qualifications can vary for therapists, but to become an onsite Program Supervisor a minimum of master's level education is required. A formal certification must be present in provider/employee records.
- Trauma-informed care training.

*Agencies must sign an affiliate agreement indicating they will adhere to the Essential Requirements to meet model fidelity.

Home Study 230150

Definition: A Home Study is an assessment of an individual who has been identified as a potential foster/adoptive parent for a child who is in the custody of the department. A total assessment includes, but is not limited to, the home (health standards), personal history, education/preparation, family income, documentation of identity/status, employment status, health, police/criminal record check and references, coping skills, communication skills, attitude, support system, use of community resources, and emotional stability.

For Kinship/Relative Homestudies the assessment consists of three units and includes at a minimum:
Criminal Background Checks
Child Abuse/Neglect Checks
Safety of the Home's Environment
Ability to Provide Protection
Child's Relationship with potential relative
Physical Health
Emotional Stability
Ability and willingness to support placement goals
Compliance with car seat safety
Ability and willingness to participate with MDT, Assessment and Case Planning
Understanding of and willingness to comply with BSS 's Discipline Policy
References
Recommendation

The following areas may also be added or requested at the time of referral to a Kinship/Relative Home Study as directed by the BSS Child Welfare Worker and consists of four units:
Personal history
Education/preparation
Family income
Documentation of identity/status
Employment status
Support system
Use of community resources

The BSS will stipulate the extent of the information required for each Home Study. This must be completed by a licensed provider recognized by the WVBSS.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Maximum of 4 Units = One Regular Study Maximum of 3 Units= One Relative Study
Maximum Total Authorizations Available	1 per home being studied
Admission Criteria	● Client desires to become a foster/adoptive parent.

	● Client has completed and submitted a Foster/Adoptive Parent Inquiry Form or has contacted the local county BSS office. ● Department recommends an assessment.
Continuing Stay Criteria	● Not Applicable
Discharge Criteria **(Any element may result in discharge or transfer)**	● Evaluation is completed. ● Client has been approved or rejected as a prospective placement.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If the study is for a group of siblings, bill service to one child and specify in report the entire sibling group.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	A completed home study adhering to BSS policy as outlined in foster care policy. There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the referral for socially necessary services must be present in the case record.

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree with social work licensure. Related degrees are:

- Sociology
- Psychology
- Counseling
- Interpersonal Communication
- Human Services
- Education
- Criminal Justice
- Board of Regents with an emphasis in Human Service
- Gerontology

• Family and Consumer Science **or**
• A master's degree in social work, counseling or psychology with licensure **and**
• Experience providing direct service to families
• All providers must have an acceptable CIB through WV Cares **and**
• An APS/CPS screen completed with no negative information **and**
● All required trainings completed as indicated in the provider agreement.
• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.

Contracted Home Study Guidelines for Partial Payments of a total Home Study:

1 Unit Activities include:

- ❖ Contact with family/individual either by telephone, mail, or in-person; or
- ❖ Some initial background check on family/individual completed; and
- ❖ Family/individual withdraws application or agency withdraws request for study; and
- ❖ Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor.

2 Units Activities include:

- ❖ Contact with the family/individual through an interview for the study; and
- ❖ First home safety check; or
- ❖ Contact with references by mail, telephone, or in-person; and
- ❖ Family/individual withdraws application or agency withdraws request for study or the family/individual's study has been denied; and
- ❖ Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor; and
- ❖ Contractor will need to submit a copy of the denial letter to the Homefinding Supervisor, when necessary.

3 Units Activities include:

- ❖ More than one in-person contact with the family/individual through an interview for the study; and
- ❖ Home safety checks completed; and
- ❖ Reference checks completed; and
- ❖ Family/individual withdraws application or agency withdraws request for study; and
- ❖ Contractor provides a partial written home study report; and/or
- ❖ Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor; and
- ❖ Contractor will need to submit a copy of the denial letter to the Homefinding Supervisor, when necessary.

4 Units Activities:

- All interviews completed with family/individual for the study; and
- Home safety checks completed; and
- Reference checks completed; and
- Home Study report completed and submitted to Homefinding Supervisor (including both approved and denied home studies); and
- Contractor will need to submit a copy of the denial letter to the Homefinding Supervisor, if the home was denied.

Contracted Kinship/Relative Home Study Guidelines for Partial Payments

1 Unit Activities include:

- Contact with family/individual either by telephone, mail, or in-person; or
- Some initial background check on family/individual completed; and
- Family/individual withdraws application or agency withdraws request for study; and
- Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor.

2 Units Activities include:

- Contact with family/individual in-person; and
- Some initial background check on family/individual completed; and
- Home safety checks completed;
- Assessment completed of the designated components/areas.
- Family/individual withdraws application or agency withdraws request for study; and
- Contractor would need to submit a report on their efforts to complete the study to the Homefinding Supervisor.

3 Units Activities include:

- Contact with family/individual in-person; and
- Criminal background check on family/individual completed; and
- Home safety checks completed; and
- Assessment completed of all ~~seven~~ designated components/areas.
- Family/individual withdraws application or agency withdraws request for study; and
- Contractor would need to submit a complete report to the Homefinding Supervisor.

Hourly Respite 230530

Definition: Planned or unplanned break for primary caretakers who are in challenging situations in which a trained provider, friend or family member assumes care giving and supervision of a child(ren) for a brief period of time. Service may be provided in or out of the natural home or on an hourly/daily basis. Temporary relief from parenting responsibilities is provided to avoid an abuse, neglect or abandonment situation or a placement disruption.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One hour 30 Units per 92 days Maximum 120 units (5 days)
Maximum Total Authorizations Available	4
Admission Criteria	● BSS Child Welfare Worker, family and BSS supervisor agree that the children can be maintained safely in the home. ● BSS Child Welfare Worker, family and BSS supervisor recommend this service. ● Family has explored appropriate social support system members capable of providing service to the identified client. ● A registered SNS provider must be utilized for Hourly Respite unless exceptional circumstances are documented.
Continuing Stay Criteria	● Parents/caretakers continue to display behaviors that were documented on the CPS Initial Assessment that indicated the need for a safety plan. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Family has explored appropriate social support system members capable of providing service to the identified client. ● Service continues to be needed to provide support to maintain client's placement as identified on the service plan. ● Case plan identifies the current plan is for the child to remain in the identified home.
Discharge Criteria (Any element may result in discharge or transfer)	● Parent requests discharge. ● Another service is warranted by change in the child's condition. ● Service is not able to maintain safety in home environment, resulting in a change of placement.

	● No outlook for improvement with this level of service. ● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● Excludes placement at Emergency Shelters for children not in custody. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● The child can effectively and safely be treated at a lower level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● If a safety plan exists for this case, a copy of the current safety plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Individualized Parenting 230300

Definition: Direct face-to-face services to improve parental competence and knowledge of:

- Basic child/adolescent care skills
- Nurturing
- Discipline strategies
- Appropriate supervision
- Encouragement of child/adolescent care, age-appropriate development
- Realistic expectations and standards of child/adolescent behavior

This service should be used to correct specific deficits in parenting. This service is provided in a one-on-one setting and is highly individualized to meet the parents' needs. Specific examples include individualized behavior management techniques or understanding a child's specific mental or physical health condition. As the Bureau for Social Services moves toward quality outcome measures, providers are **required** as of 7/1/2026 to use an evidence-based parenting curriculum as applicable for each client. Some examples include Active Parenting, Positive Parenting, and Common Sense Parenting. Contact bsssnsprogram@wv.gov for the full list of WV BSS approved evidence-based parenting curriculums.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit = 1 hour 39 units per 92 days
Maximum Total Authorizations Available	4

Admission Criteria	● Case record, CANS and/or the CAPS Family Assessment indicating the parents' lack of basic parenting skills to maintain safety, health and wellbeing of the child(ren) in their care, are directly related to the child(ren)'s placement into family foster care with Youth Services.
	● The plan for the family is reunification.
	● Parent must demonstrate one or more of the following:
	  ○ Inappropriate expectations of the child/adolescent.
	  ○ Inability to be empathetically aware of child/adolescent needs.
	  ○ Difficulty assuming role of parent.
	  ○ Lack of knowledge in feeding, bathing, basic medical treatment, and basic supervision.
	● Case Plan documents a need for the service with specific goals and objectives identifying areas for improvement.
	● Service recommended by the MDT.
	● Service cannot be met through other community resources (as in disability-specific support groups such as CHADD for those with ADHD) or family's support system.
	● Youth must be under 18 for identified parent to receive this service.

Continuing Stay Criteria	● MDT reviews case and determines reunification is still appropriate. ● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● Service cannot be met appropriately through other community resources. ● MDT has reviewed the Case Plan and recommends the service continue. ● Family continues to lack a social support system capable of providing service to the identified client. ● The caretaker continues to lack skills required to ensure safety, permanency and wellbeing of the children removed from their care as initially displayed in the CAPS Family Assessment or case record. ● The caretaker has demonstrated the acceptance that change is needed.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have substantially been met. ● Parent requests discharge. ● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client. ● Another service is warranted by change in the family's condition. ● No progress has been documented toward achievement of goals/objectives on the Case Plan. ● No outlook for improvement with this level of service. ● Reunification is no longer an appropriate option for the family. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Youth must be under 18 for identified parent to receive this service. ● If more than one parent in the same household is involved with this intervention, bill the service through one parent. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of the parent's impairment due to a mental illness or substance use, misuse or substance use disorder problem may preclude provision of service in this level of care. If the parent previously had the skill and lost the ability to perform the task due to the severity of their mental illness/ substance use, misuse or substance use disorder, a mental health professional should be

	consulted to determine if the parent meets medical necessity for Basic Living Skills in the Medicaid Rehabilitation Manual. ● Severity of the parent's impairment due to Intellectual Developmental Delay or developmental delays may preclude provision of this service. A mental health professional should be consulted to evaluate the possibility of short-term Day Treatment Services.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. A copy of the FAST or Youth Services Safety Plan must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect (CPS) or behavioral issues (YS) were reported within the month

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology
  - Psychology
  - Counseling
  - Interpersonal Communication
  - Human Services
  - Primary or Secondary Education

    - Criminal Justice
    - Board of Regents with an emphasis in Human Service
    - Gerontology
    - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and** an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.
- Providers are advised that submission of verification regarding evidence-based curriculum training or certification to the Community Partnership Unit is required to continue providing Individuated Parenting services and is a prerequisite for reimbursement.

Intervention Travel Time 230105

Definition: This code is for reimbursing providers who are traveling to an MDT or to complete a home visit in which a Socially Necessary Service is being provided when the time to reach the home from the providers business **exceeds one hour one way**. Mileage encumbered when transporting is billed separately. The service has been documented in the BSS 's child/family's Case Plan and all other natural supports/options have been explored.

Service Codes:

- Adult Skill Building
- Child Community Connection
- Court Attendance
- Daily Respite
- Family Time with Parent Coaching
- Home Study
- Hourly Respite
- Individualized Parenting
- MDT Attendance
- Pre-Reunification Support
- Supervised Family Time One
- Supervised Family Time Two
- Supervision for Temporary Lodging both Professional and Paraprofessional codes

This service covers actual time traveled using the shortest and/or quickest practical route to the traveler's destination. The billable service begins after the provider leaves their identified place of business and ends when provider reaches the family's home or identified location. If the provider is doing concurrent home visits, the time traveling from one home to the next must exceed one hour one way to be billed. It cannot replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties. Maximum of 16 units per day are allowable.

Target Population	Youth Services
Program Option	Family Foster Care
Initial Authorization	92 days Unit= 15 min 416 units per 92 days
Maximum Total Authorizations Available	4
Admission Criteria	● Provider has been referred one of the designated services
Continuing Stay Criteria	● Service continues to be recommended by the MDT ● Progress towards goals noted on BSS case plan has been documented
Discharge Criteria (Any element may result in discharge or transfer)	● No progress has been made ● Case is closed ● Family refuses in home services ● Goals on the BSS case plan have been substantially met ● Youth was placed in BJS custody for detention/incarceration

Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Excludes tolls and parking ● Does not replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties. ● IDD waiver or ICF recipients are not eligible for this service ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● If multiple people are on one transport, they must be from the same case. The trip will be billed on the case member that is farthest distance from the identified destination. If a protection order is in place between members within the case, they must be transported separately. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS 's Case Plan or Youth Services Safety Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. All required trainings be completed as indicated in the provider agreement. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Lodging 230120

Definition: Hotel or motel accommodation required for foster/kinship parents when transportation is authorized in extenuating circumstances. Lodging does not cover other convenience/entertainment services that may be available through the hotel/motel. Reimbursement will be for the least expensive single room rate available up to the current WV State rate. Charges incurred due to the failure of the transportation provider to notify the lodging facility of cancellation will be considered a personal expense of the provider. Specialized Foster Care agencies may receive referrals for this service on behalf of their foster homes and then reimburse their foster parents per their own agency policies.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	Unit = one night
Maximum Total Authorizations Available	As Required
Admission Criteria	● Child must be in foster care placement with a permanency plan. ● Child must have an authorization in place for Transportation One or Two. ● Extenuating circumstances exist related to distance, time and frequency. ● Service must be noted on the Case Plan. ● Goals/objectives must be present to address how utilization of this service will occur in the future. ● All transportation reimbursement for biological parents/guardians/foster/kinship placements are at the discretion of the BSS Child Welfare Worker.
Continuing Stay Criteria	● Progress toward goals/objective has been made, but not satisfactorily achieved. ● Extenuating circumstances continue to exist related to distance, time and frequency. ● Permanency plan is still appropriate to receive this service.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals/objectives have been satisfactorily achieved. ● Child's case has been closed. ● Child has been reunified with family. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● Lodging referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for lodging reimbursement through this code. ● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service.

Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the Case Plan and visitation plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of hotel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

MDT Attendance 230455

Definition: Reimbursement for an agency/independent provider participating in the individual Multi-Disciplinary Team Meeting to present written reports of progress, answer questions and assist in establishing the appropriate plan for the identified child and/or family. Provider must be actively working with the client and submitting monthly summaries to the BSS worker. For Foster Care the child **must be** in WV BSS custody and/or it is mandated in BSS Policy or WV Statute.

Eligible for one representative per agency for:

- ASO Providers actively providing a treatment or safety service
- Mental Health Professionals providing direct treatment (Example: Therapist)

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One Meeting Three units per 92 days
Maximum Total Authorizations Available	3
Admission Criteria	● The identified parent's child was removed from the home due to an inability to control the youth's behavior. ● Youth is in the custody of the BSS
Continuing Stay Criteria	● Youth remains in the BSS 's custody.
Discharge Criteria (Any element may result in discharge or transfer)	● Reunification has occurred and the family will not participate in any further services. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● Child Placing Agencies are not eligible for an SNS referral or authorization for this service. If this service is provided to families of children in their specialized or therapeutic homes, it is considered part of their bundled rate. ● A potential provider(s) considering possible placement of a youth. ● No individual fee for service code including Medicaid Clinic or Targeted Case Management may be billed concurrently while this code is being utilized. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a

	manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. A copy of the FAST or Youth Services Safety Plan must be present in the case record. The provider must be able to provide documentation showing they attended the MDT. This could be the sign-in sheet or any other type of documentation that would provide proof of their presence at the meeting. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and presented to the MDT and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Meals 230125

Definition: Food for one identified transportation provider. Meal reimbursement is intended for foster/kinship parents when transportation is authorized in extenuating circumstances. Reimbursement is limited to the actual expenses for food not to exceed the current state reimbursement rate for ASO Meals. Specialized Foster Care agencies may receive referrals for this service on behalf of their foster homes and then reimburse their foster parents per their own agency policies.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	Unit = one day's meals Cannot Exceed three per one day
Maximum Total Authorizations Available	As Required
Admission Criteria	● Child must be in foster care placement with a permanency plan. ● Child must have an authorization in place for Transportation One or Two. ● Extenuating circumstances exist related to distance, time and frequency. ● Service must be noted on the Case Plan. ● Goals/objectives must be present to address how utilization of this service will occur in the future. ● All transportation reimbursement for biological parents/guardians/foster/kinship placements are at the discretion of the BSS Child Welfare Worker.
Continuing Stay Criteria	● Progress toward goals/objectives has been made, but not satisfactorily achieved. ● Extenuating circumstances continue to exist related to distance, time and frequency. ● Permanency plan is still appropriate to receive this service.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals/objectives have been satisfactorily achieved. ● Child's case has been closed. ● Child has been reunified with family. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Expenses for entertainment and alcoholic beverages are not covered. ● Meal referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for meal reimbursement through this code. ● Those receiving Waiver or ICF/IDD services are not eligible for this service.

	● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the Case Plan and visitation plan must be present in the case record. ● A copy of meal receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Pre-Reunification Support 230440

Definition: This service is for children who are still placed in foster care settings but are beginning transitional overnight visits to the home from which they were removed. The purpose is to observe the interactions of the family as they adjust to being re-united in their own home and report to the BSS worker and/or court regarding the family dynamics and give recommendations regarding the children being reunified. These observations are to be scheduled as well as random as determined by the MDT. The provider must be available to the family if assistance/modeling is needed including Saturday and Sunday. If a crisis arises that would require the possible removal of the child(ren) the BSS worker must be notified immediately. Behavioral health services, preferably family therapy, should also be arranged for the family to support their adjustment to the re-unification. If possible, the same agency/individual that is providing services to the parents should be used to support the transition.

Target Population	Youth Services
Program Option	Family Foster Care
Initial Authorization	92 Days Unit= One hour Maximum of four units per day 104 units
Maximum Total Authorizations Available	1
Admission Criteria	● Child remains in the custody of the WV BSS and in foster care placement. ● MDT has reviewed the case and determined that re-unification is appropriate and eminent. ● Service is noted on the BSS Case Plan. ● Provider has established a written plan for the implementation of the service and co-ordination of behavioral health services with the BSS and the BSS Child Welfare Worker
Continuing Stay Criteria	● Not applicable
Discharge Criteria (Any element may result in discharge or transfer)	● Pre-reunification was not sustainable. ● Parental rights terminated. ● Child(ren) achieve permanent placement through reunification. ● Case is closed. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● In cases where more than one member of the family is receiving this service, bill under one identified child and reflect all present in the documentation. ● The delivery of all ASO Socially Necessary Services must occur

	within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the BSS Case Plan and provider's plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect (CPS) or behavioral issues (YS) were reported within the month

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree. Related degrees are:
    • Sociology

- Psychology
- Counseling
- Interpersonal Communication
- Human Services
- Primary or Secondary Education
- Criminal Justice
- Board of Regents with an emphasis in Human Service
- Gerontology
- Family and Consumer Science **and**

• Experience providing direct service to families.
• Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
• All providers must have an acceptable CIB through WV Cares **and**
• An APS/CPS screen completed with no negative information **and**

- All required trainings completed as indicated in the provider agreement.

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Private Transportation One 230101

Definition: Private transportation one is designed to provide reimbursement for Kinship/Foster parent(s) who attend Multi-Disciplinary Team meetings, reviews, and court hearings explicitly documented on the BSS service plan.
Private Transportation One is also for reimbursement of biological parent(s) for mileage traveled to participate in visitation with child(ren), services/treatments, office visits, Multi-Disciplinary Team meetings, reviews, and court hearings explicitly documented on the BSS service plan.

This service can be used for the transportation of a foster child for medical services in which NEMT could **NOT** be accessed. Please note non-emergency medical transportation (NEMT) is utilized for medically necessary services. NEMT is accessed through Modivcare. It is the primary source for reimbursement for taking foster children to medical and behavioral appointments.

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit= One mile 1000 units
Maximum Total Authorizations Available	As required
Admission Criteria	● Documentation of the Kinship/Foster Parent's/biological parent's inability to access NEMT and the subsequent reason must be in the consumer's record. ● Documentation of the parent's inability to financially bear the cost of travel associated with visitation with child, MDT's, and court hearings. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT must recommend this service.
Continuing Stay Criteria	● Foster/Adoptive Family continues to explore their social support system to provide the service. ● MDT recommends the service continue. ● Service cannot be appropriately provided through a community resource.

	● MDT agrees that the foster care placement is appropriate for the consumer.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Child is returned. ● Child is adopted or legal guardianship is completed. ● Kinship/foster family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Youth was placed in BJS custody for detention/incarceration.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● NEMT can be accessed. ● Excludes tolls, parking and waiting time. ● All foster care providers are responsible for all costs associated with transportation not related to the following activities: MDT's, IEP's, court hearings, sibling visitation, relative visitation, biological parent visitation, foster/adoptive parent visitation, detention visits, residential placement visits, placement changes, case staffing, and adoption promotion activities. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the Referral for Socially Necessary Services and receipts must be kept for submission to MDT if requested. ● A log of trips with date, miles and reason for trip.

Additional Service Criteria:

For relatives or non-custodial friends of the family, all credentialing and training requirements are waived. The expectations are that a family member or non-custodial friend of the family will ensure that they have a valid driver's license and minimum required insurance or will arrange the transportation with a member of their family's support group who has a driver's license, insurance, and no history of legal offenses that may endanger those being transported.

Kinship/Foster Parents are automatically eligible once they have been approved by the supervising agency. Specialized and Therapeutic Foster Care Agencies are responsible for submitting service requests to Acentra Health and reimbursing their foster families.

Private Transportation Two 230102

Definition: Reimbursement for transportation of children related to visitation with parents. Those eligible for this service must be documented in the visitation plan completed by the BSS Child Welfare Worker and visitation must be explicitly documented on the BSS chid/family's Case Plan.

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Youth Services
Program Option	Kinship/Foster family care
Initial Authorization	92 days Unit= One mile 1000 units
Maximum Total Authorizations Available	As required
Admission Criteria	● Permanency plan must indicate reunification or that there is a court order mandating visitation. ● Documentation that the family of origin/kinship/ foster family is unable to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation, have been explored/exhausted. ● Case Plan originated by BSS must document the need for this service. ● MDT must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family origin/Foster/Adoptive Family is unable to provide this service and the subsequent reason must be in the consumer's record. ● The family or origin/kinship/foster family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family of origin/kinship/foster family lacks support system to provide the service. ● MDT recommends the service continue. ● Permanency plan remains reunification or there is a court order mandating visitation.

Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Permanency has been obtained. ● Family of origin/kinship/foster family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Youth was placed in BJS custody for detention/incarceration.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes tolls, parking and waiting time. ● All foster care providers are responsible for all costs associated with transportation not related to the following activities: MDT's, IEP's, court hearings, sibling visitation, relative visitation, biological parent visitation, foster/adoptive parent visitation, detention visits, residential placement visits, placement changes, case staffing, and adoption promotion activities. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the Referral for Socially Necessary Services and receipts must be kept for submission to MDT if requested. ● A log of trips with date, miles and reason for trip.

Additional Service Criteria:

For relatives or non-custodial friends of the family, all credentialing and training requirements are waived. The expectations are that a family member or non-custodial friend of the family will ensure that they have a valid driver's license and minimum required insurance or will arrange the transportation with a member of their family's support group who has a driver's license, insurance, and no history of legal offenses that may endanger those being transported.

Kinship/Foster Parents are automatically eligible once they have been approved by the supervising agency. Specialized and Therapeutic Foster Care Agencies are responsible for submitting service requests to Acentra Health and reimbursing their foster families.

Public Transportation One 230111

Definition: Reimbursement for the provision of transportation on buses, planes, and/or trains. This code may be used for local bus passes or long-distance bus tickets. Rental cars, tolls if a rental car is used, taxi fares and parking are also included in this service. This service can be used for bus passes for a parent attending visitation with their child. This service is for transportation to medical services in which NEMT could **not** be accessed and/or participate in services/treatment, office visits, Multidisciplinary Treatment team meetings, reviews, and court hearings explicitly documented on the BSS's service plan. The least costly means available must be utilized. An example includes a monthly bus pass instead of paying on a trip-by-trip basis. This service covers the fare for the shortest practical route to/from the traveler's destination.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit= Event
Maximum Total Authorizations Available	As required
Admission Criteria	● Documentation of the Kinship/Foster parent's/biological parent's inability to access NEMT and the subsequent reasoning must be in the consumer's record. ● Documentation of the biological parent's/Kinship/Foster Parent's inability to afford travel associated with visitation of the child, MDTs, or court hearings. ● Documentation in the record that other sources, such as the kinship/foster family support system/biological family support system, public transportation or non-emergency medical transportation services, have been explored/exhausted. ● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT must recommend this service.
Continuing Stay Criteria	● Kinship/foster or family/biological family lacks support system to provide the service. ● MDT recommends the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT agrees that the youth is appropriate to remain in the home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Kinship/foster family/biological family now has support system in place to provide the service. ● Family now has support system in place to provide the service.

	● Service can now be met appropriately through a community resource. ● Youth was places in BJS custody for detention/incarceration.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes waiting time ● NEMT can be accessed ● All foster care providers are responsible for all costs associated with transportation not related to the following activities: MDT's, IEP's, court hearings, sibling visitation, relative visitation, biological parent visitation, foster/adoptive parent visitation, detention visits, residential placement visiting, placement changes, case staffing, and adoption promotion activities. ● In cases where more than one member of the family is receiving this service, bill under one identified child and reflect all present in the documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of travel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Additional Service Criteria:

- Agencies and /or private companies providing this service must be regulated through the appropriate state or federal transportation department/accrediting body.
- Individual family members, children/youth, or people identified within the case record may be enrolled for this service as a means to obtain pre-paid transportation when a provider is not enrolled. The individual is responsible for reconciling the transportation with the WV BSS when the trip is completed. The BSS Child Welfare Worker must directly assist the family in the process of accessing pre-paid transportation.

Public Transportation Two 230112

Definition: Reimbursement for transportation of children related to visitation in which tickets must be purchased for buses, planes, and/or trains. This code may be used for local bus passes or long-distance bus tickets. Rental cars, tolls if a rental car is used, taxi fares and parking are also included in this service. Those eligible for this service must be documented on the BSS child/family's case plan. The least costly means available must be utilized. An example includes a monthly bus pass instead of paying on a trip-by-trip basis. This service covers the fare for the shortest practical route to/from the traveler's destination.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit= Event
Maximum Total Authorizations Available	As required
Admission Criteria	● Permanency plan must indicate reunification or there must be a court order mandating visitation. ● Documentation of the Kinship/Foster parent's/biological parent's inability to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the kinship/foster family support system/biological family support system, public transportation or non-emergency medical transportation services, have been explored/exhausted. ● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT must recommend this service.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family of origin still does not have a reliable means of transportation. ● The family of origin/kinship/foster family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family of origin/kinship. Foster family continues to explore social support system members to provide the service. ● MDT recommends the service continue. ● Service cannot be appropriately provided through a community resource. ● Permanency plan remains reunification or there s a court order mandating visitation.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Kinship/foster family/biological family now has support system in place to provide the service.

	● Service can now be met appropriately through a community resource. ● Youth was places in BJS custody for detention/incarceration.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes waiting time ● NEMT can be accessed ● All foster care providers are responsible for all costs associated with transportation not related to the following activities: MDT's, IEP's, court hearings, sibling visitation, relative visitation, biological parent visitation, foster/adoptive parent visitation, detention visits, residential placement visiting, placement changes, case staffing, and adoption promotion activities. ● In cases where more than one member of the family is receiving this service, bill under one identified child and reflect all present in the documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of travel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Additional Service Criteria:

- Agencies and /or private companies providing this service must be regulated through the appropriate state or federal transportation department/accrediting body.
- Individual family members, children/youth, or people identified within the case record may be enrolled for this service as a means to obtain pre-paid transportation when a provider is not enrolled. The individual is responsible for reconciling the transportation with the WV BSS when the trip is completed. The BSS Child Welfare Worker must directly assist the family in the process of accessing pre-paid transportation.

Step-By-Step Parenting Program 230905

Definition: Utilizing skill sets and materials obtained through the Step-by-Step Parenting Program Workshops to provide direct face-to-face services to improve parental competence and knowledge of:

- Home Safety and First Aid
- Parent-Child Interactions
- Problem Solving
- Discipline
- Appropriate supervision
- Encouragement of child/adolescent care, age-appropriate development
- Realistic expectations and standards of child/adolescent behavior of identified child

This service should be used to correct specific parenting skill deficits for parents with learning differences. This can include parents with intellectual disabilities, acquired brain injury, slow learners, learning disabilities, and low reading skills. This service is provided in a one-on-one setting and is highly individualized to meet the parent's needs. Specific examples include individualized behavior management techniques or understanding a child's specific mental or physical health condition. Providers will utilize the Step-by-Step Parenting Program Manual as well as the step-by-step checklist to assess and teach child-care skills to parents. As the Bureau for Social Services moves toward quality outcome measures, providers are required to attend the Step-by-Step Parenting Program Workshop before services can start.

Goals of the Program:

- Objectively identify impediments and supports to successful parenting, and specific parenting skill deficits, to design a comprehensive family intervention.
- Help the family organize supports and services to meet the family's needs and keep the child safe.
- Increase parenting skills to reduce the risk of, or actual, child neglect through in-home step-by-step parent training.
- Improve child health, development, and behavior problems related to parenting skill deficits.
- Have the parents maintain learned skills over time.
- Have the parents generalize learned skills to all situations in which they are needed.
- Reduce need for out-of-home care placements and permanent removal of the child.
- Help parents to decrease reliance on paid supports.
- Help parents to develop a natural support network for the family.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	• 92 days • Unit = One hour • 39 units per 92 days
Maximum Total Authorizations Available	4

Admission Criteria	1.Parent must demonstrate one or more of the following: a. Learning difficulty and/or an IDD Condition b. Inappropriate expectations of the child/adolescent c. Inability to be empathetically aware of child/adolescent needs d. Difficulty assuming role of parent e. Lack of parenting skills, parents with learning differences, risk of child neglect, risk of child developmental delay and behavior problems f. Lack of knowledge in feeding, bathing, basic medical treatment, and basic supervision –**and** - 1. Treatment plan documents a need for the service with specific goals and objectives identifying areas for improvement. 2. Service recommended by the MDT. 3. Service cannot be met through other community resources. 5. FAST was completed and it was determined child could not be maintained safely in their home.
Continuing Stay Criteria	• Progress toward Case Plan goals/objectives is documented but has not been achieved. • MDT recommends the service continue. • MDT or BSS worker, family and BSS supervisor agrees that the current placement is still appropriate. • Service cannot be met appropriately through other community resources.
Discharge Criteria (Any element may result in discharge or transfer)	• Goals and objectives have been met substantially. • Parent requests discharge. • Another service is warranted by change in the family's condition. • No outlook for improvement within this level of service. • Youth was placed in BJS custody for detention/incarceration. • Reunification is no longer an appropriate option for the family.
Service Exclusions	• No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. • If more than one parent in the same household is involved with this intervention, bill the service through one parent. • Those receiving ICF/IDD services are not eligible for this service. • The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.

	• Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	• Severity of child's issues precludes provision of services in this level of care. • Lack of social support systems indicates that a more intensive service is needed. • Severity of the parent's impairment due to a mental illness or substance use, misuse or substance use disorder problem may preclude provision of service in this level of care
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes: • Code or service name • Summary of the intervention • Client's response to the intervention • Relation to the service plan • Location where service occurred • Duration • Start/stop time • Signature of the provider and his/her title or credentials A copy of the FAST, Youth Services Safety Plan, or case plan must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart and one sent to the referring worker. This monthly progress report must contain: • A list of dates of service and the specific services rendered and/or attempts • Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention • Plan for further interventions • Any identified unmet concrete or service needs • Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
    - Sociology
    - Psychology
    - Counseling

    - Interpersonal Communication
    - Human Services
    - Primary or Secondary Education
    - Criminal Justice
    - Board of Regents with an emphasis in Human Service
    - Gerontology
    - Family and Consumer Science **and**
- Experience providing direct service to families.
- **Staff must also show proof of attendance for the Step-by-Step Parenting Program Workshop and The Family Game Workshop.**
- Staff person must be under supervision of a licensed social worker, counselor, or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and a**n APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.
- The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS.

Supervised Family Time One 230771

Definition: Service in which visitation between family members (parent to child or child to child) is observed to ensure general safety and appropriate interaction is maintained during visitation. Visitation provider either looks in on visits between family members periodically (as determined by BSS visitation plan) or observes the visit while sitting in the room with the family members. Visitation provider will observe to ensure that no abuse, either physical or emotional, takes place during visitation. Provider will also ensure that parents do not inappropriately try to influence the child to recant prior statement to CPS/police officers. Provider will further ensure that family member visiting with the child continues to interact with the child during visitation instead of stepping outside to smoke or take phone calls, falling asleep or carrying on a conversation with the visitation provider instead of the child. During events such as these, the visitation provider will either re-direct the adult family member or if severe enough, end the visit after consultation with the child's assigned BSS Child Welfare Worker. If the visitation provider needs to contact the BSS Child Welfare Worker, they should take precaution to ensure that the visit is covered so that no further inappropriate interaction takes place while the visitation provider is out of the room contacting the BSS Child Welfare Worker. This type of visitation can be done at the family's home, an outdoor recreational setting, or in an office, whichever provides the needed safety of the children and provider.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit = One half hour 104 units per 92 days
Maximum Total Authorizations Available	4
Admission Criteria	● The identified parent's child was removed from the home due to an inability to control the youth's behavior. ● Youth is in the custody of the BSS. ● The goal of visitation must be eventual reunification with parents and/or siblings or maintenance of family ties. ● If maintenance of family ties is the goal, then an alternative plan for supervision of the visit involving an informal/unpaid provider must be arranged for as soon as possible. ● Youth is unable to visit a parent or relative without adult supervision due to negative family dynamics placing the youth at risk. ● The visitation plan notes that supervision is required.
Continuing Stay Criteria	● Progress toward goals/objectives has been documented, but not achieved. ● MDT recommends the service continue. ● Child remains in the custody of the BSS and safety threats that require supervision continue to be present.

Discharge Criteria **(Any element may result in discharge or transfer)**	● Goals and objectives have been substantially met. ● Supervision of family time is no longer deemed necessary and unsupervised family time and or overnight visits have begun. ● Child has been reunified with biological family. ● Parental rights have been terminated or are in the process of termination. ● Child's case is closed. ● Visitation is deemed detrimental to the child's safety and well-being.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● In cases where more than one member of the family is receiving this service, bill under one identified client and reflect all present in the documentation. ● Specialized and Therapeutic foster homes are to be the provider of this service for the youth residing in their homes; the SNS referrals for this service should be made to the Child Placing Agencies for the youth in their homes. ● The delivery of all Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● A copy of the FAST or Youth Services Safety Plan and BSS Case Plan/Visitation Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention

	● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Supervised Family Time Two 230770

Definition: Service in which visitation between parents and children is observed to evaluate appropriateness and level of interaction. The observer/assessor will intervene if abuse or inappropriate behavior is occurring. The purpose is to assess and monitor the appropriateness of family interaction and possible reunification. The service must be identified on the Case Plan. Before each visit the provider will complete the following tasks:

- Meet with the child's caseworker to learn the child's needs as identified in the CPS/YS Safety plan and to jointly develop a specified needs list to be met during the initial visits.
    - Actions the provider must take to keep the child safe during visitation will be part of the list (e.g., if parent has a history of fondling child when they tickle the child or holds the child on their lap, then BSS Child Welfare Worker will tell provider not to allow the parent to tickle the child or have the child sit on the parent's lap). Also, things that the parent should bring to the visit like food if the visit takes place during the child's lunch time or snack time, books or toys the child likes to have present when visiting with the parent will be included on this needs list. The provider will always suggest that the visitation take place in the parent's home and as soon as possible after the child was removed from the home. If the BSS Child Welfare Worker does not agree that the visitation can take place in the parent's home, the provider will document reason why that is not possible. If face-to-face visitation is not possible, the provider should discuss what other types of contact are possible between the parents and child such as letters, text messages, emails, phone calls, etc. (none of these can be supervised by the provider). Also, the provider will obtain the BSS Visitation Plan from the BSS Child Welfare Worker. If the provider is unable to obtain the plan, the provider will write a visitation plan.
- Call Resource/Foster Parents/PRTF to obtain information related to the impact of separation on the child and the child's behaviors in order to refine the list of needs to be met during visits. Provider will discuss any behaviors the child has been exhibiting leading up to the visit. Provider will inquire about what the Resource/Foster Parent did to prepare the child for the visit each time. This preparation needs to be consistent with the court order, if it is specific.
- Contact parent(s) to confirm the visit time and place, identify any barriers to visits and arrange to meet with the parent one hour before the visit. During this time, the provider will collect any letters or cards, gifts, etc. that the parent has brought for the child to inspect them and check for appropriateness. If any questions, provider will explain to parent that the item or items will be kept by provider until they have inspected them with the BSS Child Welfare Worker. If there are items from the last visit that were not approved by the worker, the provider will give them back and instruct the parent that if they have any questions why there not approved, to contact the BSS Child Welfare Worker. Provider and BSS Child Welfare Worker will meet with parents to explain what is expected of them during the visitation – such as not discussing the court case with the child, not speaking negatively about the Resource/Foster Parents, showing up on time, calling to cancel well in advance if unable to attend the visit, the need to remain the parent during the visit meaning that the parent is in charge of controlling their child during the visit, pacify the child if child becomes upset during the visit, no cell phone usage during the visit, no unapproved visitors, and in general making the most of the visit time. The provider will explain to the parent that the provider will not be interacting with the parent during the visit, only observing, so that the parent does not become upset if the provider does not "visit" with the parent.
- Notify the Resource/Foster Parent(s)/PRTF of the planned visit and schedule transportation as needed. Provider will always ask if the Resource/Foster Parents can transport the child to the visit or at least part of the way to the visit.

By the end of the first month, the SNS provider will have arranged visitations to continue as documented in the Child's Case Plan by:

- Clarifying what needs must be met during future visits.
- Deciding what special arrangements will be made for visits.
- Identifying the level of support the parent requires during visits and consider who might replace the visitation specialist in the future, such as Resource/Foster Parent, family member, etc.
- Arranging for transportation as necessary, even in those cases when it is determined that continued supervision of visits is unnecessary.
- Maintaining weekly contact with the BSS caseworker to update placement information.

The SNS provider will perform the following functions for each visit:

- Meet with the parent before the visit to help the parent anticipate their own and the child's reactions during the visit and to discuss the needs to be met during the visit.
- Assist the parent as necessary during the visit.
- Meet with the parent after the visit to discuss how the parent met the child's needs and to plan changes in the next visit.
- Help the parent understand the importance of keeping his or her commitment to visit the child.
- Speak with the Resource/Foster Parent/PRTF after the visit to discuss any behaviors or for the child reactions the child may display.
- Prepare notes about the parent's skill in meeting the child's needs during the visit and continuously refine the needs list.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	92 days Unit = one half hour 104 units per 92 days
Maximum Total Authorizations Available	2
Admission Criteria	● The identified parent's child was removed from the home due to an inability to control the youth's behavior. ● Youth is in the custody of the BSS. ● The goal of visitation must be eventual reunification with parents and/or siblings or maintenance of family ties. ● If maintenance of family ties is the goal, then an alternative plan for supervision of the visit involving an informal/unpaid provider must be arranged for as soon as possible. ● Youth is unable to visit a parent or relative without adult supervision due to negative family dynamics placing the youth at risk. ● The visitation plan notes that supervision is required. ● The needs list indicates what specific issues are to be monitored/observed during the visitations.

Continuing Stay Criteria	● Progress toward goals/objectives has been documented but not achieved. ● MDT recommends the service continue.
Discharge Criteria **(Any element may result in discharge or transfer)**	● Goals and objectives have been substantially met. ● Child has been reunified with biological family. ● Child's case is closed. ● Visitation is deemed detrimental to the child's safety and well-being. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● If a child is placed with a residential treatment provider/child emergency shelter whose contract states that the placement must supervise visits, no authorization for visitation will be given. ● Specialized and Therapeutic foster homes are to be the provider of this service for the youth residing in their homes; the SNS referrals for this service should be made to the Child Placing Agencies for the youth in their homes. ● The delivery of all Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials.

	A copy of the FAST, Youth Service Safety plan, or Case Plan and Visitation Plan must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect (CPS) or behavioral issues (YS) were reported within the month

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
    - Sociology
    - Psychology
    - Counseling
    - Interpersonal Communication
    - Human Services
    - Primary or Secondary Education
    - Criminal Justice
    - Board of Regents with an emphasis in Human Service
    - Gerontology
    - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor, or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and a**n APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.
- The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS.

Supervision for Temporary Lodging 230701

Definition: "Eyes on" oversight required to provide appropriate supervision of child unable to be placed in an emergency child shelter, foster home, or other placement and currently residing in a hotel. The identified child must be within the defined boundary in which the provider can intervene immediately if needed to ensure the child's safety. Two adult personnel must be present, awake and alert during their shift and must ensure compliance with written plan for the child during the temporary lodging. Two staff must be present during each shift but may be a combination of DoHS staff, SNS agency staff from the same agency or SNS staff from different agencies. Any medications for the children will be required to be kept in a lock box and out of reach of the children. Staff to child ratios may be 2 staff to up to 4 children if hotel room has 4 separate beds available. Any approved activities and/or travel to and from activities for the children during the stay should be outlined in documentation from the BSS Child Welfare Worker.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	30 days Unit = one hour 1488 units per 30 days with max of 744 hours per staff person
Maximum Total Authorizations Available	2 per episode of loss of placement
Admission Criteria	● Child is in DoHS BSS custody; -**and**- ● Child's placement has disrupted and no traditional placement such as a kinship/relative foster home, emergency child shelter, or residential treatment facility is available to provide care for the child and the child must reside in a hotel; - **and** - ● Service cannot be met appropriately through other community resources, family support system and/or agency. ● Any approved activities and transportation to and from activity must be outlined in documentation from BSS Child Welfare Worker.
Continuing Stay Criteria	● Progress toward placing child in a shelter, treatment facility, family setting, or hospital has been documented but has not been achieved. ● Service continues to be needed to maintain client's need for supervision. ● No less restrictive service/intervention is available. ● MDT recommends the service continue. ● Services cannot be met appropriately through other community resources, such as workforce investment or literacy groups, family support system and/or agency.

Discharge Criteria (Any element may result in discharge or transfer)	● Child has been placed in a shelter, treatment facility, family setting, or hospital. ● Service can now be met through a community resource, family support system and/or agency. ● A less restrictive service/intervention is available.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving ICF/IDD or group foster care services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● Siblings may stay in the same hotel room together unless the BSS Child Welfare Worker asserts it is inappropriate due to case circumstances. ● Each child must have their own bed in the hotel room and be in the bathroom separately. ● Only siblings can stay in the same room together.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● This service cannot be implemented during school/day care hours if child is enrolled or should be enrolled and attending school.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● A case note must be completed for each service event **by each SNS staff member present** that includes ● Code or service name ● a summary of the intervention ● client's response to the intervention ● relation to the case plan ● location where service occurred ● duration ● start/stop time ● signature of the provider and their title or credentials. ● A copy of the child's plan of care while without placement, YS FAST or Youth Services Safety Plan and a current Case Plan must be present in the case record.

	● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A monthly progress summary must be completed and received by the BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of services and the specific services rendered and/or attempts; ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to the intervention; ● Plan for further interventions.

Additional Service Criteria:

- Staff providing this service may be paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist or counseling license who has two years post college experience providing direct service to families.
- All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Transportation Time 230104

Definition: This code is for providers whose only service is transporting a BSS client(s). These providers/transports are not associated with their own provision of a socially or behavior health medically necessary service. The provider is not engaged in an otherwise billable activity. Mileage encumbered when transporting is billed separately. The service has been documented in the BSS 's treatment/safety plan and all other natural supports/options have been explored including BSS staff and are not available for this event.

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination.

Activities:

- Drugs Screens
- Visitations with extenuating circumstances for Kinship/Foster Parents
- Not eligible for NEMT

The billable service begins when the provider leaves their identified place of business or home, whichever is shortest, and ends when provider returns to this location. Waiting time at the identified destination is included. The maximum number of hours this service may be provided in a 24-hour period is 12 hours or 48 units. Ten hours for when consumers are in the vehicle and up to 12 hours total. If an overnight trip is required, no more than 12 hours or 48 units may be invoiced. When not in the vehicle, the provider must remain at the location with the client.

If Non-Emergency Transport (NEMT) is available, this service may not be used. It can't replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties.

No providers may utilize this service to transport a child to a residential placement in or out of state.

Target Population	Youth Services
Program Option	Foster Care
Initial Authorization	208 units/92 days Unit= 15 minutes Maximum of 48 units within a 24-hour period
Maximum Total Authorizations Available	4
Admission Criteria	● Documentation of the Resource/Foster Parent's inability to access NEMT and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted.

	● Service plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT must recommend this service.
Continuing Stay Criteria	● Foster/Adoptive Family continues to explore their social support system to provide the service. ● MDT recommends the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT agrees that the foster care placement is appropriate for the consumer.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child's case is closed. ● Foster/Adoptive Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● Excludes tolls and parking ● NEMT is available ● Does not replace the responsibility of Resource/Foster parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties. ● IDD waiver or ICF recipients are not eligible for this service. ● Residential Homes and transitional living programs for vulnerable youth should follow the directions in the annual agreements with the Department to determine eligibility for children in their care. ● No providers may utilize this service to transport a child to a residential placement in or out of state. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS 's current safety plan and/or Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. All required trainings completed as indicated in the provider agreement. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

If multiple people are on one transport, they must be from the same case. The trip will be billed on the case member that is farthest distance from the identified destination. If a protection order is in place between members within the case, they must be transported separately.

YS Chafee Foster Care Independence Program

Only to be used for youth who are State Wards, between the ages of 17 to 23 who are participating in a transitional living program, usually through a facility such as Daymark, Youth Services System or Home Base.

Chafee Foster Care Independence Program: Transitional Living Placement- Pre-placement Activities 235500

A transitional living placement is a grouping or bundle of services targeted for those youth seventeen or older that are likely to remain in foster care who wish to practice living semi-independently prior to final discharge from the foster care system. Experiential learning opportunities are available for these youth through the transitional living placement option in which foster care youth establish their own household, complete educational goals and/or enter the work force in the community and are supplied with the following support, supervision and services: ongoing social casework; continued life skills instruction; assistance with career planning, employment, and job maintenance; scheduled face-to-face contact between the youth and caseworker in addition to regular phone contact; weekly planned and unannounced home visits; and linkage to medical and behavioral health services. As the tasks and responsibilities are achieved, youth gain more autonomy and require less supervision. The program serves to support the transition and to complement the individual's own efforts to achieve self-sufficiency. Supports are provided to the participants through the following activities: monitoring, adult life skills, crisis response and transportation. The provision of this group of services will be detailed in the youth's Transitional/ Learning Plan and individualized to meet their unique strengths and/or needs. Youth's participation in this service must be voluntary.

Pre-placement activities include assistance in locating housing, furniture and other household items, connecting utilities and developing the youth's budget. Other activities directly related to helping the youth with the move from foster care to the community are also completed within this service. **This service begins thirty (30) days before the actual TL placement occurs.**

**If the youth presents with a need for Targeted Case Management or supportive counseling, refer to service definition in the Medical UM and when youth is ready to continue life skills, you can refer back to this code.*

Target Population	Youth Services
Program Option	Chafee Foster Care Independence Program
Initial Authorization	30 days Unit = one hour 60 units per 30 days
Maximum Total Authorizations Available	1

Admission Criteria	● Provider agency must have a child-placing license. ● Youth meets eligibility criteria for Chafee Program by being between 17 and 23 with the department making boarding care payments to an approved foster care provider at the time of referral **–or-** youth is former foster care child who left care after the age of 18. ● Youth is demonstrating responsible behavior in present placement (e.g., no acute behavior problems, no recent or current charges for assault or violent behavior, etc.). ● Youth is pursuing an educational or vocational goal or has completed an educational and/or vocational program, but continues to need assistance with housing, employment placement and retention of health benefits (under this situation placement is limited to six months). ● Youth is capable/willing to learn how to keep a weekly planner to document forty hours of structured and planned activities per week that focus on improving chances of self-sufficiency. ● Youth has successfully completed the required Casey Life Skills Assessment and accompanying modules necessary for placement or will do so within first thirty days of the placement. ● Permanency plan is emancipation. ● Transition Plan provides specific objectives to be met and skills to be addressed with the Casey Life Skills Assessment.
Continuing Stay Criteria	● Not Applicable
Discharge Criteria (Any element may result in discharge or transfer)	● Youth has been established within their transitional living placement. ● Youth has turned 23 years old. ● Another more appropriate service has been identified due to the child's behavior or lack of ability to reasonably accomplish identified objectives. ● Youth violates terms of the FC-18 agreement. ● Youth exits foster care system.
Service Exclusions	● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● If crisis services are assessing danger to self or others, Medicaid Crisis Intervention should be utilized.

	● If skill deficits are not age appropriate or the youth previously had the skill but lost it due to a chronic and persistent mental illness, an assessment to determine if Medicaid Basic Living Skills is appropriate should occur.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. A copy of the BSS 's service plan/Transition Plan must be present in the case record. ● A PEDDL List must be obtained for each consumer from the BSS Child Welfare Worker and maintained as part of the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client receiving the service. Please include if client continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect (CPS) or behavioral issues (YS) were reported within the month if client is in BSS custody and under 18

Additional Service Criteria:

Agency must have a child-placing license.

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology

    - Psychology
    - Counseling
    - Interpersonal Communication
    - Human Services
    - Education
    - Criminal Justice
    - Board of Regents with an emphasis in Human Service
    - Gerontology
    - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and a**n APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

For Paraprofessional staff providing Chafee oversight and transportation

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Chafee Foster Care Independence Program: Transitional Living Placement 235501

This is a grouping or bundle of services targeted for those youth seventeen or older that are likely to remain in foster care who wish to practice living semi-independently prior to final discharge from the foster care system. Experiential learning opportunities are available for these youth through the transitional living placement option in which foster care youth establish their own household, complete educational goals and/or enter the work force in the community, and are supplied with the following support, supervision and services: ongoing social casework; continued life skills instruction; assistance with career planning, employment, and job maintenance; scheduled face-to-face contact between the youth and caseworker in addition to regular phone contact; weekly planned and unannounced home visits; and linkage to medical and behavioral health services. As the tasks and responsibilities are achieved, youth gain more autonomy and require less supervision. The program serves to support the transition and to complement the individual's own efforts to achieve self-sufficiency. Supports are provided to the participants through the following activities: monitoring, adult life skills, crisis response and transportation. The provision of this group of services will be detailed in the youth's Transition Plan and individualized to meet their unique strengths and/or needs. Youth's participation in this service must be voluntary.

Chafee Oversight is the process of observing a youth through scheduled and unannounced face-to-face visits or phone calls to check for progress and adherence to the Case Plan. Monitoring for a brief time period will be done in the youth's home, educational/vocational setting, or community. The Case Plan must indicate the explicit purpose as well as dictate the exact behaviors/objectives to be monitored.

Crisis Response is a face-to-face or phone intervention in the consumer's environment to assess and/or de-escalate an emergency. This service may target environmental situations that have escalated to the point that safety, permanency and/or well-being of a child or the community may be at risk. This service is available twenty-four hours a day, seven days a week. This service responds to the current crisis, identifies ways to address issues in the future, and is used when the youth is unable to resolve an emergency situation.

Transportation: Provision of transportation services for the purpose of attending school or work in rural areas without public transportation. Note: Apartments are to be located so as to provide reasonably convenient access to schools, places of employment, transportation, and other services required by the youth. The client must be present in the vehicle for this service to be provided. Transporting a client is not considered a part of the required monitoring.

Adult Skill Building: Direct service in which the child is assisted to enhance home management skills, life skills and social/emotional support networks through hands-on implementation and role modeling. * This service continues to enhance the skills needed to meet adult role expectations and carry out activities of daily living acquired through previous foster care placements (residential or family setting). Adult life skills are intended to improve the capacity for solving problems and resolving conflicts. Activities include career planning skills, life skills development, home management (includes budgeting, how to do laundry, etc.), food management, health/wellness, personal appearance/ hygiene, interpersonal skills, legal skills, and community awareness. The youth's areas of skill deficit are identified through the Casey Life Skills Assessment. The youth, with assistance, develops a Transitional Learning Plan to improve these skills unless there is documentation that the youth has previously mastered certain areas. Calculation of productivity hours is also to be included. This service is intended to increase self-sufficiency. Note:

Budgeting is required at least one time monthly to review financial statements, passbook information, and to prepare and submit youth's subsidy budget to BSS.

**If the youth present with a need for Targeted Case Management or supportive counseling, refer to service definition in the Medical UM and when youth is ready to continue life skills, you can refer back to this code.*

Target Population	Youth Services
Program Option	Chafee Foster Care Independence Program
Initial Authorization	92 days Unit = one hour 60 units per 92 days
Maximum Total Authorizations Available	Until youth's 23rd birthday
Admission Criteria	● Provider agency must have a child-placing license. ● Youth meets eligibility criteria for Chafee Program by being between 17 and 23, and the department is making boarding care payments to an approved foster care provider at the time of referral **–or-** youth is former foster care child who left care after the age of 18 years. ● Youth is demonstrating responsible behavior in present placement (e.g., no acute behavior problems, no recent or current charges for assault or violent behavior, etc.). ● Youth is pursuing an educational or vocational goal or has completed an educational and/or vocational program, but continues to need assistance with housing, employment placement and retention of health benefits (under this situation placement is limited to six months). ● Youth is capable/willing to learn how to keep a weekly planner to document forty hours of structured and planned activities per week that focus on improving chances of self-sufficiency. ● Youth has successfully completed the required Casey Life Skills modules necessary for placement or will do so within the first thirty days of the placement. ● Permanency plan is for emancipation. ● Transitional/Learning Plan specifies the objectives to be met, and skills to be addressed with the Ansell Casey modules
Continuing Stay Criteria	● Progress toward the needs and case plan goals on the Transitional/ Learning Plan has been documented, but not reasonably accomplished. ● MDT has reviewed the Case Plan or if no MDT exists, service was reviewed by BSS Child Welfare Worker and supervisor.
Discharge Criteria (Any element may result in discharge or transfer)	● Progress toward the needs and case plan goals on the Transitional/ Learning Plan has been documented and reasonably accomplished **–or-**

	● Youth has turned 23 years old. ● Another more appropriate service has been identified due to the client's behavior or lack of ability to reasonably accomplish identified objectives. ● Youth violates terms of the FC-18 agreement. ● Youth exits foster care system.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● In assessing danger to self or others, Crisis Services should use Medicaid Crisis Intervention. ● If skills are not age appropriate or the youth previously had the skill, but lost it due to a chronic mental illness, Medicaid Basic Living Skills should be used.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A copy of the BSS 's service plan/Transition Plan must be present in the case record. ● A PEDDL List must be obtained for each consumer from the BSS Child Welfare Worker and maintained as part of the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time

	● Signature of the provider and their title or credentials. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client receiving the service. Please include if client continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect (CPS) or behavioral issues (YS) were reported within the month if client is under 18 and in BSS custody

Additional Service Criteria:
Agency must have a child-placing license.

For adult life skills and family crisis response

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology
  - Psychology
  - Counseling
  - Interpersonal Communication
  - Human Services
  - Education
  - Criminal Justice
  - Board of Regents with an emphasis in Human Service
  - Gerontology
  - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and a**n APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

For Chafee Oversight and Transportation

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**

- Be under supervision of an individual with a BSW or related four-year bachelor's degree with a social work, psychologist or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Agency Transportation Chafee 235106

Definition: This code may be utilized for providers' mileage encumbered when Youth Services Chafee Services have been implemented within the child/youth's home and the permanency plan is Independence and/or emancipation.

If a provider is unable to deliver the identified service upon traveling to the home, this code may be billed up to three times within the ninety-two (92) day authorization period when the following conditions are met:

- The provider/agency has a policy and procedure regarding the expectations of the youth being served. The importance of keeping scheduled appointments, notifying the provider when an appointment needs to be cancelled and the means in which the BSS will be notified if appointments are not kept are reviewed with the client(s).
- The provider/agency has a policy and procedure about notifying the Department regarding youth's non-compliance with established scheduled appointments.
- There is documentation of the visit being scheduled within the case record.

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.

Target Population	Youth Services
Program Option	Chafee Foster Care Independence Program
Initial Authorization	92 days Unit = one mile 1000 units
Maximum Total Authorizations Available	Until youth's 23rd birthday
Admission Criteria	● Youth meets eligibility criteria for Chafee Program by being between 17 and 23 with the department making boarding care payments to an approved foster care provider at the time of referral **–or-** youth is former foster care child who left care after the age of 18 years. ● Youth is pursuing an educational or vocational goal or has completed an educational and/or vocational program, but continues to need assistance with housing, employment placement and retention of health benefits (under this situation placement is limited to six months). ● Permanency plan is independence. ● MDT reviews the service or if no MDT, BSS Child Welfare Worker and supervisor reviewed the service.

Continuing Stay Criteria	● Progress toward the needs and case plan goals on the Case Plan has been documented, but not reasonably accomplished. ● MDT has reviewed the Case Plan or if no MDT, BSS Child Welfare Worker and supervisor reviewed the service.
Discharge Criteria **(Any element may result in discharge or transfer)**	● Progress toward the needs and case plan goals on the Case Plan has been documented and reasonably accomplished. ● Youth has turned 23 years old. ● Another more appropriate service has been identified due to the youth's behavior or lack of ability to reasonably accomplish identified objectives. ● Youth violates terms of the FC-18 agreement. ● Youth exits foster care system.
Service Exclusions	● NEMT is available for Medical Appointments ● Public Transportation is accessible for youth
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. A copy of the BSS 's service plan/Transition Plan must be present in the case record. ● A PEDDL List must be obtained for each consumer from the BSS Child Welfare Worker and maintained as part of the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen . All required trainings completed as indicated in the provider agreement. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Transition to Adulthood Program Tier One 235511

Coached Community-Based Independent Tier

Definition: The Transition to Adulthood Program (TAP) is a variety of services to aid youth when they transition from foster care to adulthood and self– sufficiency. This is a three tired program where the youth must successfully complete the previous tier before moving on to the next phase.

Services- This is a list of services that the TAP agency will provide to the youth in Tier 1.

- The Transition to Adulthood provider must at intake:
  - Request the names and contact information for any appropriate adult who is willing to be a support to the youth.
  - Begin family network building activities at intake and involve identified supports in all aspects of the youth's plan throughout their stay in the program
  - Utilize Family Finding (Kevin Campbell) practice strategies to search and identify meaningful relationships for the youth
  - Assess and determine the type and level of role any identified support may be able to fill. It is important to understand these roles may change over time
  - Assess and determine the type and level of role any identified support may be able to fill. It is important to understand these roles may change over time
- Inform youth of their expectations
- Complete a Life Skills assessment within 30 days of admittance, every 6 months thereafter while the youth remains on the tier and again 30 days prior to discharge to the next tier.
- Utilize the assessment to develop a transition plan on areas that the youth needs to work on within 10 days of the completion of the Life Skills Assessment.
- Transition Plans will be revised every 90 days.
- Ensure youth progresses through verifiable milestones as listed on the transition plan which should be specific to the goals of education, employment, housing, linkage to community resources and services, and any other item which will lead to youth to independence.
- Secure Housing, single occupancy not required.
  - Youth may have roommates, but they must be approved by the youth's Child Welfare worker and must contribute to the household's finances equally.
- Ensure youth has a high school diploma or equivalent.
- Ensure youth obtains and maintains a banking account.
- Assist youth in obtaining employment.
- Connect youth to services through Economic Services.
- Assist youth with obtaining a driver's license.
- Assist youth with voter registration.
- Ensuring youth has reliable transportation and back up transportation if needed.

- Provide weekly face-to-face contact for the first 90 days. After the 90 days are over this can change to a minimum of once every 2 weeks depending on the needs of the youth. During the weeks the youth is not seen face-to-face there will be at least one (1) telephone call per week to determine how the youth is progressing and identify any barriers to achieving their goals .
- Provide youth with a monthly subsidy of $900. This cost was factored into the per diem rate. Start-up funds up to $3,500 will be provided to the youth to cover expenses such as first/last month's rent, security deposit, furniture, household items, groceries and toiletries. This will be invoiced to BSS by the provider. The invoice will include an itemized list of items purchased/paid for with receipts. Additional funding may be approved on a case by case basis but must be part of a transition plan, and approved by the BSS TL Unit prior to purchase.

Objectives and Goals – Youth will meet all items listed below and under this tier for a minimum of 12 months before advancing to the next tier.

- Obtain High School Diploma or equivalent.
- Maintain employment for at least three months with one employer.
- Demonstrate an understanding of caring for their medical health needs by:
  - Knowing when it is appropriate to seek medical attention
  - Knowing where to seek medical attention
  - Knowing how to make a Dr. appointment
  - Knowing where and how to have a prescription filled and follow prescription instructions
  - Knowing how to pay a copay.
- Demonstrate the ability to budget money for groceries and meal planning.
  - Demonstrate the ability to develop and adhere to a budget
- Demonstrate proper management of a bank account by.
  - Maintaining a minimum balance to cover unexpected expenses
  - Avoiding overdraft fees
- Meet the transition plan steps set forth by the Life Skills assessment.

Target Population	Youth Services
Program Option	Chaffee
Initial Authorization	365 days Unit = one day 365 Units
Maximum Total Authorizations Available	1

Admission Criteria	• Those youth who remain in care after age 18; • Those youth who were former foster youth, left at the age of 18 or older, and request to return to foster care after age 18, through the age of 23 and; • Those youth whose parental rights have been terminated, were in foster care immediately prior to a BJS placement and left BJS at age 18 or older. The BSS must be notified of a

	plan and be notified of MDTs six months prior to discharge from BJS. • Youth must sign the Continued Foster Care Services Agreement for Youth Over Eighteen (FC-18) to be eligible for the program. All FC-18 approval requests must be sent to the Transitional Living Unit for approval/denial. Eligibility requirements for the FC-18 are enrollment in an educational program, being employed for at least 80 hours per month or having a diagnosed disability that prevents school attendance or employment.
Continuing Stay Criteria	• Not applicable
Discharge Criteria (Any element may result in discharge or transfer)	• Goals and objectives have been met substantially • Youth's case is closed • Youth needs can now be met through a community resource.
Service Exclusions	• No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. • Those receiving ICF/IDD or group foster care services are not eligible for this service. • Any transportation codes related to service provision. • The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. • Those receiving Safe at Home services are not eligible for this socially necessary service. • This service is available only to SNS agency providers who are also child placing agencies.
Clinical Exclusions	• Severity of child's issues precludes provision of services in this level of care.
Documentation	• There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. • A case note must be completed for each service event that includes • code or service name • a summary of the intervention • client's response to the intervention

	• relation to the case plan • location where service occurred • duration • start/stop time • signature of the provider and their title or credentials. • A copy of the BSS Referral for Socially Necessary Services must be present in the case record. • A monthly progress summary must be completed and received by the BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: • A list of dates of services and the specific services rendered and/or attempts; • Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to the intervention; • Plan for further interventions.

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
  - Sociology
  - Psychology
  - Counseling
  - Interpersonal Communication
  - Human Services
  - Primary or Secondary Education
  - Criminal Justice
  - Board of Regents with an emphasis in Human Service
  - Gerontology
  - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- An APS/CPS screen completed with no negative information.
- Transportation Providers must have valid Driver's licenses from the employee's state of residence and insurance.

This service is available only to SNS agency providers who are also child placing agencies.

Transition to Adulthood Program Tier Two 235512

Supported Community-Based Independent Tier

Definition: The Transition to Adulthood Program (TAP) is a variety of services to aid youth when they transition from foster care to adulthood and self– sufficiency. This is a three tired program where the youth must successfully complete the previous tier before moving on to the next phase.

Services Provided

- Inform youth of Tier expectations.
- Continue to Identify and secure a network of adults who will provide support and encouragement throughout the youth's life.
- Utilize the assessment completed prior to discharge from the previous tier to develop a transition plan on areas that the youth need to work on within 10 days of moving to tier.
- Complete a Life Skills assessment 6 months after the youth enters the tier, every 6 months thereafter while the youth remains on the tier and again 30 days prior to discharge to the next tier.
- Utilize the assessment to develop a transition plan on areas that the youth needs to work on within 10 days of admittance to the last tier.
- Transition Plans will be revised every 90 days.
- Face to Face contact made with youth once every week for the first 90 days. After the first 90 days, face-to-face contact will be made at a minimum every two weeks. During the weeks the youth is not seen face-to-face there will be at least one (1) telephone call per week to determine how the youth is progressing and identify any barriers to achieving their goals.
- Ensure the youth progresses through their transition plan through verifiable milestones as listed on the transition plan which should be specific to the goals of education, employment, housing, linkage to community resources and services, and any other item which will lead to youth to independence.
- Connect youth to any services they might need to maintain independence.
- Keep contributed funds in a separate savings account for the youth.
    - Provider must submit copies of the youth's monthly savings account statement with the monthly summary.
    - Provide youth with a monthly subsidy of $900. This cost was factored into the per diem rate. Startup funds will not be provided under this tier as they were provided under the previous tier. Additional funding may be approved on a case by case basis but must be part of a transition plan and approved by the BSS TL Unit prior to purchase.

- Objectives and Goals - Youth will meet all items listed below and under this tier for a minimum of 12 months before advancing to the next tier.

- Maintain employment during this entire tier regardless of school enrollment.
- Complete a mock financial plan.
- Complete annual tax returns and credit checks.
- Must maintain a banking and savings account.

- Must have at least 20% of income or $2000.00 in savings by the end of the tier.
- Months 3-6 youth will contribute 30% of housing costs including utilities. *
- Months 6-12 youth will contribute 50% of housing costs including utilities. *
- Youth will complete a presentation to the service provider within month 10 of this tier to demonstrate independence and discuss preparedness for Tier 3.

*Youth will provide the service provider with funds to contribute to housing and utility costs. This will go in a separate savings account that the youth cannot access until they complete all 3 tiers and exit the program.

Target Population	Youth Services
Program Option	Chaffee
Initial Authorization	365 days Unit = one day 365 Units
Maximum Total Authorizations Available	1
Admission Criteria	• Has successfully completed TAP Tier 1 – Coached Community-Based Independent Tier. • Those youth who remain in care after age 18; • Those youth who were former foster youth, left at the age of 18 or older, and request to return to foster care after age 18, through the age of 23 and; Those youth whose parental rights have been terminated, were in foster care immediately prior to a BJS placement and left BJS at age 18 or older. The BSS must be notified of a transitional plan and be notified of MDTs six months prior to discharge from BJS. • Youth must sign the Continued Foster Care Services Agreement for Youth Over Eighteen (FC-18) to be eligible for the program. All FC-18 approval requests must be sent to the Transitional Living Unit for approval/denial. Eligibility requirements for the FC-18 are enrollment in an educationalprogram, being employed for at least 80 hours per monthor having a diagnosed disability that prevents school attendance or employment.
Continuing Stay Criteria	• Not applicable

Discharge Criteria (Any element may result in discharge or transfer)	• Goals and objectives have been met substantially • Youth's case is closed • Youth needs can now be met through a community resource.
Service Exclusions	• No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. • Those receiving ICF/IDD or group foster care services are not eligible for this service. • Any transportation codes related to service provision. • The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. • Those receiving Safe at Home services are not eligible for this socially necessary service. • This service is available only to SNS agency providers who are also child placing agencies.
Clinical Exclusions	• Severity of child's issues precludes provision of services in this level of care.

Documentation	• There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. • A case note must be completed for each service event that includes • code or service name • a summary of the intervention • client's response to the intervention • relation to the case plan • location where service occurred • duration • start/stop time • signature of the provider and their title or credentials. • copy of the BSS Referral for Socially Necessary Services must be present in the case record. • A monthly progress summary must be completed and received by the BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: • A list of dates of services and the specific services rendered and/or attempts;

	• Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to the intervention; • Plan for further interventions.

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
- Sociology
- Psychology
- Counseling
- Interpersonal Communication
- Human Services
- Primary or Secondary Education
- Criminal Justice
- Board of Regents with an emphasis in Human Service
- Gerontology
- Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- An APS/CPS screen completed with no negative information.
- Transportation Providers must have valid Driver's licenses from the employee's state of residence and insurance.

This service is available only to SNS agency providers who are also child placing agencies.

Transition to Adulthood Program Tier Three 235513

Self-Managed Community-Based Independent Tier

Definition: The Transition to Adulthood Program (TAP) is a variety of services to aid youth when they transition from foster care to adulthood and self– sufficiency. This is a three tired program where the youth must successfully complete the previous tier before moving on to the next phase.

Services Provided

- Inform youth of Tier expectations.
- Continue to Identify and secure a network of adults who will provide support and encouragement throughout the youth's life.
- Utilize the assessment completed at the end of the last tier to develop a transition plan on areas that the youth need to work on within 10 days of moving to tier.
- Transition plans are to be revised every 90 days.
- Ensure the youth progresses through their transition plan through verifiable milestones as listed on the transition plan which should be specific to the goals of education, employment, housing, linkage to community resources and services, and any other item which will lead to youth to independence.
- Ensure youth is maintaining all aspects of the previous tiers, such as employment, banking, budgeting, driver's license, etc.
- Face-to-face contact once a week for the first 90 days. Weekly phone calls with monthly face-to-face contact are required for the remainder of the tier.
- Continue to Identify and secure a network of adults who will provide support and encouragement throughout the youth's life.

Objectives and Goals- Youth will need to meet all items listed below and under this tier for 12 months before advancing to the next tier.

- Maintain employment regardless of school enrollment.
- Must be working at least 20 hours per week or 80 hours per month.
- Have a bank account in good standing.
- Must save at least 20% or $2000 by the end of the tier.
    - A copy of the monthly savings statement must be sent in with the monthly reports.
- Youth must be listed as primary or secondary on rent agreement.
- Youth must contribute 50% of rent and utilities during months 3-6 of the tier. *
- Youth must contribute 100% of rent and utilities during months 6-12 of the tier. *

*Youth will provide the service provider with funds to contribute to housing and utility costs. This will go in a separate savings account that the youth cannot access until they complete all 3 tiers and exit the program.

Target Population	Youth Services
Program Option	Chaffee
Initial Authorization	365 days Unit = one day 365 Units
Maximum Total Authorizations Available	1
Admission Criteria	• Has successfully completed Tier 2 – Supported Community-Based Independent Tier. • Those youth who remain in care after age 18; • Those youth who were former foster youth, left at the age of 18 or older, and request to return to foster care after age 18, through the age of 23 and; • Those youth whose parental rights have been terminated, were in foster care immediately prior to a BJS placement and left BJS at age 18 or older. The BSS must be notified of a transitional plan and be notified of MDTs six months prior to discharge from BJS. • Youth must sign the Continued Foster Care Services Agreement for Youth Over Eighteen (FC-18) to be eligible for the program. All FC-18 approval requests must be sent to the Transitional Living Unit for approval/denial. Eligibility requirements for the FC-18 are enrollment in an educational program, being employed for at least 80 hours per month or having a diagnosed disability that prevents school attendance or employment.
Continuing Stay Criteria	• Not applicable
Discharge Criteria (Any element may result in discharge or transfer)	• Goals and objectives have been met substantially • Youth's case is closed • Youth needs can now be met through a community resource.
Service Exclusions	• No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. • Those receiving ICF/IDD or group foster care services are not eligible for this service.

	• The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined in a currently valid BSS Case Plan or written permission has been granted by BSS. • Any transportation codes related to service provision. • Those receiving Safe at Home services are not eligible for this socially necessary service. • This service is available only to SNS agency providers who are also child placing agencies.
Clinical Exclusions	Severity of child's issues precludes provision of services in this level of care.
Documentation	• There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. • A case note must be completed for each service event that includes • code or service name • a summary of the intervention • client's response to the intervention • relation to the case plan • location where service occurred • duration • start/stop time • signature of the provider and their title or credentials. • copy of the BSS Referral for Socially Necessary Services must be present in the case record. • A monthly progress summary must be completed and received by the BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: • A list of dates of services and the specific services rendered and/or attempts; • Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to the intervention; • Plan for further interventions.

Additional Service Criteria:

• Staff providing this service must have a BSW or related four-year degree. Related degrees are:

- Sociology

- Psychology
- Counseling
- Interpersonal Communication
    - Human Services
    - Primary or Secondary Education
    - Criminal Justice
    - Board of Regents with an emphasis in Human Service
    - Gerontology
    - Family and Consumer Science **and**
- Experience providing direct service to families.
- Staff person must be under supervision of a licensed social worker, counselor or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- An APS/CPS screen completed with no negative information.
- Transportation Providers must have valid Driver's licenses from the employee's state of residence and insurance.

This service is available only to SNS agency providers who are also child placing agencies.

YS Reunification Services

Used when a child has been removed from the home and then **sent back** to live with the parent/guardian they were originally removed from.

- For example, use ‘reunification’ when the judge gives physical custody back to the parent, but leaves legal custody with BSS.
- Reunification may also be used if the judge dismisses the case and BSS is ordered to provide additional services to the family now that the child is back in the home to help support a successful family reunification.

Adult Skill Building 240390

Definition: Direct service in which the identified parent is assisted to increase basic home management skills and social/emotional support networks through hands-on implementation and role modeling. This service provides for the acquisition of skills needed to meet adult role expectations and carry out activities of daily living. Adult Skill Building is intended to improve the capacity for solving problems and resolving conflicts. Possible Adult Skill Building activities include housekeeping, cleaning, food shopping, meal preparation, laundry, budgeting, utilizing community resources, accessing medical and school records and personal care/hygiene. This service is implemented when there is a lack of skill knowledge not due to a mental health condition and implies that there is not a lack of motivation. This service is for the primary caregiver identified in the reunification plan and targets the family members of the expected discharge placement. SNS Provider will work with client on needs identified on the life skills assessment and/or needs outlined by the BSS service plan.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit = one hour 35 units per 92 days
Maximum Total Authorizations Available	4
Admission Criteria	● FAST or the family assessment was completed, and it was determined that the youth could be maintained in the home with a Youth Services Safety Plan. ● The MDT **or** BSS Child Welfare Worker, Family and BSS supervisor has reviewed progress since removal of the youth and recommend reunification which has occurred. ● The case record indicates the family displayed Safety Threats, as initially noted on the FAST, that indicate a need for supportive services to reunify the family safely. ● FAST or Case Plan or Youth Services Safety Plan indicated parents' lack of basic life skills to maintain safety, health and wellbeing of children in their care is directly related to the child's involvement with Youth Services. ● Case Plan documents the need for the service with specific objectives targeting the identified areas of improvement. ● The SNS Provider should assess the parent to determine which life skills need enhanced. The Casey Life Skills Assessment may be utilized or the SNS provider may use any propriety life skill assessment they have developed. ● Service recommended by the MDT **or** BSS Child Welfare Worker, Family and BSS Supervisor. ● Service cannot be met appropriately through other community resources, such as adult education classes or Extension Services. ● Family has explored social support system members capable of providing service to the identified client. ● The child has returned to the biological/family of origin.

Continuing Stay Criteria	● MDT **or** BSS Child Welfare Worker, Family and BSS supervisor reviews case and determines family/community placement is still appropriate. ● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● Prior to re-authorizing the Adult Skill Building service, the SNS Provider should reassess the client using a life skills assessment to identify continued deficits. ● BSS expects a detailed update be completed each 90 days on any client progress made in identified deficit areas-this should be included in the monthly summary and discussed at the MDT. ● Service cannot be met appropriately through other community resources. ● MDT **or** BSS Child Welfare Worker, Family and BSS supervisor has reviewed the Case Plan and recommend the service continue. ● Family continues to explore social support system members capable of providing service to the identified client.
Discharge Criteria **(Any element may result in discharge or transfer)**	● Goals and objectives have substantially been met. ● Parent requests discharge. ● Another service is warranted by change in the youth's condition. ● No progress has been documented toward achievement of goals/objectives on the Case Plan. ● No outlook for improvement with this level of service. ● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● This service cannot be provided to the primary client in a YS case and under the age of 18. It is expected that the Casey Life Skills assessment will be completed on all children 14 and older that are clients in open YS cases.

Clinical Exclusions	● Severity of the parent's impairment due to a mental illness or substance use, misuse or substance use disorder problem may preclude provision of service in this level of care. If the parent previously had the skill and lost the ability to perform the task due to the severity of their mental illness/ substance use, misuse or substance use disorder, a mental health professional should be consulted to determine if the parent meets medical necessity for Basic Living Skills in the Medicaid Rehabilitation Manual. ● Severity of the parent's impairment due to Intellectual Developmental Delay or developmental delays may preclude provision of this service. A mental health professional should be consulted to evaluate the possibility of short-term Day Treatment Services. ● Severity of parent's impairment due to traumatic brain injury (TBI) may preclude provision of this service. A rehab professional should be consulted to evaluate the possibility of rehabilitation services.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the Case Plan and/or Youth Services Safety Plan must be present in the case record. A copy of the client's Casey Life Skills Assessment(s) should be maintained as part of the provider's case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts. ● Overall summary of progress for the client/family receiving the service. Please

	include if family continues to benefit and/or the barriers to intervention. ● Plan for further interventions. ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect (CPS) or behavioral issues (YS) were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- All providers must have a CIB and an APS/CPS screen completed with no negative information.

Agency Transportation 240106

Definition

This code may be utilized for providers' mileage encumbered when the following services from the Youth Services Family Reunification Program Option have been implemented within the child/family's home:

- Adult Skill Building
- Child Community Connection
- Court Attendance
- Daily Respite
- Hourly Respite
- Individualized Parenting
- MDT Attendance
- YS Safety Services
- Supervised Family Time One
- Scheduled In-Person Observation
- Transportation Time
- Unscheduled In-Person Observation

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

If a provider is unable to deliver the identified service upon traveling to the home, this code may be billed up to three times within the ninety-two (92) day authorization period when the following conditions are met:

- The provider/agency has a policy and procedure regarding the expectations of the families being served. The importance of keeping scheduled appointments, notifying the provider when an appointment needs to be cancelled and the means in which the BSS will be notified if appointments are not kept are reviewed with the client(s).
- The provider/agency has a policy and procedure about notifying the Department regarding youth/family's non-compliance with established scheduled appointments.
- There is documentation of the visit being scheduled within the case record.

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit = One mile 1000 units
Maximum Total Authorizations Available	4
Admission Criteria	● FAST or the family assessment was completed, and it was determined that the youth could be maintained in the home with a Youth Services Safety Plan.

	● The MDT- or BSS Child Welfare Worker, Family and BSS supervisor have reviewed progress since removal of the youth and recommend reunification. ● The case record indicates the family displayed Safety Threats, as initially noted on the family assessment, that indicate a need for supportive services to reunify the family safely. ● FAST or Case Plan and/or case record indicated parents' lack of transportation was directly related to the child's involvement with Youth Services because it inhibited the parents' ability to maintain safety, health and wellbeing of children in their care. ● Documentation of the parent's inability to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored exhausted. ● Case Plan originated by BSS plan must document the need for this service and have specific areas or appointment types that targeted for improvement. ● MDT - or BSS Child Welfare Worker, Family and BSS supervisor must recommend this service. ● The child has returned to the biological/family of origin.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family lacks support system to provide the service. ● MDT - or BSS Child Welfare Worker, Family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT - **or** BSS Child Welfare Worker, Family and BSS supervisor agree that the youth is appropriate to remain in the home setting.
Discharge Criteria **(Any element may result in discharge or transfer)**	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Youth was placed in BJS' custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may

	be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● If more than one member of a case is being transported, bill under one FACTS Client ID and note all present in documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS Case Plan or Youth Services Safety Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen . All required trainings completed as indicated in the provider agreement. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Child Community Connection 240915

Definition: The Child Community Connection (CCC) service seeks to engage with and empower families to identify needed supports and facilitate referral and linkage to formal and informal community resources once their child(ren) have returned home from placement. These resources should be available at no cost or be affordable to the family without additional financial assistance from the WV Bureau for Social Services. These services include, but are not limited to, tutoring, mentoring, counseling or mental health services, self-help and other support groups, educational, arts, or science programs which will continue to support the family after BSS case closure. SNS Providers should make the family aware of resources available to all/most West Virginians such as WV Works, Family Assistance, Children with Serious Emotional Disorder Waiver services, as well as applicable mental health crisis phone numbers. BSS will make available a resource directory for families that the SNS provider will be required to utilize as part of the CCC service. SNS providers of CCC will be expected to make at least 3 attempts to contact Resource for/with the family to make linkage but will not be held to the expectation that the family successfully enrolls/completes a referred resource. Providers will need to document the specific resources identified and what actions they took to facilitate the family's linkage to the resource.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit= One hour 35 units per 92 days
Maximum Total Authorizations Available	1 – No reauthorizations available
Admission Criteria	● Family is engaged in an active Youth Services case. ● This service may not be referred to an SNS Provider prior to the completion of a FAST Assessment in an open Youth Service case. ● Child must remain in their home. ● Children in BSS custody who have returned home for a trial period are eligible to receive this service. ● Service recommended by the BSS Child Welfare Worker, family and BSS supervisor. ● BSS will require CCC providers, at the minimum, to relay to families these four resources: WV211, Help4WV, their area Family Resource Network and an applicable Suicide Hotline such as WV 988. ● Family lacks a social support system capable of providing service to the identified client.
Continuing Stay Criteria	● Not Applicable

Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Child is placed/remains in BSS custody **and** removed from the home. ● Child enters BJS custody and is removed from the home. ● Child's case is closed. ● Family has gained a social support system capable of providing service to the family. ● Family needs can now be met through a community resource. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Child Community Connection will not be authorized concurrently with YS Safety Services. This service is not related to the child's safety in the home. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials SNS Providers of Child Community Connection must document specifically what resources the child/family were linked to during the service provision including the name of the person/entity, service being referred, date and number of attempts made to contact the resource and the outcome of contact.

	A copy of the FAST must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: A list of dates of service and the specific services rendered and/or attempts. ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention. ● Plan for further interventions. ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Court Attendance 240755

Definition: Reimbursement for an SNS agency/independent provider **subpoenaed** to testify in a Circuit Court hearing related to an open BSS Child Welfare Case. Provider should be present at the hearing prepared to testify to answer questions, give updates on service participation, and assist in establishing the appropriate plan for the identified child and/or family. The provider must be actively working with the client and submitting monthly summaries to the BSS child welfare worker. For Reunification cases there **must be** circuit court involvement with a petition filed and/or it is mandated in BSS Policy or WV Statute.

Eligible for any subpoenaed representative per agency for:

- SNS Providers actively providing a treatment or safety service
- Mental Health Professionals providing direct treatment (Example: Therapist)

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit = One Event
Maximum Total Authorizations Available	As Required
Admission Criteria	● FAST was completed and it was determined that the youth could be maintained in the home with a Youth Services Safety Plan. ● Circuit court involvement with a petition filed and/or it is mandated in BSS Policy or WV Statute. ● SNS Provider will submit a copy of the subpoena to Acentra at the time of prior auth request. If multiple SNS staff were subpoenaed for testimony additional units may be authorized. ● If a subpoena is not issued for staff requested at court by DoHS then a court order showing that testimony was given by SNS provider(s) may be accepted in lieu of subpoena.
Continuing Stay Criteria	● Child(ren) returned to the home of parent(s) with services. ● Case remains open.
Discharge Criteria (Any element may result in discharge or transfer)	● Case is closed. ● Child(ren) are returned to the custody of the BSS and are no longer placed with a parent. ● Youth was placed in BJS custody for detention/incarceration

Service Exclusions	● Provider is not already receiving reimbursement for administrative case management through a Provider Agreement with BSS. ● No individual fee for service code including Medicaid Clinic or Targeted Case Management may be billed concurrently while this code is being utilized. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. The provider must retain documentation showing they attended the Circuit Court hearing. If the County does not issue subpoenas prior to court the SNS provider may submit a copy of the court order showing provider testimony was given to Acentra to obtain authorization for service. The standard 10-day timeline for prior authorization will not apply to the Court Attendance service code. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and presented to the MDT and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please

	include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Daily Respite 240430

Definition: Planned break for primary caretakers who are in challenging situations in which a trained provider, friend or family member assumes care giving and supervision of a child(ren) for a brief period of time. Service may be provided in or out of the natural home on a daily basis. Service may also be utilized if the caretaker has a scheduled inpatient medical procedure.

Target Population	Child Protective Services
Program Option	Reunification
Initial Authorization	92 days Unit = One day 3 units per 92 days
Maximum Total Authorizations Available	14 units Maximum within 12-month period per provider
Admission Criteria	● Parent(s) are in need of a break from supervision and care giving responsibilities.
Continuing Stay Criteria	● Service continues to be needed to provide support to maintain client's placement as identified on the service plan. ● Case Plan identifies the current plan is for the child to remain in the identified foster home placement if possible.
Discharge Criteria (Any element may result in discharge or transfer)	● Child's case is closed. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No other fee-for-service Socially Necessary Service may be billed concurrently with this service ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All requires trainings completed as indicated in the provider agreement.

Functional Family Therapy 240800

FFT is a family intervention program for dysfunctional youth with disruptive, externalizing problems. Target populations range from at-risk pre-adolescents to youth with moderate to severe problems such as conduct disorder, violent acting-out, and substance use, misuse or substance use disorder. While FFT targets youth aged 11-18, younger siblings of referred adolescents often become part of the intervention process.

FFT Program goals are to eliminate the youth's referral problems, improve prosocial behaviors and improve family and individual skills. The program is broken down into five phases of intervention:

- Engagement- Maximize family initial expectation of positive change;
- Motivation- Create a motivational context for long-term change;
- Relational Assessment- Complete relational (functional) assessment of family relationships to provide foundation for changing behaviors in subsequent phases;
- Behavior Change- Facilitate individual and interactive/ relational change;
- Generalizations- Maintain individual and family change and facilitate change in multiple systems.

Outpatient Clinics or In home setting permitted	Unit= One Day Authorization 120 units per 120 days
Admission Criteria:	● Service must be referred by BSS ● Child must remain in their home ● Children in BSS custody who have returned home for a trial period ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement. ● May be used for children in foster care who are pregnant and/or parenting.
Continued Stay:	● Child must have remained in their home ● Children in BSS custody have returned home for a trial period ● WV BSS Prevention or Case Plan must be provided, or service cannot be authorized. A provider plan will not substitute this requirement.
Discharge Criteria	● Goals have been accomplished ● Family/youth is not participating ● No progress has been demonstrated

	● Youth enters BSS custody ● Youth turns 19 years of age
Service Exclusions:	● Behavioral or mental health therapy ● Any transportation codes related to service provision ● Other parenting education programs
Clinical Exclusions:	● In active withdrawal ● In acute psychiatric care
Documentation:	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed within 15 days for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the youth services case plan and the CANS and/or Family Service Plan must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. BSS Standard Form must be used. This monthly progress report must contain:

	● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Prerequisite/Minimum Provider Qualifications:

- Qualifications can vary for therapists, but to become an onsite Program Supervisor a minimum of master's level education is required. A formal certification must be present in provider/employee records.
- Trauma-informed care training.

*Agencies must sign an affiliate agreement indicating they will adhere to the Essential Requirements to meet model fidelity.

Hourly Respite 240530

Definition: Planned or unplanned break for primary caretakers who are in challenging situations in which a trained provider, friend or family member assumes care giving and supervision of a child(ren) for a brief period of time. Service may be provided in or out of the natural home or on an hourly/daily basis. Temporary relief from parenting responsibilities is provided to avoid an abuse, neglect or abandonment situation or a placement disruption.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit = One hour 30 Units per 92 days Maximum 120 units (5 days)
Maximum Total Authorizations Available	4
Admission Criteria	● BSS Child Welfare Worker, family and BSS supervisor agree that the children can be maintained safely in the home. ● BSS Child Welfare Worker, family and BSS supervisor recommend this service. ● Family has explored appropriate social support system members capable of providing service to the identified client. ● A registered SNS provider must be utilized for Hourly Respite unless exceptional circumstances are documented.
Continuing Stay Criteria	● Parents/caretakers continue to display behaviors that were documented on the FAST that indicated the need for a safety plan. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Family has explored appropriate social support system members capable of providing service to the identified client. ● Service continues to be needed to provide support to maintain client's placement as identified on the service plan. ● Case plan identifies the current plan is for the child to remain in the identified home.
Discharge Criteria (Any element may result in discharge or transfer)	● Parent requests discharge. ● Another service is warranted by change in the child's condition. ● Service is not able to maintain safety in home environment, resulting in a change of placement. ● No outlook for improvement with this level of service.

	● Service can now be provided through a community resource. ● Family has developed a social support system capable of providing the service to the identified client. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● Excludes placement at Emergency Shelters for children not in custody. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● The child can effectively and safely be treated at a lower level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● If a safety plan exists for this case, a copy of the current safety plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Individualized Parenting 240300

Definition: Direct face-to-face services to improve parental competence and knowledge of:

- Basic child/adolescent care skills
- Nurturing
- Discipline strategies
- Appropriate supervision
- Encouragement of child/adolescent care and age-appropriate development
- Realistic expectations and standards of child/adolescent behavior

This service should be used to correct specific deficits in parenting. This service is provided in a one-on-one setting and is highly individualized to meet the parents' needs. Specific examples include individualized behavior management techniques or understanding a child's specific mental or physical health condition. As the Bureau for Social Services moves toward quality outcome measures, providers are **required** as of 7/1/2026 to use an evidence-based parenting curriculum as applicable for each client. Some examples include Active Parenting, Positive Parenting, and Common Sense Parenting. Contact bsssnsprogram@wv.gov for the full list of WV BSS approved evidence-based parenting curriculums.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit = one hour 39 units per 92 days
Maximum Total Authorizations Available	4
Admission Criteria	1. FAST was completed and it was determined that the youth could be maintained in the home with a Youth Services Safety Plan. 2. The MDT **or** BSS worker, Family and BSS supervisor have reviewed progress since removal of the youth and recommend reunification which has occurred. 3. The case record indicates the family displayed Safety Threats, as initially noted on the FAST or Case Plan, that indicate a need for supportive services to reunify the family safely. 4. FAST or Case Plan indicated parents' lack of specific parenting skills to maintain safety, health and wellbeing of children in their care are directly related to the child's involvement with Youth Services. 5. Parent must demonstrate one or more of the following. a. Inappropriate expectations of the child/adolescent. b. Inability to be empathetically aware of child/adolescent needs. c. Difficulty assuming role of parent. d. Lack of knowledge in feeding, bathing, basic medical treatment, and basic supervision. 6. Case Plan documents a need for the service with specific goals and objectives identifying areas for improvement. 7. Service recommended by the MDT **or** BSS worker, Family and BSS Supervisor.

	8. Service cannot be met through other community resources (in as disability specific support groups such as CHADD for those with ADHD) or family's support system. 9. FAST was completed and it was determined a Youth Services Safety Plan with service provided to the parent was needed to maintain the child in the home. 10. The child has returned to the biological/family of origin.
Continuing Stay Criteria	● Progress toward Case Plan goals/objectives is documented but has not been achieved. ● MDT **or** BSS worker, Family and BSS supervisor recommend the service continue and agree that placement in the home is still appropriate. ● Service cannot be met appropriately through other community resources.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Parent requests discharge. ● Another service is warranted by change in the family's condition. ● No outlook for improvement within this level of service. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● If more than one parent in the same household is involved with this intervention, bill the service through one parent.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● Severity of the parent's impairment due to a mental illness or substance use, misuse or substance use disorder problem may preclude provision of service in this level of care. ● Lack of social support systems indicates that a more intensive service is needed.

Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the FAST or Youth Services Safety Plan must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect (CPS) or behavioral issues (YS) were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- All providers must have an acceptable CIB through WV Cares with no negative comments **and**
- All required trainings completed as indicated in the provider agreement **and**
- All providers must have a CIB and an APS/CPS screen completed with no negative information.
- Providers are advised that submission of verification regarding evidence-based curriculum training or certification to the Community Partnership Unit is required to continue providing Individuated Parenting services and is a prerequisite for reimbursement.

Intervention Travel Time 240105

Definition:

This code is for reimbursing providers who are traveling to an MDT or to complete a home visit in which a Socially Necessary Service is being provided when the time to reach the home from the providers business **exceeds one hour one way**. Mileage encumbered when transporting is billed separately. The service has been documented in the BSS 's child/family's Case Plan and all other natural supports/options have been explored.

Service Codes:

- Adult Skill Building
- Child Community Connection
- Court Attendance
- Daily Respite
- Hourly Respite
- Individualized Parenting
- MDT Attendance
- YS Safety Services
- Scheduled In-Person Observation
- Supervised Family Time One
- Unscheduled In-Person Observation

This service covers actual time traveled using the shortest and/or quickest practical route to the traveler's destination. The billable service begins after the provider leaves their identified place of business and ends when provider reaches the family's home or identified location. If the provider is doing concurrent home visits, the time traveling from one home to the next must exceed one hour one way to be billed. Maximum of 16 units per day are allowable.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit= 15 min 416 units per 92 days
Maximum Total Authorizations Available	4
Admission Criteria	● Provider has been referred one of the designated services ● Youth has physically returned back to a parent or relative
Continuing Stay Criteria	● Service continues to recommend by the MDT/BSS ● Progress towards goals noted on BSS Case Plan has been documented
Discharge Criteria (Any element may result in discharge or transfer)	● No progress has been made ● Case is closed ● Family refuses in-home services ● Goals on the BSS Case Plan have been substantially met ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Excludes tolls and parking ● Does not replace the responsibility of Resource/Foster

	Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties. ● IDD waiver or ICF recipients are not eligible for this service ● If multiple people are on one transport, they must be from the same case. The trip will be billed on the case member that is farthest distance from the identified destination. If a protection order is in place between members within the case, they must be transported separately. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, transportation time for the trip (if transport time is approved), signature of the provider and their title or credentials. ● A copy of the BSS 's Case Plan or Youth Services Safety Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

• For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. All required trainings completed as indicated in the provider agreement. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Lodging 240120

Definition: Hotel or motel accommodation required for biological family members/guardians when transportation is authorized in extenuating circumstances. Lodging does not cover other convenience/entertainment services that may be available through the hotel/motel. Reimbursement will be for the least expensive single room rate available up to the current WV State rate. Charges incurred due to the failure of the transportation provider to notify the lodging facility of cancellation will be considered a personal expense of the provider.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit = One Night
Maximum Total Authorizations Available	As Required
Admission Criteria	● The MDT **or** BSS worker, Family and BSS supervisor has reviewed progress since removal of the youth and recommend reunification which has occurred with at least one parent. ● Child's Case Plan reflects the need for the service. ● Family lacks a social support system capable of providing service to the identified client. ● The child has returned to the biological/family of origin. ● All transportation reimbursement for biological parents/guardians/foster/kinship placements are at the discretion of the BSS Child Welfare Worker.
Continuing Stay Criteria	● MDT **or** BSS worker, Family and BSS supervisor recommend the service continue. ● Family continues to lack a social support system capable of providing service to the identified client. ● Service continues to be needed to provide support to maintain consumer's placement as identified on the Case Plan. ● Case Plan identifies the current plan is for the child to remain in the identified home.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met. ● Child is placed in custody. ● Child's case is closed. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● Lodging referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for lodging reimbursement through this code. ● No individual fee for service socially Necessary Service codes may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Those receiving Safe at Home services are not eligible

	for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● The child can effectively and safely be treated at a lower level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the Case Plan or Youth Services Safety Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of hotel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

MDT Attendance 240455

Definition: Reimbursement for an agency/independent provider participating in the individual Multi-Disciplinary Team Meeting to present written reports of progress, answer questions and assist in establishing the appropriate plan for the identified child and/or family. The Provider must be actively working with the client and submitting monthly summaries to the BSS worker. For Reunification service category, youth **must be** in at least one parent's physical custody and/or it is mandated in BSS Policy or WV Statute.

Eligible for one representative per agency for:

- ASO Providers actively providing a treatment or safety service.
- Mental Health Professionals providing direct treatment (Example: Therapist)

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit = One Meeting Three units per 92 days
Maximum Total Authorizations Available	2
Admission Criteria	● The identified youth was removed from the home due to an inability to control the youth's behavior and has now returned. ● Youth has been reunified with their family.
Continuing Stay Criteria	● Youth remains in the community with their family.
Discharge Criteria (Any element may result in discharge or transfer)	● Case is closed. ● Youth has returned to the custody of BSS and are no longer placed in a foster care setting or ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● Provider is not already receiving reimbursement for administrative case management through a Provider agreement with BSS. ● No individual fee for service code including Medicaid Clinic or Targeted Case Management may be billed concurrently while this code is being utilized. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● None
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies.

	A case note must be completed for each service event that includes: ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials. A copy of the FAST or Youth Services Safety Plan must be present in the case record. The provider must be able to provide documentation showing they attended the MDT. This could be the sign-in sheet or any other type of documentation that would provide proof of their presence at the meeting. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and presented to the MDT and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Meals 240125

Definition: Food for one identified transportation provider. Meal reimbursement is intended for biological family members/guardians when transportation is authorized in extenuating circumstances. Reimbursement is limited to the actual expenses for food not to exceed the current state reimbursement rate for ASO Meals.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	Unit = One Days Meals Cannot exceed 3 per day
Maximum Total Authorizations Available	As required
Admission Criteria	● The MDT **or** BSS worker, Family and BSS supervisor has reviewed progress since removal of the youth and recommend reunification which has occurred with at least one parent. ● Child's Case Plan reflects the need for the service. ● All transportation reimbursement for biological parents/guardians/foster/kinship placements are at the discretion of the BSS Child Welfare Worker. ● Family lacks a social support system capable of providing service to the identified client. ● The child has returned to the biological/family of origin.
Continuing Stay Criteria	● MDT **or** BSS worker, Family and BSS supervisor recommend the service continue. ● Family continues to lack a social support system capable of providing service to the identified client. ● Service continues to be needed to provide support to maintain consumer's placement as identified on the Case Plan. ● Case Plan identifies the current plan is for the child to remain in the identified home.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met. ● Child is placed in custody. ● Child's case is closed. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service socially Necessary Service codes may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Meal referrals are intended for biological/foster/kinship families only. SNS providers/staff members are not eligible for meal reimbursement through this code. ● Those receiving Safe at Home services are not eligible for this socially necessary service.

Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● The child can effectively and safely be treated at a lower level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the Case Plan, location, duration, start/stop time, signature of the provider and their title or credentials. ● A copy of the Case Plan and visitation plan must be present in the case record. ● A copy of meal receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Private Transportation 240100

Definition: Reimbursement for the provision of transportation services in a personal vehicle. The activity(ies) that the child/youth and/or family need transportation for must be explicitly documented on the BSS safety plan or Case Plan. Examples include medical appointments for which non-emergency medical transportation could **not** be accessed, respite, and visitation, etc.

The least costly means available must be utilized. This service covers actual miles traveled using the shortest practical route to the traveler's destination. This rate is intended to cover all operating costs of the vehicle (including fuel, maintenance, depreciation, insurance, etc.).

Please note non-emergency medical transportation (NEMT) is utilized for medically necessary services. NEMT is accessed through Modivcare. NEMT must be used for transportation to and from medical and behavioral health appointments when the person has traditional Medicaid coverage.

Please note: the rate will be based upon the current State of West Virginia reimbursement rate.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit= One mile 1000 units
Maximum Total Authorizations Available	As required
Admission Criteria	● FAST or the family assessment was completed, and it was determined that the youth could not be maintained in the home with a Youth Services Safety Plan. ● The MDT or BSS Child Welfare Worker, Family, and BSS supervisor have reviewed the progress since removal of the youth and recommend reunification. ● The case record indicates the family displayed Safety Threats that indicate a need for supportive services to reunify the family safely. ● The FAST or Case plan and/or case record indicated parents' lack of transportation was directly related to the child's involvement with Youth Services because it inhibited the parents' ability to maintain safety, health, and well-being of children in their care. ● Documentation of the parent's inability to afford to pay for transportation (gas money, depreciation of vehicle, etc.) and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted.

	● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● BSS Child Welfare Worker, family and BSS supervisor must recommend this service. ● The child has returned to the biological/family of origin.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family continues to explore social support system members to provide the service. ● BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT or BSS Child Welfare Worker, family and Supervisor agree that the child is appropriate to remain in their home setting.
Discharge Criteria **(Any element may result in discharge or transfer)**	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Youth was placed in BJS custody for detention/incarceration.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● NEMT can be accessed ● Those receiving Safe at Home services are not eligible for this socially necessary service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	● A copy of the Referral for Socially Necessary Services and receipts must be kept for submission to MDT if requested. ● A log of trips with date, miles and reason for trip.

Additional Service Criteria:

For relatives or non-custodial friends of the family, all credentialing and training requirements are waived. The expectations are that a family member or non-custodial friend of the family will ensure that they have a valid driver's license and minimum required insurance or will arrange the transportation with a member of their family's support group who has a driver's license, insurance, and no history of legal offenses that may endanger those being transported.

Kinship/Foster Parents are automatically eligible once they have been approved by the supervising agency. Specialized and Therapeutic Foster Care Agencies are responsible for submitting service requests to Acentra Health and reimbursing their foster families.

Public Transportation 240110

Definition: Reimbursement for the provision of transportation on buses, planes, and/or trains. This code may be used for local bus passes or long-distance bus tickets. Rental cars, tolls if a rental car is used, taxi fares and parking are also included in this service. The activity(ies) that the child/youth and/or family need transportation for must be explicitly documented on the BSS's Case Plan. Examples include medical appointments for which non-emergency medical transportation could **not** be accessed or respite, visitation, etc. The least costly means available must be utilized. This service covers the fare for the shortest practical route to/from the traveler's destination.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit= Event
Maximum Total Authorizations Available	As required
Admission Criteria	● The MDT or BSS Child Welfare Worker, Family and BSS supervisor have reviewed progress since removal of the youth and recommend reunification which has occurred with at least one parent. ● The case record indicates the family displayed Safety Threats that indicate a need for supportive services to reunify the family safely. ● FAST or Case Plan and/or case record indicated the parents lack of transportation was directly related to the child's involvement with Youth Services because it inhibited the parents' ability to maintain safety, health and wellbeing of children in their care. ● Documentation of the parent's inability to afford to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Case Plan originated by BSS must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT or BSS Child Welfare Worker, family and BSS supervisor must recommend this service. ● The child has returned to the biological/family of origin.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family lacks support system to provide the service. ● MDT or BSS Child Welfare Worker, family and BSS supervisor recommend the service continue.

	● Service cannot be appropriately provided through a community resource. ● MDT or BSS Child Welfare Worker, family and BSS supervisor agree that the youth is appropriate to remain in the home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Youth was placed in BJS custody for detention/incarceration.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● Excludes waiting time ● NEMT can be accessed ● In cases where more than one member of the family is receiving this service, bill under one identified child and reflect all present in the documentation. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. ● A copy of travel receipts and SNS invoices should be maintained by the family member being reimbursed for the duration of the case. The BSS Child Welfare Worker and/or the MDT may request to review receipts and invoices at any time.

Additional Service Criteria:

- Agencies and /or private companies providing this service must be regulated through the appropriate state or federal transportation department/accrediting body.
- Individual family members, children/youth, or people identified within the case record may be enrolled for this service as a means to obtain pre-paid transportation when a provider is not enrolled. The individual is responsible for reconciling the transportation with the WV BSS when the trip is completed. The BSS Child Welfare Worker must directly assist the family in the process of accessing pre-paid transportation.

YS Safety Services 240450

Definition: A grouping of services for families to reduce and/or eliminate conditions/behaviors leading to out-of-home placement of children or families who are at imminent risk of out-of-home care due to Youth Services (including juvenile court) involvement. This grouping includes scheduled and unscheduled in person observation and Navigation and Support. The mix of these services provided is based upon the Youth Services Safety Plan completed by the BSS Child Welfare Worker and these services cannot be met appropriately through other community resources, such as adult education classes, personal care or Extension Services. Eighty percent of the services must occur in the family's home or community. The remaining twenty percent of the activities may be administrative functions/activities that directly relate to the control of the Safety Threats. These activities correspond to the services identified in the bundle and target controlling the behavior and conditions that immediately threaten the children/family/community. This service must commence within 24 hours of referral. 'Community' refers to the places that are natural locations the family would be together, not office settings.

Scheduled In-Person Observation: "Eyes on" in-person oversight of the child or family which provides an active, ongoing assessment of stressors which affect safety and may result in necessary action. The emphasis here is that the provision of Scheduled In-Person Observation will assist in controlling one or more of the identified impending Safety Threats identified in the FAST. The identified child or family requiring service must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety, permanency, and wellbeing. Structure and environmental control are needed to ensure safety of family and community from the impulsive, delinquent or criminal behavior of the identified client or to ensure safety of a child and the family due to the volatile, aggressive and/or self-harmful behaviors of a child or family member. In some cases, previous attempts at appropriate structure and environmental control are documented and have been unsuccessful. This service cannot be implemented during school hours.

Unscheduled In-Person Observation: "Eyes on" in-person oversight required to ensure safety for the identified client, family and/or community. The identified child or family requiring observation must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety. The ASO Safety Services Provider may need to notify BSS Child Welfare Worker, the WV Centralized Intake for Abuse and Neglect or law enforcement of any change in circumstance as outlined on the BSS Safety Plan. ***If the child(ren), family, and/or community are believed to be experiencing an Immediate Safety Threat, as defined in YS Policy 3.8 (see definition below), the provider, in consultation with their supervisor, will immediately contact*** **WV Centralized Intake for Abuse and Neglect (within 24 hours 1-800-352-6513)** ***to initiate a report and shall call law enforcement. If safe, the provider shall remain in the home until either law enforcement or youth services arrives to make a safety determination for the care and custody of the child.*** This service is intended for unannounced safety checks as outlined in the BSS Safety Plan. The family may not be penalized in any way for not being at home/available when the provider arrives for unscheduled observation.

Navigation and Support: ASO Provider will provide families with a general overview of the WV Child Welfare Process and assigned BSS staff contact information. ASO provider will support the family as they contact community resources to address food insecurity, substance use disorder treatment, mental health counseling, job services, housing as needed, and other concrete needs related to child/family safety. The ASO Provider may also use this service to make referrals to address structural safety within the home such as damaged flooring or exposed wiring as it is related to the child's safety. The ASO Provider should empower the family to begin the change process as the case transitions to

BSS Case Management. The ASO Provider should encourage the family to become active participants in their BSS safety/case plan through community resource linkage and referral activities.

Immediate Safety Threats are instances where the safety of a child or children in the home is at immediate risk of severe harm. These safety threats are significant, clearly observable, presently occurring, and require no guesswork as its status of being a dangerous situation. Immediate Safety Threats may be caused by the actions or inactions of a parent or guardian, or the living environment When a child welfare worker encounters these situations, action must be taken immediately, and appropriate steps must be taken to remove or prevent the threat prior to the worker leaving the situation

Target Population	Youth Services
Program Option	Family Preservation
Initial Authorization	Unit = one hour 200 direct contact hours per 92 days
Maximum Total Authorizations Available	1 – Any additional authorizations will require BSS Regional Staff approval
Admission Criteria	● A Family Advocacy Support Tool (FAST) been completed, and child has been found to be at imminent risk of out-of-home placement. ● Open Youth Services case. ● The individualized Youth Service Case Plan contains a safety component containing strategies designed to address Safety Threats determined in the FAST. ● Referral was received directly from Department staff. ● Service cannot be safely provided through a community resource or the family support system. ● SNS Provider will be required to provide Acentra Health a copy of the completed, signed BSS Youth Service Safety Plan prior to the authorization of Safety Service Bundle. ● MDT must be involved for those youth who have been adjudicated.
Continuing Stay Criteria	● None
Discharge Criteria (Any element may result in discharge or transfer)	● Progress towards the needs and case plan goals on the Case Plan has been documented and reasonably accomplished. ● MDT (BSS Child Welfare Worker, family and BSS supervisor, if youth is non-adjudicated) has reviewed Case Plan and agrees that the family placement can be maintained without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system. ● Another service is warranted by readiness for positive change in the youth/family's behavior. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Respite, Transportation, and Child Community Connection are the only services that may be provided outside of the safety service bundle for

	the first 30 days until MDT meets. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● If a crisis is behavioral in nature for a child, the family should access 844-HELP-4WV (Children's Mobile Crisis Response). ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care. ● Need for the service is not just to clinically monitor for homicidal and/or suicidal behaviors.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the Case Plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the FAST and the Youth Services Safety Plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect or behavioral issues were reported within the month ● A written exit summary

Additional Service Criteria:

For Navigation and Support

• Staff providing this service at a minimum must have a BSW with social work licensure or related four-year degree with social work licensure. Related degrees are:

- o Sociology
- o Psychology
- o Counseling
- o Interpersonal Communication
- o Human Services o Primary or Secondary Education
- o Criminal Justice
- o Board of Regents with an emphasis in Human Service
- o Gerontology
- o Family and Consumer Science or

• A master's degree in social work, counseling or psychology with licensure and

• Experience providing direct service to families.

• All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information.

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

- All required trainings completed as indicated in the provider agreement.

If you are an agency with LBHC, childcare or child-placing license, you can have 4-year degree and be supervised, but private providers must be licensed.

For Scheduled In-Person Observation, Unscheduled In-Person Observation:

• Paraprofessional staff with a High School Diploma/GED Certificate **and**

• Experience providing direct service to families **and**

• Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist or counseling license who has two years post college experience providing direct service to families **and**

• All providers must have an acceptable CIB through WV Cares and an APS/CPS screen completed with no negative information **and**

- All required trainings completed as indicated on the provider agreement.

• Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Scheduled In-Person Observation 240780

Definition: "Eyes on" oversight required to provide structure and ensure performance of developmentally appropriate activities necessary to carry out Activities of Daily Living and to ensure safety for the identified client, family and/or community. The identified child or family requiring supervision must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety, permanency and well-being. This service can't be used for spot checks, surprise visits, safety checks or unannounced visits, please see the Unscheduled *In-Person Observation* service code.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit = One hour 39 units per 92 days
Maximum Total Authorizations Available	4
Admission Criteria	● Structure and environmental control are needed to monitor child or parent's reaction to stress, inconsistent parenting techniques, impulsive reactions or detrimental expectations, and maintain safety; **- or -** ● Structure and environmental control are needed to ensure safety of a child and the family due to the volatile, aggressive and/or self-harmful behaviors of a child or family member; **-or-** ● Previous attempts at appropriate structure and environmental control are documented and have been unsuccessful; **-and-** ● FAST and/or the family assessment was completed, and it was determined that the youth could be maintained in the home with a Youth Services Safety Plan after returning from foster care placement. ● Scheduled In-Person Observation is identified on the Safety Plan that has been reviewed by the BSS Child Welfare Worker, family and BSS Supervisor; **-and-** ● Service cannot be safely provided through a community resource or the family support system. ● The child has returned to the family of origin
Continuing Stay Criteria	● Progress toward the needs and case plan goals on the plan has been documented but not reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement is still appropriate. ● No less restrictive service/intervention is available. ● Service cannot be safely provided through a community resource or the family support system. ● Youth continues to display behaviors documented on the FAST that indicated the need for continued service.

Discharge Criteria **(Any element may result in discharge or transfer)**	● Progress toward the needs and case plan goals on the plan has been documented and reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement can be maintained without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system. ● Another service is warranted by lack of positive change in the youth/family's behavior. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's or adult's issues precludes provision of services in this level of care. ● Need for the service is not solely due to clinically monitor for homicidal and/or suicidal behaviors. ● This service cannot be implemented during school/day care hours if child is enrolled or should be enrolled and attending school.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials

	A copy of the FAST or Youth Services Safety Plan must be present in the case record. A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Step-By-Step Parenting Program 240905

Definition: Utilizing skill sets and materials obtained through the Step-by-Step Parenting Program Workshops to provide direct face-to-face services to improve parental competence and knowledge of:

- Home Safety and First Aid
- Parent-Child Interactions
- Problem Solving
- Discipline
- Appropriate supervision
- Encouragement of child/adolescent care, age-appropriate development
- Realistic expectations and standards of child/adolescent behavior of identified child

This service should be used to correct specific parenting skill deficits for parents with learning differences. This can include parents with intellectual disabilities, acquired brain injury, slow learners, learning disabilities, and low reading skills. This service is provided in a one-on-one setting and is highly individualized to meet the parent's needs. Specific examples include individualized behavior management techniques or understanding a child's specific mental or physical health condition. Providers will utilize the Step-by-Step Parenting Program Manual as well as the step-by-step checklist to assess and teach child- care skills to parents. As the Bureau for Social Services moves toward quality outcome measures, providers are required to attend the Step-by-Step Parenting Program Workshop before services can start.

<u>Goals of the Program:</u>

- Objectively identify impediments and supports to successful parenting, and specific parenting skill deficits, to design a comprehensive family intervention.
- Help the family organize supports and services to meet the family's needs and keep the child safe.
- Increase parenting skills to reduce the risk of, or actual, child neglect through in-home step-by-step parent training.
- Improve child health, development, and behavior problems related to parenting skill deficits.
- Have the parents maintain learned skills over time.
- Have the parents generalize learned skills to all situations in which they are needed.
- Reduce need for out-of-home care placements and permanent removal of the child.
- Help parents to decrease reliance on paid supports.
- Help parents to develop a natural support network for the family.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	• 92 days • Unit = One hour • 39 units per 92 days
Maximum Total Authorizations Available	4

Admission Criteria	**Admission Criteria** 1.Parent must demonstrate one or more of the following: a. Learning difficulty and/or an IDD Condition b. Inappropriate expectations of the child/adolescent c. Inability to be empathetically aware of child/adolescent needs d. Difficulty assuming role of parent e. Lack of parenting skills, parents with learning differences, risk of child neglect, risk of child developmental delay and behavior problems f. Lack of knowledge in feeding, bathing, basic medical treatment, and basic supervision –**and** - 1. Treatment plan documents a need for the service with specific goals and objectives identifying areas for improvement. 2. The MDT or BSS worker, Family and BSS supervisor have reviewed progress since removal of the youth and recommend reunification which has occurred. 3. Service cannot be met through other community resources. 4. FAST was completed and it was determined a Youth Services Safety Plan with service provided to the parent was needed to maintain the child in the home. 5. The child has returned to the biological/family of origin.
Continuing Stay Criteria	• Progress toward case plan goals/objectives is documented but has not been achieved. • MDT or BSS worker, Family and BSS supervisor recommend the service continue and agree that placement in the home is still appropriate. • Service cannot be met appropriately through other community resources.
Discharge Criteria (Any element may result in discharge or transfer)	• Goals and objectives have been met substantially. • Parent requests discharge. • Another service is warranted by change in the family's condition. • No outlook for improvement within this level of service. • Youth was placed in BJS custody for detention/incarceration
Service Exclusions	• No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. • If more than one parent in the same household is involved with this intervention, bill the service through one parent. • Those receiving ICF/IDD services are not eligible for this service. • The delivery of all ASO Socially Necessary Services must occur

	within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. • Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	• Severity of child's issues precludes provision of services in this level of care. • Severity of the parent's impairment due to a mental illness or substance use, misuse or substance use disorder problem may preclude provision of service in this level of care. • Lack of social support systems indicates that a more intensive service is needed.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes: • Code or service name • Summary of the intervention • Client's response to the intervention • Relation to the service plan • Location where service occurred • Duration • Start/stop time • Signature of the provider and his/her title or credentials A copy of the FAST or Youth Services Safety Plan must be present in the case record. A monthly progress summary must be completed and received by BSS worker by the 10th day of the following month, a copy kept in the provider chart and one sent to the referring worker. This monthly progress report must contain: • A list of dates of service and the specific services rendered and/or attempts • Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention • Plan for further interventions • Any identified unmet concrete or service needs • Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Staff providing this service must have a BSW or related four-year degree. Related degrees are:
- Sociology

    - Psychology
    - Counseling
    - Interpersonal Communication
    - Human Services
    - Primary or Secondary Education
    - Criminal Justice
    - Board of Regents with an emphasis in Human Service
    - Gerontology
    - Family and Consumer Science **and**
- Experience providing direct service to families.
- **Staff must also show proof of attendance for the Step-by-Step Parenting Program Workshop and The Family Game Workshop.**
- Staff person must be under supervision of a licensed social worker, counselor, or psychologist with three years postgraduate work experience with families, one of which must be in staff supervision **and**
- All providers must have an acceptable CIB through WV Cares **and a**n APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.
- Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

Supervised Family Time One 240771

Definition: Service in which visitation between family members (parent to child or child to child) is observed to ensure general safety and appropriate interaction is maintained during visitation. Visitation provider either looks in on visits between family members periodically (as determined by BSS visitation plan) or observes the visit while sitting in the room with the family members. Visitation provider will observe to ensure that no abuse, either physical or emotional, takes place during visitation. Provider will also ensure that parents do not inappropriately try to influence the child to recant prior statement to CPS/police officers. Provider will further ensure that family member visiting with the child continues to interact with the child during visitation instead of stepping outside to smoke or take phone calls, falling asleep or carrying on a conversation with the visitation provider instead of the child. During events such as these, the visitation provider will either re-direct the adult family member or if severe enough, end the visit after consultation with the child's assigned BSS Child Welfare Worker. If the visitation provider needs to contact the BSS Child Welfare Worker, they should take precaution to ensure that the visit is covered so that no further inappropriate interaction takes place while the visitation provider is out of the room contacting the BSS Child Welfare Worker. This type of visitation can be done at the family's home, an outdoor recreational setting, or in an office, whichever provides the needed safety of the children and provider. Supervised Visitation Family Time referred under Reunification can be utilized when the child has already been reunified with one parent, but the MDT has determined other parents still need supervised family time prior to reunification with all parties.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit = One half hour 104 units per 92 days
Maximum Total Authorizations Available	
Admission Criteria	● FAST or the family assessment was completed, and it was determined that the youth could be maintained in the home of one of the biological parents with a Youth Services Safety Plan. ● The MDT **or** BSS Child Welfare Worker, Family and BSS supervisor have reviewed progress since removal of the youth and recommend reunification which has occurred with one biological parent. ● The case record indicates the negative family dynamics as initially noted on FAST or Youth Services Safety Plan indicated a need for supervision with a relative that is not residing within the youth's home. Child's Case Plan reflects the need for the service. ● MDT **or** BSS Child Welfare Worker, Family and BSS supervisor recommend this service. ● Family lacks a social support system capable of providing service to the identified client.

Continuing Stay Criteria	● MDT **or** BSS Child Welfare Worker, Family and BSS supervisor recommend the service continue. ● Family continues to lack a social support system capable of providing service to the identified client. ● Service continues to be needed to provide support to maintain consumer's placement as identified on the Case Plan. ● Case Plan identifies the current plan is for the child to remain in the identified home.
Discharge Criteria **(Any element may result in discharge or transfer)**	● Goals and objectives have been substantially met. ● Child is placed in custody. ● Child's case is closed. ● Youth was placed in BJS custody for detention/incarceration
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● In cases where more than one member of the family is receiving this service, bill under one identified client and reflect all present in the documentation. ● Specialized and Therapeutic foster homes are to be the provider of this service for the youth residing in their homes; the SNS referrals for this service should be made to the Child Placing Agencies for the youth in their homes. ● The delivery of all Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS service plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.

Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● A copy of the FAST or Youth Services Safety Plan and BSS Case Plan/Visitation Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A case note must be completed for each service event that includes ● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials.

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Transportation Time 240104

Definition:

This code is for providers whose only service is transporting a BSS client(s). These providers/transports are not associated with their own provision of a socially or behavior health medically necessary service. The provider is not engaged in an otherwise billable activity. Mileage encumbered when transporting is billed separately. The service has been documented in the BSS child/family's safety and/or Case Plan and all other natural supports/options have been explored including BSS staff and are not available for this event.

Activities:

- Drugs Screens
- Not eligible for NEMT

The billable service begins when the provider leaves their identified place of business or home, whichever is shortest, and ends when provider returns to this location. Waiting time at the identified destination is included. The maximum number of hours this service may be provided in a 24-hour period is 12 hours or 48 units. Ten hours for when consumers are in the vehicle and up to 12 hours total. If an overnight trip is required, no more than 12 hours or 48 units may be invoiced. When not in the vehicle, the provider must remain at the location with the client.

If Non-Emergency Transport (NEMT) is available, this service may not be used. It can't replace the responsibility of Resource/Foster Parents, parents, family members, family friends or Specialized/Therapeutic foster care agencies duties.

No providers may utilize this service to transport a child to a residential placement in or out of state.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	208 units/92 days Unit= 15 minutes Maximum of 48 units within a 24-hour period
Maximum Total Authorizations Available	3
Admission Criteria	● FAST or the family assessment was completed, and it was determined that the youth could be maintained in the home with a Youth Services Safety Plan. ● The MDT or BSS Child Welfare Worker, Family and BSS supervisor have reviewed progress since removal of the youth and recommend reunification. ● The case record indicates the family displayed Safety Threats that indicate a need for supportive services to reunify the family safely. ● FAST or Case Plan and/or case record indicated parents' lack of transportation was directly related to the child's involvement with Youth Services because it inhibited the parent's ability to maintain safety, health and well-being of children in their care.

	● Documentation of the parent's inability to provide this service and the subsequent reason must be in the consumer's record. ● Documentation in the record that other sources, such as the family support system, public transportation or non-emergency medical transportation services, have been explored and exhausted. ● Case Plan originated by BSS plan must document the need for this service and have specific areas or appointment types that are targeted for improvement. ● MDT or BSS Child Welfare Worker, Family and BSS supervisor must recommend this service. ● The child has returned to the biological/family of origin.
Continuing Stay Criteria	● Progress toward accessing transportation has been noted, but family still does not have a reliable means of transportation. ● The family is still financially unable to meet the transportation needs but does not qualify for any type of financial assistance related to transportation. ● Family lacks support system to provide the service. ● MDT or BSS Child Welfare Worker, family and BSS supervisor recommend the service continue. ● Service cannot be appropriately provided through a community resource. ● MDT or BSS Child Welfare Worker and Supervisor agree that the child is appropriate to remain in their home setting.
Discharge Criteria (Any element may result in discharge or transfer)	● Goals and objectives have been met substantially. ● Family refuses service. ● Family's case is closed. ● Family now has support system in place to provide the service. ● Service can now be met appropriately through a community resource. ● Youth was placed in BJS custody for detention/ incarceration.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● If more than one member of a case is being transported, bill under one PATH Client ID and note all present in documentation. ● Excludes tolls and parking ● NEMT is available ● Does not replace the responsibility of parents, family members or family friends ● IDD waiver or ICF recipients are not eligible for this service ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS.

	● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's issues precludes provision of services in this level of care.
Documentation	● There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. ● Case note that includes a summary of the intervention, client's response, relation to the service plan, location, duration, start/stop time, transportation time for the trip, signature of the provider and their title or credentials. ● A copy of the BSS 's current safety plan and/or Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record.

Additional Service Criteria:

- For agency and individual providers: All providers must be 18 or older with a regular license and have no negative findings on their CIB through WV Cares and APS/CPS screen. All required trainings completed as indicated in the provider agreement. Transportation Providers must have valid Driver's licenses from employee's state of residence and insurance.

If multiple people are on one transport, they must be from the same case. The trip will be billed on the case member that is farthest distance from the identified destination. If a protection order is in place between members within the case, they must be transported separately.

Unscheduled In-Person Observation 240665

Definition: "Eyes on" oversight required to ensure safety for the identified client, family and/or community. The identified child or family requiring supervision must be within the defined boundary in which the provider can intervene immediately if needed to ensure safety, permanency and well-being. **This service is intended for safety checks or unannounced visits**. The BSS Safety Plan will have been completed and sent to the SNS provider outlining specifically what safety concerns the SNS Provider should be checking. The BSS Child Welfare Worker will provide the SNS Provider with the appropriate staff contact information/hotlines and protocols to follow if the SNS provider finds the family in violation of the current safety plan, case plan, protective order, court order, etc. The identified client/family should have been educated by the BSS Child Welfare Worker during the safety planning process about BSS expectations for maintaining safety in the household. The identified client/family will not be held at fault for not being at home when SNS provider arrives for an unscheduled In-Person Observation visit. Unscheduled In-Person Observation referred under Reunification can be utilized when the child has already been reunified with one parent, but the MDT has determined other parents still need supervised family time prior to reunification with all parties.

Target Population	Youth Services
Program Option	Reunification
Initial Authorization	92 days Unit = 15 min 156 units per 92 days
Maximum Total Authorizations Available	As Required
Admission Criteria	● Structure and environmental control are needed to monitor child or parent's reaction to stress, inconsistent parenting techniques, impulsive reactions or detrimental expectations, and maintain safety; **- or -** ● Structure and environmental control are needed to ensure safety of a child and the family due to the volatile, aggressive and/or self-harmful behaviors of a child or family member; **-or-** ● Previous attempts at appropriate structure and environmental control are documented and have been unsuccessful; **-and-** ● FAST was completed and it was determined a Youth Services Safety Plan was needed, **-and-** ● Unscheduled In-Person Observation is identified on the Safety Plan that has been reviewed by the BSS Child Welfare Worker, family and BSS Supervisor; **-and-** ● Service cannot be safely provided through a community resource or the family support system. ● The MDT **or** BSS Child Welfare Worker, Family and BSS supervisor have reviewed progress since removal of the youth and recommend reunification which has occurred with one biological parent.

Continuing Stay Criteria	● Progress toward the identified goals/objectives on the plan has been documented but not reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement is still appropriate. ● No less restrictive service/intervention is available. ● Service cannot be safely provided through a community resource or the family support system. ● Family continues to display behaviors documented on the CPS Initial Assessment that indicated the need for a safety plan.
Discharge Criteria **(Any element may result in discharge or transfer)**	● Progress toward the identified goals/objectives on the plan has been documented and reasonably accomplished. ● BSS Child Welfare Worker, family and BSS supervisor have reviewed the safety plan and agree that family placement can be maintained without this level of service. ● A less restrictive service/intervention is available. ● Service can now be safely provided through a community resource or the family support system. ● Another service is warranted by lack of positive change in the youth/family's behavior.
Service Exclusions	● No individual fee for service code including Medicaid Clinic, Rehabilitation or Targeted Case Management may be billed concurrently while this code is being utilized. ● Those receiving Waiver or ICF/IDD services are not eligible for this service. ● The delivery of all ASO Socially Necessary Services must occur within West Virginia borders unless specifically outlined on a currently valid BSS Case Plan or written permission has been granted by BSS. ● Those receiving Safe at Home services are not eligible for this socially necessary service.
Clinical Exclusions	● Severity of child's or adult's issues precludes provision of services in this level of care. ● Need for the service is not solely due to clinically monitor for homicidal and/or suicidal behaviors. ● This service cannot be implemented during school/day care hours if child is enrolled or should be enrolled and attending school.
Documentation	There must always be a permanent case record maintained in a manner consistent with applicable licensing regulations and agency record-keeping policies. A case note must be completed for each service event that includes

	● Code or service name ● Summary of the intervention ● Client's response to the intervention ● Relation to the service plan ● Location where service occurred ● Duration ● Start/stop time ● Signature of the provider and their title or credentials A copy of the CPS Initial Assessment and the current safety plan and/or Case Plan must be present in the case record. ● A copy of the BSS Referral for Socially Necessary Services must be present in the case record. A monthly progress summary must be completed and received by BSS Child Welfare Worker by the 10th day of the following month, a copy kept in the provider chart, and one sent to the referring worker. This monthly progress report must contain: ● A list of dates of service and the specific services rendered and/or attempts ● Overall summary of progress for the client/family receiving the service. Please include if family continues to benefit and/or the barriers to intervention ● Plan for further interventions ● Any identified unmet concrete or service needs ● Date and name of BSS staff to which any new allegations of abuse/neglect were reported within the month

Additional Service Criteria:

- Paraprofessional staff with a High School Diploma/GED Certificate **and**
- Experience providing direct service to families **and**
- Be under supervision of an individual with a BSW or related four-year Bachelor's degree with a social work, psychologist, or counseling license who has two years post college experience providing direct service to families **and**
- All providers must have a CIB through WV Cares and an APS/CPS screen completed with no negative information **and**
- All required trainings completed as indicated in the provider agreement.

Appendices

SNS Service Categories

1. **Family support** –This category only consists of 2 services: Needs Assessment/Service Plan and Case Management. These two services are to be referred along with Family Support Agency Transportation to a provider when you have a Maltreatment Only Case. This means there was substantiated maltreatment, but there were no Impending Dangers. Deliver to the provider the Referral for Socially Necessary Services and the Initial Assessment. Provider will do services if family cooperates. Provider is not to refer to BSS for services – must refer to community resources.

   This can also be used in CPS and YS for backlog cases to determine the need for case closure only with approval from the Social Services Program Manager (formerly known as the Regional Program Managers).

2. **Family preservation** – used when child is still in the home with the parent. **State does not have custody of the child**. Must be monitored by BSS as either an investigation or open case. Can also be used when child is taken from one parent and placed with another pending ongoing abuse/neglect proceedings. Can be used when child is with relative as part of a safety plan (*but BSS has no custody*), as well.

3. **Foster care** – used when a child is **in state's custody** and placed in **any out of home placement**. This could be a relative/kinship placement, BSS foster home, therapeutic or specialized foster home, residential group home, PRTF (psychiatric residential treatment facility), etc.

4. **Chafee** – only to be used for children between the ages of 17 to 23 who are doing transitional living, usually with a facility such as Daymark, Youth Services System.

5. **Reunification** – used only when a child has been removed from the home and then **sent back** to live with the parent(s). For example, the judge gives physical custody back to the parent, but leaves legal with BSS or when the judge dismisses the case with services where the child is back home and BSS is expected to provide services to the family. When child is returned from BSS custody (and placement with someone who is not a bio parent) to a bio parent (even if it wasn't the parent child was originally removed from).

6. **Adoption Preservation** – used when there are no CPS or YS issues for families who have a finalized adoption of a child from the WV BSS and still live in West Virginia. Left open for payment purposes.

Category Code Numbers

Category	CPS	YS
Family Support	110	210
Family Preservation	120	220
Foster Care	130	230
Reunification	140	240
Chafee	135	235
Adoption Preservation	150	N/A

Transportation Type Breakdown

Private Transportation Codes: used by biological and foster parents who are traveling as part of their BSS case plan. The only time an agency should submit for a Private Transportation Code is when they operate specialized foster homes (like CHS, KVC, Burlington, NYAP) and the agency is submitting referrals on behalf of their foster parents.

Agency Transportation: utilized by ASO agencies or individual providers traveling to provide ASO Services.

Program Option	Service Name	Use
Family Support	**Agency Transportation** • CPS Code 110106 • YS Code 210106	• This is new as of the 2024 SNS Redesign • For use when ASO Provider is completing a Needs Assessment/Service Plan and Case Management for Maltreatment Only and Approved Backlogs
Family Preservation	**Agency Transportation** • CPS Code 120106 • YS Code 220106	• For use by ASO Provider delivering a service under Family Preservation Service category (i.e. Safety, IP, ASB, etc.)
Foster Care	**Agency Transportation One** • CPS Code 130107 • YS Code 230107	• For use by ASO Provider delivering service such as Individualized Parenting, Adult Skill Building, attending an MDT • Transporting a parent to a service in a foster care case
Foster Care	**Agency Transportation Two** • CPS Code 130108 • YS Code 230108	• Agency Transportation Two is used exclusively for the purpose of transporting the child(ren) to a supervised family visit with their parent(s) in support of a permanency plan of reunification. Should the permanency plan change, and reunification of the child(ren) is no longer the goal, the Agency Transportation One code should be used.
Foster Care	**Agency Transportation 3** • CPS Code 130109 • YS Code N/A	• Transport child to adoption promotion activity
Reunification	**Agency Transportation** • CPS Code 140106 • YS Code 240106	• For use by ASO Provider delivering services under the Family Reunification Service category (i.e. Safety, IP, ASB, etc.)

Public Transportation Codes are used for local bus passes as well as travel expenses for bio and foster parents if they are using a form of public transportation such as airfare, rental cars, Greyhound tickets for parental, sibling or pre-placement visitation.

Program Option	Service Name	Use
Family Preservation	**Public Transportation** • CPS Code 120110 • YS Code 220110	• Bus passes (Ex. Bluefield Transit, OVRTA) • Occasionally used for public transportation expenses in Family Preservation Cases
Foster Care	**Public Transportation One** • CPS Code 130111 • YS Code 230111	• Bus pass in foster care case • Reimburse bio or foster parent for rental car or airfare used to visit child in placement
Foster Care	**Public Transportation Three** • CPS Code 130113 • YS Code N/A	• Pre-placement visits between children and prospective foster parents
Reunification	**Public Transportation** • CPS Code 140110 • YS Code 240110	• Bus passes (Ex. Bluefield Transit) after Reunification has taken place

If **Non-Emergency Transport (NEMT)** is available it must always be utilized before ASO transportation codes may be considered. ASO transportation providers cannot replace the responsibility of foster parents, bio parents, family members/friends, or the duties of Specialized/Therapeutic foster care agencies.