

Recovery Assistant

Definition

Recovery Assistant - A flexible range of supportive assistance provided face-to-face in accordance with a Waiver Recovery Plan that enables a participant to maintain a home/apartment, encourages the use of existing natural supports, and fosters involvement in social and community activities. Service activities include: performing household tasks, providing instructive assistance, or cuing to prompt the participant to carry out tasks (e.g., meal preparation; routine household chores, cleaning, laundry, shopping, and bill-paying; and participation in social and recreational activities), and; providing supportive companionship. The Recovery Assistant may also provide instruction or cuing to prompt the participant to dress appropriately and perform basic hygiene functions; supportive assistance and supervision of the participant, and; short-term relief in the home for a participant who is unable to care for himself/herself when the primary caregiver is absent or in need of relief.

Provider Qualifications/Conditions for Participation:

Certificate: Commission on Accreditation of Rehabilitation Facilities (CARF), The Joint Commission (TJC), The Community Health Accreditation Program (CHAP), Accreditation Commission for Health Care (ACHC) or Medicare Certification or is in an active process of becoming accredited and has DMHAS Certification to provide Recovery Assistant Services

Entity Responsible for Verification: DMHAS/ABH

Frequency of Verification: Upon enrollment and reenrollment

Other Standards: RA staff must be supervised by a licensed clinician. The RA must have completed the DMHAS Recovery Assistant Training and have received the Certification or have USpra Certification

A Recovery Assistant shall:

- Be at least 18 yrs old;
- Possess at least a high school diploma or GED;
- Possess a valid Connecticut driver's license; and
- Be registered with the Department of Mental Health and Addiction Services (DMHAS) as having completed an approved Recovery Assistant training program and will be able to meet any continuing education and/or training requirements set by DMHAS.

Training requirement: Training programs will address abilities to:

- Follow instructions given by the participant or the participant's conservator;
- Report changes in the participant's condition or needs;
- Maintain confidentiality;
- Meet the participant's needs as delineated in the waiver Recovery Plan;
- Implement cognitive and behavioral strategies;
- Function as a member of an interdisciplinary team;
- Respond to fire and emergency situations;
- Accept supervision in a manner prescribed by the department or its designated agent;
- Maintain accurate, complete and timely records that meet Medicaid requirements;
- Use crisis intervention and de-escalation techniques; and
- Provide services in a respectful, culturally competent manner.

Covered services

Recovery Assistant services of at least 15-minutes duration provided to the participant in his/her home and in other community settings. These services include:

1. Performing the following tasks if the participant (by reason of physical or psychiatric disability) is unable to perform them, or assisting, or cueing the participant to perform them:
 - a. Meal planning and preparation, shopping, housekeeping (e.g., changing linens, washing dishes, vacuuming/dusting, laundry, mending clothing repairs), basic household tasks (e.g., regulating home temperature, storing food appropriately, resolving issues about bill paying).
 - b. Dressing, personal grooming and hygiene (e.g., bathing, dressing, and oral care).
 - c. Appropriate use of emergency medical services.
2. Assisting or cueing the participant to perform or become engaged in:
 - a. Family, social, and recreational activities.

- b. Appropriate use of natural community supports (e.g., social clubs, faith-based supports).
 - c. Appropriate use of routine medical/dental services.
 - d. Use of medications as prescribed, including self administration of medications.
 - e. Healthy habits (e.g., healthy diet, exercise, and behaviors designed to alleviate stress).
 - f. Fulfillment of personal commitments, and adherence to scheduled appointments/meetings (e.g., clinical, vocational, educational, and judicial/court).
3. Assisting or cueing the participant to avoid:
 - a. Risky behaviors (e.g., unprotected sex, smoking/excessive use of tobacco products, unsafe driving/driving without seatbelt, unsafe relationships, criminal activities).
 - b. Substance abuse.
 - c. Overspending.
 - d. Unnecessary conflicts.
 4. Supportive and problem solving-oriented discussions with the participant.
 5. Establishing and maintaining a helpful, supportive, companionship relationship with the participant that involves such activities as:
 - a. Escorting the participant to necessary medical, dental, or personal business appointments;
 - b. Reading to or for the participant;
 - c. Engaging in or discussing recreational, hobby, or sport-related activities;
 6. Other activities directed at reducing disability, restoring participant functioning and achieving independent participation in social, interpersonal, family, or community activities and full community re-integration and independence;
 7. Participation in waiver Recovery Plan development and quarterly Recovery Plan update meetings, if requested by the DMHAS Support Coordinator; and
 8. Travel with a participant when the Recovery Assistant is also engaged in a qualifying waiver service activity.

Limitations

1. Coverage of Recovery Assistant services shall be subject to the following limitations:
2. Recovery Assistant services are subject to service volume (number of ¼ hours service units per day and/or week) and duration (number of months or specified service end date) limits established in the waiver Recovery Plan approved by DMHAS and DSS. The departments or their designee will enact these limits;
3. Recovery Assistant services shall be based on the waiver Recovery Plan;
4. A claim for reimbursement may be submitted for the qualifying waiver services activities of only one Recovery Assistant for services to a participant during a specific time period (i.e., billable unit of time);
5. Individuals receiving residential rehabilitation services paid for by Medicaid in a group home are excluded from Recovery Assistant services, except during a brief transition phase to a lower level of care (not to exceed 30 days);
6. The department shall not pay for:
 - a. Time spent by the provider solely for the purpose of transporting participants;
 - b. Programs, services or components of services that are of an unproven, experimental, cosmetic or research nature;
 - c. Programs, services or components of services that do not relate to the participant's diagnosis, symptoms, functional limitations or medical history;
 - d. Programs, services or components of services that are not included in the fee established by the department;
 - e. Services or components of services provided solely for educational or vocational purposes;
 - f. Waiver services provided by a relative of the participant; and
 - g. Costs associated with room and board for participants.

Non-billable Activities

The following activities are not billable, but have been factored into payment rates:

1. Day-to-day monitoring regarding the participants health and welfare and problem solving to address concerns;
2. Communication and coordination with the DMHAS Support Coordinator, and with other service providers to relay information germane to the participant's needs and continued recovery;
3. Telephone contact with the participant;
4. Telephone contact with the department or its designated agent for the purpose of requesting or reviewing authorization of services;

5. Completion of progress notes or billing documentation;
6. Individual or group supervision, routine case reviews and rounds, ad hoc consultation with supervisors and discussion or consultation among recovery team members, including for the purpose of treatment planning;
7. No shows, missed or cancelled appointments, and visits to the participant when the participant is unavailable;
8. Recovery Assistant services of less than fifteen minutes duration for recovery procedures whose billing codes are defined in 15-minute increments; and
9. Time spent engaged in activities required by a credentialing, certification or oversight entity such as gathering and submitting care plan, service data or other information.

RECOVERY ASSISTANT REQUIREMENTS:

Agency must be accredited by a nationally accredited body: CARF, Joint Commission, CHAP, ACHC or Medicare Certified to provide Recovery Assistant Services. Each individual Recovery Assistant must have specific training in behavioral health, home health care and homemaker services, demonstrated through an exam or observed supervision. Staff must have USpra Certification or Certified DMHAS-sponsored Certified Recovery Assistant/Support Specialist Training. Indicate date of training or certification number for each individual. Include copies of State of Connecticut criminal background checks * (see note) which must be dated no more than 6 months prior to the date of this application.

Does the agency have staff Certified by DMHAS for Recovery Assistant Services?	YES <input type="checkbox"/>	No <input type="checkbox"/>	Most Recent Certification Date
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Please include a resume or summary of work experience for each staff listed below.

Last Name, First Name	Degree/ Experience	License	FTE	Job Title	Name and Specific Experience			
					USpra Certification	DMHAS Recovery Assistant Training	Dates of training or Certification Number	Background Checks
				Supervisor. Must be licensed clinician	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	—	N/A
				Recovery Assistant	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
				Recovery Assistant	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
				Recovery Assistant	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

Language Competence: In addition to English, please identify the languages in available to participants of this service.

American Sign Language	German	Korean	Swedish
Arabic	Greek	Laotian	Tagalog (Philippines)
Armenian	Hebrew	Norwegian	Vietnamese
Chinese	Hindi	Polish	Yiddish
Dutch	Hungarian	Portuguese	Other:
Farsi	Italian	Russian	
French	Japanese	Spanish	

Supervisor Documentation Requirements for Recovery Assistant Service

If the supervision for this service is not provided by the Chief Clinical Officer for the agency, please indicate if the supervisory functions for this program are provided by a staff or contracted position.

- Employed by Agency

If the position is employed by the agency please include a copy of the employee's current license.

- Under Contract with Agency

If contracted with the agency, please provide a letter describing the arrangement by which this person is providing supervisory services and a copy of the contracted supervisor's current license.

Primary Service Locations

Program Name:
Address:
Program Name:
Address:
Program Name:
Address:



Checklist for application for Recovery Assistant services is below.

If applying for Recovery Assistant services also include the following documents in your application:

If the supervisor is employed as staff by the agency:	
a copy of the supervisor's current license	<input type="checkbox"/>
Copies of background checks for each Recovery Assistant	<input type="checkbox"/>
Resume or summary work history for every member listed on the team roster	
Supervisor	<input type="checkbox"/>
Recovery Assistant	<input type="checkbox"/>
Recovery Assistant	<input type="checkbox"/>
If the supervisor for this service is not an agency employee, supply:	
a letter describing the supervisory arrangement	<input type="checkbox"/>
a copy of the contracted supervisor's current license	<input type="checkbox"/>

* **Note:** State of Connecticut Criminal Background Checks for Recovery Assistant

All staff certified to be Recovery Assistants must have a Connecticut Police Background check dated within six months of the credentialing/re-credentialing application. The police background checks must be conducted by either of the following mechanisms:

1. State Police Bureau of Identification Criminal Background Check conducted through the Connecticut Department of Public Safety. More information can be found at: http://www.ct.gov/dps/lib/dps/reports_and_records/DPS-0846-C.doc
2. A company that provides background screening services that is a member of the National Association of Professional Background Screeners (NAPBS) <http://www.napbs.com/>