State-funded Behavior Add-On Authorization Process

The purpose of the behavior support rate modification is to provide funding for the implementation of behavior support plans by staff who have the level of training necessary to implement the plans.

- DODD has committed to funding all NEW behavior add-ons beginning 1/1/16 for individuals receiving Homemaker Personal Care or Community Respite enrolled on the Individual Options (IO), Level One Waiver or SELF Waiver.
- State-funding will be available for behavior add-ons in the following circumstances:
  - The individual did not have an approved behavior add-on as of 12/31/15.
  - A request for the behavior add-on was submitted to and approved by DODD.
- Requests for state funded behavior add-ons require annual DODD authorization and budget adjustments as necessary.
- Individuals may contact the BAOquestions@dodd.ohio.gov regarding any behavior add-on concerns.
- Boards must assist individuals with submitting requests for the behavior add-on, as needed. When a county board does not support the individual’s request for the add-on, the expedited review process does not apply and additional information will be requested by DODD.
- Request for behavior add-ons may begin 11/20/2015.

Request for behavior add-ons within ODDP range

1. Complete the fillable form as applicable
2. Email form to the BAO@dodd.ohio.gov
3. DODD issues email confirmation of approval

In the event that DODD’s approval of the behavior add-on causes the individual’s cost to exceed the ODDP funding range, a request for prior authorization or budget adjustment must be submitted. In these cases, DODD will expedite the prior authorization review. When submitting a prior authorization or budget adjustment that meets the expedited criteria, boards should follow the steps below:

1. Create a new cost projection tool that is labeled “BAO.”
2. Create a new Individual Request Form (IRF) in MSS
3. The individual’s name, Medicaid number, and DODD number should auto-populate.
4. The CB contact name, phone, number, and e-mail must be entered.
5. A county board must be selected.
6. Select an “I live with” option.
7. Enter the requested dollar amount.
8. Enter a signature date that is the date of the PA request
9. All other sections on page 1 may be left blank.
10. On page 2, mark “yes” to the first four questions and to the question related to the county board supporting the request.
11. The individual rationale must state “BAO with begin date.”
12. The criteria for PA should be “medical condition”.
13. Upload the DODD authorization email approving the behavior add-on

Feel free to contact Jeanne Gregory-Kaeppner at J.Gregory-Kaeppner@dodd.ohio.gov with any questions.