

Your Agency's Name/Logo Here (Include Address, Phone Number, Tax ID# and NPI#)

PLEASE USE THIS REPORT TEMPLATE ONLY
(You may include additional information as needed)

CalOptima: Treatment Plan Update/Progress Report

I. IDENTIFICATION

Member Name:

Guardian Name and Phone Number:

Member DOB:

Insurance ID#:

Service Initiation Date (date intervention started with your agency):

Prior Behavioral Agencies (with dates of service):

Date ABA therapy first began (with first provider and initial treatment intensity):

Authorization Dates:

Data Reporting Period:

Current Diagnoses(including physical, mental health and medical):

Previous Tx Plan Date:

Current Medications / Dosage:

Current Tx Plan Date:

Known Allergies:

Dietary Restrictions:

Primary Care Physician:

Report Completed By (with credentials and phone number):

Administrative Contact for Authorization Requests (with phone number):

II. SESSION INFORMATION

	Total hours <u>available</u> this data reporting period	Total hours <u>used</u> this data reporting period	<i>Percent Utilized</i>
H2019 (paraprofessional)			
S5108 (parent consultant)			
S5110 (parent consultant)			
H0032-HN (Behavior Management Assistant)			

H0032-HO (Board Certified Behavior Analyst)			
H2014 (social skills)			
If under-utilization has occurred, state reason (e.g., vendor cancellation, parent cancellation, vendor couldn't staff, family couldn't schedule):			

Daily schedule of all activities (e.g., school, therapies):

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

III. SCHOOL INFORMATION

School Information, Individualized Educational Plan (IEP) Information (services, school hours):

Service Type	Location / Name of School	Classroom Type	Start Date	End Date	Frequency

IV. MEDICAL INFORMATION

Medical History (add relevant medical history):

V. COORDINATION OF CARE

Describe any other therapies or treatments that the member is currently receiving. State if coordination with these other service providers is necessary, and why or why not. If coordination with other therapy/treatment providers is necessary, please describe how coordination would occur and upon what frequency (e.g., reviewing updated treatment plans from other providers every three months). At a minimum, this report should be shared with primary care physician. Describe what was discussed with other care providers. Discuss coordination for non-ABA services for educational needs, respite, custodial care, etc. (this not include working on IEP goals during at-home ABA sessions)

VI. BARRIERS TO PROGRESS

a. Barriers:

b. Plan to address barriers:

VII. ADAPTIVE TESTING

Use only the Vineland Adaptive Behavior Scales, Third Edition. Complete table below, do NOT provide screenshot or photo of Vineland results.

Vineland-3 Scoring Information: (Date Administered and by Whom)

The Vineland-3 is a normed and standardized test that covers several domains including communication, daily living skills, socialization, motor skills (optional based on age) and maladaptive behavior (optional). Within these domains, it assesses 13 skill areas. The **Vineland Adaptive Behavior Scales** is used to measure the adaptive behaviour of individuals who have intellectual and developmental disabilities, developmental delays, autism spectrum disorders and other impairments. This assessment covers individuals from birth to 90 years of age and is conducted through parent interview.

Domain	Raw Score	V-Scale Score	Age Equivalent Baseline / Date	Age Equivalent Current	Adaptive Level
Communication					
Receptive					
Expressive					
Written					
Daily Living Skills					
Personal					
Domestic					
Community					
Socialization					
Interpersonal Relationships					
Play and Leisure					
Coping Skills					
Motor					
Gross Motor Skills					
Fine Motor Skills					

VIII. DSM-V

Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-V). For members diagnosed with autism, include DSM-V severity level from most recently completed diagnostic assessment available to you at time of report completion. This should be updated with the most recently completed diagnostic assessment available at each treatment plan update.

DSM-V

Qualified Assessor / Date:	
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Diagnostic Criteria A Severity Level (1, 2, 3)	
Diagnostic Criteria B Severity Level (1, 2, 3)	
With or Without Accompanying Intellectual Impairment?	
With or Without Accompanying Language Impairment?	
Associated with a known medical or genetic condition or environmental factor?	
With Catatonia?	

IX. TARGET AND REPLACEMENT BEHAVIOR GOALS

(To address problem and functionally equivalent alternative behaviors. More than one replacement behavior can be addressed per target behavior)

(All target behavior graphs must be labeled appropriately, measure either rate, duration, or partial/whole interval, and include baseline data)

A. Target Behavior Goal 1 (including anticipated timeline for achievement):

1. Topography of Target Behavior 1:
2. Antecedent Strategies for Target Behavior 1:
3. Consequent Strategies for Target Behavior 1:
4. Date of Introduction:
5. Baseline Data and Date:
6. Previous Report Data:
7. Current Data:
8. Progress (see Progress Legend at end of report):
9. Status (see Status Legend at end of report):

Insert graph

Replacement Behavior Goal 1 (including anticipated timeline for achievement):

1. Date of Introduction:
2. Baseline Data and Date:
3. Previous Report Data:
4. Current Data:
5. Progress (see Progress Legend at end of report):
6. Status (see Status Legend at end of report):

Insert graph

A. Target Behavior Goal 2 (including anticipated timeline for achievement):

1. Topography of Target Behavior 2:
2. Antecedent Strategies for Target Behavior 2:
3. Consequent Strategies for Target Behavior 2:
4. Date of Introduction:
5. Baseline Data and Date:

6. Previous Report Data:
7. Current Data:
8. Progress (see Progress Legend at end of report):
9. Status (see Status Legend at end of report):

Insert graph

Replacement Behavior Goal 2 (including anticipated timeline for achievement):

1. Date of Introduction:
2. Baseline Data:
3. Previous Report Data:
4. Current Data:
5. Progress (see Progress Legend at end of report):
6. Status (see Status Legend at end of report):

Insert graph

A. Target Behavior Goal 3 (including anticipated timeline for achievement):

1. Topography of Target Behavior 3:
2. Antecedent Strategies for Target Behavior 3:
3. Consequent Strategies for Target Behavior 3:
4. Date of Introduction:
5. Baseline Data and Date:
6. Previous Report Data:
7. Current Data:
8. Progress (see Progress Legend at end of report):
9. Status (see Status Legend at end of report):

Insert graph

Replacement Behavior Goal 3 (including anticipated timeline for achievement):

1. Date of Introduction:
2. Baseline Data:
3. Previous Report Data:
4. Current Data:
5. Progress (see Progress Legend at end of report):
6. Status (see Status Legend at end of report):

Insert graph

B. Target Behavior Goal n (including anticipated timeline for achievement):

1. Topography of Target Behavior Goal n :

2. Antecedent Strategies for Target Behavior 3:
3. Consequent Strategies for Target Behavior 3
4. Date of Introduction:
5. Baseline Data and Date:
6. Previous Report Data:
7. Current Data:
8. Progress (see Progress Legend at end of report):
9. Status (see Status Legend at end of report):

Insert graph

Replacement Behavior Goal *n* (including anticipated timeline for achievement):

1. Date of Introduction:
2. Baseline Data and Date:
3. Previous Report Data:
4. Current Data:
5. Progress (see Progress Legend at end of report):
6. Status (see Status Legend at end of report):

Insert graph

Comments (include pertinent information related to the treatment plan):

X. SKILL ACQUISITION GOALS

(To address foundational skill deficits. Additional Intervention Areas can be added according to the consumer's deficits.)

A. Intervention Area:

1. Skill Acquisition Goal 1 (including anticipated timeline for achievement):
 - a. Date of Introduction:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):

2. Skill Acquisition Goal 2 (including anticipated timeline for achievement):
 - a. Date of Introduction:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):

3. Skill Acquisition Goal 3 (including anticipated timeline for achievement):
 - a. Date of Introduction:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):

4. Skill Acquisition Goal n (including anticipated timeline for achievement):
 - a. Date of Introduction:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):

Comments (include pertinent information related to the treatment plan):

B. Intervention Area:

1. Skill Acquisition Goal 1 (including anticipated timeline for achievement):
 - a. Date of Introduction:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):

2. Skill Acquisition Goal 2 (including anticipated timeline for achievement):
 - a. Date of Introduction:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):

3. Skill Acquisition Goal 3 (including anticipated timeline for achievement):
 - a. Date of Introduction:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):

4. Skill Acquisition Goal n (including anticipated timeline for achievement):
 - a. Date of Introduction:

- b. Baseline Data and Date:
- c. Previous Report Data:
- d. Current Data:
- e. Progress (see Progress Legend at end of report):
- f. Status (see Status Legend at end of report):

Comments (include pertinent information related to the treatment plan):

C. Intervention Area:

1. Skill Acquisition Goal 1 (including anticipated timeline for achievement):
 - a. Date of Introduction:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):
2. Skill Acquisition Goal 2 (including anticipated timeline for achievement):
 - a. Date of Introduction:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):
3. Skill Acquisition Goal 3 (including anticipated timeline for achievement):
 - a. Date of Introduction:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):
4. Skill Acquisition Goal n (including anticipated timeline for achievement):
 - a. Date of Introduction:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):

Comments (include pertinent information related to the treatment plan):

XI. PARENT / CAREGIVER GOALS

Parent/Caregiver goals should specify parent training procedures, describe data collection procedures, and identify proposed goals and objectives.

Participants in Parent Training	Skills Taught

(All graphs must show baseline data.)

- A. Parent/Caregiver Goal 1 (including anticipated timeline for achievement):
 - a. Date initiated:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):

Insert graph

- B. Parent/Caregiver Goal 2 (including anticipated timeline for achievement):
 - a. Date initiated:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):

Insert graph

- C. Parent/Caregiver Goal 3 (including anticipated timeline for achievement):
 - a. Date initiated:
 - b. Baseline Data and Date:
 - c. Previous Report Data:
 - d. Current Data:
 - e. Progress (see Progress Legend at end of report):
 - f. Status (see Status Legend at end of report):

Insert graph

- D. Parent/Caregiver Goal *n* (including anticipated timeline for achievement):
 - a. Date initiated:

- b. Baseline Data and Date:
- c. Previous Report Data:
- d. Current Data:
- e. Progress (see Progress Legend at end of report):
- f. Status (see Status Legend at end of report):

Insert graph

Comments (include pertinent information related to the treatment plan):

XII. REPORT SUMMARY

A. Goal Progress

In This Report — # of Goals	Continue	Discontinue	Almost Met	Met	Proposed	Not Targeted/ On Hold
Target Behavior Goals						
Replacement Behavior Goals						
Skill Acquisition Goals						
Parent/Caregiver Goals						
TOTAL						

XIII. TRANSITION PLAN

- Final treatment report
- Treatment report transition to parent/caregiver or social skills group primarily
- Treatment report with fading of interventionist's direct hours
- Treatment report initial/ongoing relationship with expectation of completing ABA services and coordination with other providers.

Describe the engagement¹ with family/caregivers in position to affect patient behavior of the Medi-Cal required exit plan² including the agreed upon:

1) Specific timeline for achieving person-centered individualized, explicit and measurable recovery goals and objectives selected by families and other involved individuals, as appropriate (Please provide an individualized timeline based on observations, assessments and reasonable expectation of progress.)

<p>2) Generalization expectation, specifically with behavior the parent/guardian is expected to demonstrate, mastery criteria and estimated date of mastery. (Please provide a description of how strategies learned during sessions will be taught to parents and how supports will be faded in order to achieve a mastery date.)</p>
<p>3) Gradual step down in services (fading) consistent with Behavior Analyst's Certification Board (BACB)³ Guidelines when goals are met, or continued clinical benefit is not expected due to no significant progress towards goals/minimal participation/response to treatment for successive authorization periods (Please provide a description of how the level of services will be faded out based on the examples provided above, including minimal participation from parents and patient not responding to the treatment after __ consecutive reporting periods.)</p>
<p>4) Coordination for non-ABA services for educational needs, respite, custodial care, etc. (This does not include working on IEP goals during at-home ABA sessions.)</p>

¹ MCG 806-T

² DHCS APL 18-006 — Medi-Cal requires each BHT treatment plan to include an exit plan with specific timeline for achieving person-centered individualized, measurable goals and objectives, plan for generalization to parent/caregiver with behavior the parent/guardian is expected to demonstrate, mastery criteria and estimated date of mastery. BHT services may be discontinued when the treatment goals are achieved, goals are not met, or services are no longer medically necessary, and a treatment does not meet medical necessity.

³ **ABA Treatment of ASD: Practice Guidelines for Healthcare Funders and Managers 2014 2nd Edition SECTION 8 — The expectation of discharge and transition planning with families is reinforced by the Behavior Analyst's Certification Board (BACB) that says, "The desired outcomes for discharge should be specified at the initiation of services and refined throughout the treatment process." Fading is the expectation as the BACB continues, "Discharge and transition planning from all treatment programs should generally involve a gradual step down in services." The BACB reinforces that services may be discontinued when the client has achieved treatment goals or the client does not demonstrate progress towards goals for successive authorization periods. Discharge and transition planning from all treatment programs should generally involve a gradual step down in services, which may take six months or longer.**

XIV. CRISIS PLAN

Define what steps the individual, family and provider should take in the event of a crisis:

XV. SUMMARY AND RECOMMENDATIONS

(Provide a clinical summary that justifies hours requested)

HCPSC Code and Modifiers	Description	Total Hours Requested Per Month	Total Units Requested Per 6 Month (1 Unit = 15 Minutes)	Location of Service
H2019	Direct Services			
H0032-HN (BMA)	Supervision of ABA and Treatment Planning			
H0032-HO (BCBA)	Supervision of ABA and Treatment Planning			
S5110	Home Care Training, Family			
S5108	Home Care Training to Home Care, Client			
H2014	Social Skills Group			

XVI. SIGNATURES

A. Report written by (printed name):
Title, License/Certificate #:

Signature: _____

Date: _____

B. Report reviewed by (printed name):
Title, License/Certificate #:

Signature: _____

Date: _____

Progress Legend:

Not addressed	This goal was not addressed during this reporting period.
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First reporting period	This is for a new , first-time reported goal.
No change	Compared to the last Progress Report or baseline (whichever is more recent), no change in data is noted in this Progress Report.
Regression	Compared to the last Progress Report or baseline (whichever is more recent), a regression in data is noted in this Progress Report.
Emerging	Compared to the last Progress Report or baseline (whichever is more recent), data has shown improvement and consumer is not within 20 percent of meeting this goal.
Almost met	Compared to the last Progress Report or baseline (whichever is more recent), data has shown improvement and consumer is within 20 percent of meeting this goal.
Met	This goal was met during this reporting period.

Status Legend:

Continue	This goal will continue to be addressed in the next reporting period.
Discontinue	This goal will not continue to be addressed in the next reporting period.
Proposed	This goal is proposed to be added to the next reporting period.