

DCF CREDENTIALING CHRONICLE

VOLUME 7, ISSUE 2

INSIDE THIS ISSUE:

WHAT'S THE LATEST	2
CT FALSE CLAIMS ACT	3
PROVIDER MEETING SCHEDULE	4
MANDATED REPORTER TRAINING	5
RESOURCES	5
DCF CREDENTIALING COMMITTEE	6
CONTACT US	6

CHILD WELFARE INFORMATION GATEWAY

Child Welfare Information Gateway promotes the safety, permanency, and well-being of children, youth, and families by connecting child welfare, adoption, and related professionals as well as the public to information, resources, and tools covering topics on child welfare, child abuse and neglect, out-of-home care, adoption, and more.

A service of the [Children's Bureau](#), Administration for Children and Families, U.S. Department of Health and Human Services, Child Welfare Information Gateway provide access to print and electronic publications, websites, databases, and online learning tools for improving child welfare practice, including resources that can be shared with families.

How is Child Abuse and Neglect Defined in Federal Law?¹

Federal legislation provides guidance to States by identifying a minimum set of acts or behaviors that define child abuse and neglect. The Federal Child Abuse Prevention and Treatment Act (CAPTA) (42 U.S.C.A. § 5106g), as amended by the CAPTA Reauthorization Act of 2010, defines child abuse and neglect as, at minimum:

- "Any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation"; or
- "An act or failure to act which presents an imminent risk of serious harm."

This definition of child abuse and neglect refers specifically to parents and other caregivers. A "child" under this definition generally means a person who is younger than age 18 or who is not an emancipated minor.

While CAPTA provides definitions for sexual abuse and the special cases of neglect related to withholding or failing to provide medically indicated treatment, it does not provide specific definitions for other types of maltreatment such as physical abuse, neglect, or emotional abuse. While Federal legislation sets minimum standards for States that accept CAPTA funding, each State provides its own definitions of maltreatment within civil and criminal statutes.

¹ <https://www.childwelfare.gov/topics/can/defining/federal/>

Stay Informed



Subscribe to

[E-alert](#) to learn more on

what's new on the

Child Information Gateway

Agency

QUESTION ON...

RECORD RETENTION

PROVIDER: "I have a small office. How long are we required to keep records?" **DCF:** 3 years

YOUTH CAMP

PROVIDER: "I run a Summer Youth Camp and need transportation for my kids. Do I call for General Livery or School Transportation Service?" **DCF:** Summer Camp does not fall under School Transportation.

MANDATED REPORTER TRAINING

PROVIDER: "Is Mandated Reporter Training a requirement to be a credentialed provider?" **DCF:** Yes. It has to be renewed every two (2) years.

WHAT'S THE LATEST ON DCF CREDENTIALING?

BADGES:

Badge(s) are to be worn when providing direct service to any DCF child or youth. It is the expectation that in the event that a staff person is terminated for any reason, the badge will be returned to ABH. If a badge is lost or stolen, please contact ABH at 860-704-6472 for a replacement badge. The replacement cost is \$15.00

FORMS:

Effective April 1, 2018 all providers providing Supervised Visitation, Therapeutic Support and Support Staff services are required to use the Word Fillable documentation forms and submit along with invoices.

STATEMENT OF EXPERIENCE FORM:

A new and comprehensive Statement of Experience form will be released soon. All providers now need to specify areas of interest and languages spoken.

DRESS CODE:

Every credentialed service provider shall present a well-groomed and professional appearance while at work. Clothing shall be neat, clean, free of rips, tears, stains and conducive to the job duties.

Clothing that is tight, form-fitting, see-through, low-cut or in the case of dresses and skirt, has a short hemline or a slit that serves to shorten an otherwise professional item is prohibited.

LIST TRAINING:

All staff persons providing Community-Based Life Skills and CHAP Case Management services must have training and experience utilizing the Department's approved Life Skills program Learning Inventory of Skills Training (L.I.S.T.), and must participate in any follow-up training. [Click here](#) to register online for the LIST Training.

MANDATED REPORTER TRAINING:

Completion of Mandated Reporting training is mandatory prior to being approved for credentialing. The Provider shall only utilize trainers certified by the Department to conduct mandated reporter training to community providers or complete the Connecticut Mandated Reported Training for Community Providers course online at: <https://www.proprofs.com/training/course/?title=connecticut-mandated-reporter-training-community-providers>

MONITORING & REVIEW:

The Provider agrees to allow access to the Department for purposes of monitoring and review. This access includes but not limited to client records, fiscal records, staffing records, policy and procedural manuals, facilities, staff, and children in care of the Department. The Department will conduct quality reviews, which may include site-based quality review visits.

AUDIT:

If payments to the Provider exceed \$300,000 in any calendar or fiscal year, the Provider shall provide for an annual financial audit acceptable to the Department for any expenditure of state-awarded funds made by the Provider. Such audit shall include management letters and audit recommendations. The Provider shall comply with federal and state single audit standards as applicable. This provision does not apply to individuals.

CONSOLIDATED ADMINISTRATIVE CASE REVIEW MEETINGS:

ACR is now moving to one consolidated meeting per family. This approach will not only save time for families, foster parents, providers, lawyers and staff but will also enhance the communication and collaboration amongst all participants and will ultimately improve planning and outcomes.

CONNECTICUT FALSE CLAIMS ACT (“CT FCA”)

All providers must follow the “CT FCA” – [Connecticut General Statutes Chapter 55e- Section §4-274 through §4-289](#). The C.G.S section §4-275 False claims and other prohibited acts regarding state-administered health or human services program refers to individuals who present a false or fraudulent claim for payment or approval (e.g. double billing; billing for services not being provided; billing for excessive or unnecessary services, etc.). **Note:** Definition C.G.S. §4-274(1) – An act is also done “knowingly” if the Individual: a) Acts in deliberate ignorance of the truth or falsity of information or; b) Acts in reckless disregard to the truth or falsity, regardless of whether the person intends to defraud. Any person who violates this provision shall be liable to the state. The Attorney General may investigate any violation of the C.G.S. Section §4-275 (a).

WHAT TO LOOK FOR—POTENTIAL CT FALSE CLAIMS ACT VIOLATIONS

1. **DOUBLE BILLING**—When a provider provides only one service, but bills twice for that same service.
2. **BILLING FOR SERVICES NOT BEING PROVIDED.** Besides the obvious, red flags can include (a) billing 1 hour each way for a 15 minute each way transport (b) billing for an absent client.
3. **FALSE INFORMATION** (omitted information) on a provider application, contract, grant, or any other document that would allow an individual to receive money/property from a state program.
4. **FALSE CREDENTIALS/BILLING FOR SERVICES RENDERED BY UNLICENSED INDIVIDUALS.** Example: Allowing an unlicensed person to provide counseling services, and then seeks payment that could have been allowed if the therapist had performed the counseling.
5. **UP CODING.** A provider submits payment for a service that overstates the service performed. Example: A counselor seeks payment for a detailed and comprehensive session when, in reality, a brief (and less expensive) session was actually performed.
6. **UNBUNDLING.** Billing separate service which are usually billed together in order to increase the total payment to the provider. Example. A lab performs 3 test that are supposed to be “bundled” (billed together) for a total of \$754, but instead seeks payment for each of the tests separately, for a total of \$100.00
7. **BILLING FOR EXCESSIVE AND/OR UNNECESSARY SERVICES.**

CREDENTIALLED PROVIDER MEETING

All providers are now required to participate in provider meetings at least once a year.

The Quarterly Credentialed provider meeting will be on **September 20, 2018** for the following service providers:
Assessments, Assessments DV, After School Providers, Supervised Visitation, Temporary Care, Therapeutic Support, Support Staff, CBLS and CHAP CM.



RESOURCES



- DCF Academy for Workforce Development ** **SUMMER 2018** **
- DCF Provider Learning Inventory of Skills Training ** **UPDATED** **
- DCF Grants & Contracts Specialist ** **UPDATED** **
- Transportation Rate Calculation Form ** **NEW** **
- Documentation for Credentialed Providers ** **NEW** **
- DCF Credentialed Provider Documentation Form (SV) **Effective 04-01-2018**
- DCF Credentialed Provider Documentation Form (TSS,SS) **Effective 04-01-2018**

REQUIRED DCF MANDATED REPORTER TRAINING

Mandated reporters are required to report or cause a report to be made when, in the ordinary course of their employment or profession, they have reasonable cause to suspect or believe that a child under the age of 18 has been abused, neglected or is placed in imminent risk of serious harm. (Connecticut General Statutes §17a-101a)

ON-LINE TRAINING

Please [click here](#) to access the on-line Mandated Reporter Training for Community Providers.

SCHOOL TRAINING

Please [click here](#) to access the on-line Mandated Reporter Training for School Employees.

IN-PERSON TRAINING

To request to have a trainer come to your organization or facility, please complete the [online inquiry form](#).

CREDENTIALLED PROVIDER MANDATED REPORTER TRAINING

is valid for a period of 2 years.

Providers need to re-certify every 2 years.

MANDATED REPORTER LIASON

Bridgeport: Nancy De-Witt-Smith / nancy.dewitt-smith@ct.gov

Danbury: Sean Boyle / sean.boyle@ct.gov

Hartford: Shannon Frazer / shannon.frazer@ct.gov

Manchester: Shannon Frazer / shannon.frazer@ct.gov

Meriden: David Mongrain / david.mongrain@ct.gov

Middletown: Susan Sienkiewicz / susan.sienkiewicz@ct.gov

Milford: Christine Surel / christine.surel@ct.gov

New Britain: Eugena Green / eugena.green@ct.gov

New Haven: Chrisanne Buechele / chrisanne.buechele@ct.gov

Norwalk: Joanne Arnone / joanne.arnone@ct.gov

Norwich: Kimberly Hotchkiss / kimberly.hotchkiss@ct.gov

Torrington: Lisa Sexton / lisa.sexton@ct.gov

Waterbury: Holly Jacquemin / holly.jacquemin@ct.gov

Willimantic: Robin Russo / robin.russo@ct.gov

DCF CREDENTIALING COMMITTEE

HISTORY AND STRUCTURE. This newly formed team will structure the role based on the experience of Grants and Contracts work with the providers. The committee consists of Grants and Contract Program Managers, Grants and Contracts Specialists, Adolescent and Juvenile services, Fiscal and ABH.

SCOPE OF WORK will include vetting new applicants, establishing a system for site visits and site visit review as well as creating a system for evaluating the needs of DCF and providers.

COMMITTEE MEMBERS

Theodore Sanford, DCF Program Manager, Division of Contract Management

Leslie Roy, DCF Program Manager, Division of Contract Management

Dayna Snell, DCF Program Manager, Adolescent and Juvenile Services

Pam Burney, DCF Grants & Contracts Specialist Reg 4

Monique Gray, DCF Grants & Contracts Specialist Reg 3

Cynthia Maignan, DCF Grants & Contract Specialist Reg 1

Gail Franklin, DCF Grants & Contracts Specialist Reg 2

Linda Gant, DCF, Fiscal, Administrative Supervisor, Child & Welfare Accounting

Sarah Tkacs, ABH Director, Credentialing & DCF Services

Thinking of Moving? Changed Phone numbers? New Fax Line? Expanding Services? Updating Current Staff Listing?



As an approved DCF Provider you are required to notify ABH if there is a change in your Provider Status. Visit and download the [Provider Information Change Form.](#)

ADVANCED BEHAVIORAL HEALTH INC

**Director,
Credentialing & DCF Services**

Sarah Tkacs
860.704.6472
stkacs@abhct.com

Credentialing Specialists:

Allison McKenna
860.638.5319
amckenna@abhct.com

Maria Petit-Homme
860.638.5337
mhomme@abhct.com

<http://www.abhct.com/News Resources/DCF Credentialing/>



Advanced Behavioral Health Inc,
213 Court St., Middletown, CT 06457

DCF Credentialing Department

Direct Fax Line: 860.920.4457