

Good morning! We will begin at 10 a.m.

Spring Into Success!

Thank you for joining the
DBHDS Office of Licensing for:

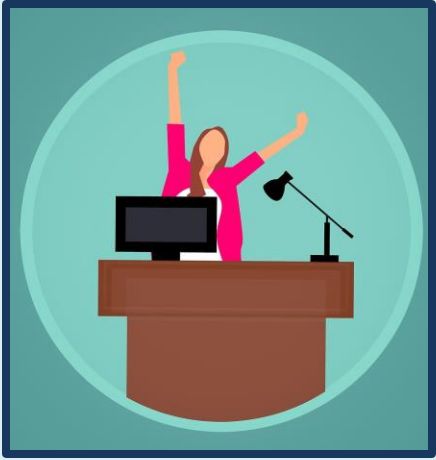
“Initial Applicant Orientation”

**Guiding Applicants Through the DBHDS
Provider Application Process**

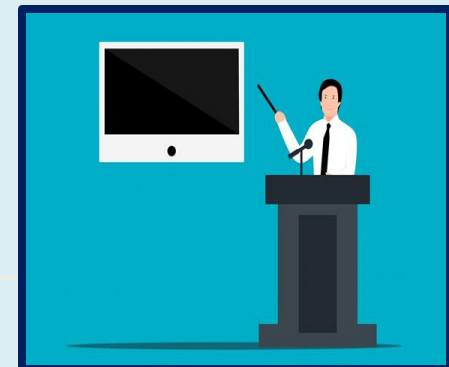
June 2023



Presenters



- Mackenzie Glassco, Associate Director of Quality and Compliance
 - Mackenzie.Glassco@dbhds.virginia.gov
- Chesna Gore, Licensing, Administrative and Regulatory Manager
 - Chesna.Gore@dbhds.virginia.gov
- Jamie Ball, Policy Review Specialist
 - Jamie.Ball@dbhds.virginia.gov
- Dwayne Lynch, Acting Quality and Information Systems Manager
 - Dwayne.Lynch@dbhds.virginia.gov
- Larisa Terwilliger, Training Coordinator
 - Larisa.Terwiliger@dbhds.virginia.gov



A Few Words from the Director



Jae Benz

Director of Licensing

Department of Behavioral Health and Developmental Services (DBHDS) - Office of Licensing



Mission:

To be the regulatory authority for DBHDS licensed service delivery systems through effective oversight.



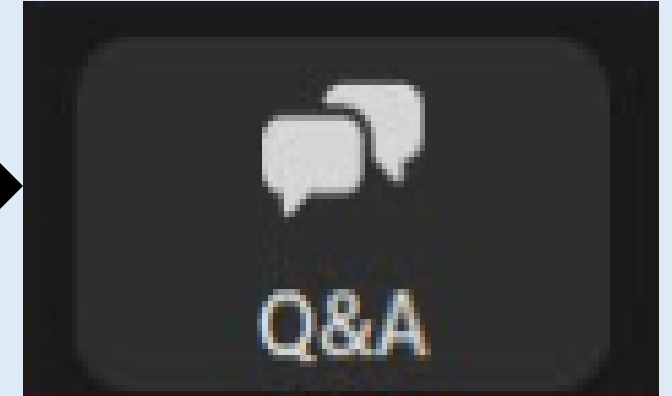
Vision:

The Office of Licensing will provide consistent, responsive, and reliable regulatory oversight to DBHDS licensed providers by supporting high quality services to meet the diverse needs of its clients.



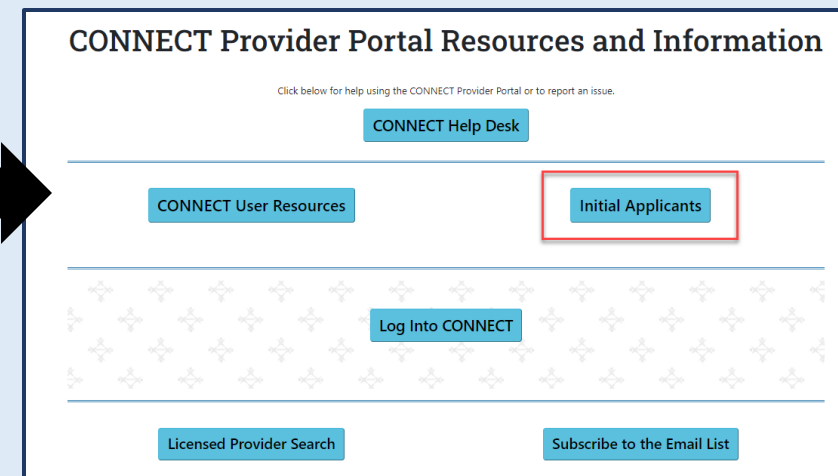
Housekeeping

Put questions and comments in the 'Q&A' feature.



FAQs will be sent out after the training.

PowerPoint presentation will be posted on the Office of Licensing website. Links for all resources shared are posted at the end of this presentation (slides 138-140).



Purpose



The purpose of today's orientation is to prepare initial applicants for the application process and corresponding requirements.



Our goal is to equip applicants with the information, tools, and resources necessary to become DBHDS licensed providers.

Learning Objectives

Be Informed

- about Office of Licensing resources and tools for Initial Applicants and how to find them

Understand

- the steps of the initial application process and requirements of a complete application

Be Familiar

- with CONNECT registration, login, uploading required attachments, and correspondence processes

Be Aware

- of the DBHDS regulations and training materials located on the Office of Licensing's website

Be Confident

- that you can achieve success with the Initial Application process and become a licensed DBHDS provider!

Services Licensed By DBHDS

Chesna Gore

Licensing, Administrative and Regulatory Manager



General Regulations 12VAC35-105- 30. Licenses

- ▶ A. Licenses are issued to providers who offer services to individuals diagnosed with a mental illness, developmental disability, substance use disorder or have a brain injury.
- ▶ B. Providers shall be licensed to provide specific services as defined in this chapter or as determined by the commissioner.

General Regulations 12VAC35-105-30. Licenses

- ▶ 1. Assertive community treatment (ACT);
- ▶ 2. Case management;
- ▶ 3. Clinically managed high-intensity residential care or Level of care 3.5;
- ▶ 4. Clinically managed low-intensity residential care or Level of care 3.1;
- ▶ 5. Clinically managed population specific high-intensity residential or Level of care 3.3;
- ▶ 6. Community gero-psychiatric residential;
- ▶ 7. ICF/IID;
- ▶ 8. Residential crisis stabilization;
- ▶ 9. Nonresidential crisis stabilization;
- ▶ 10. Day support;
- ▶ 11. Day treatment, includes therapeutic day treatment for children and adolescents;
- ▶ 12. Emergency;
- ▶ 13. Group home and community residential;
- ▶ 14. Inpatient psychiatric;
- ▶ 15. Intensive in-home;
- ▶ 16. Medically managed intensive inpatient service or Level of care 4.0;



General Regulations 12VAC35-105-30. Licenses

- ▶ 17. Medically monitored intensive inpatient treatment or Level of care 3.7;
- ▶ 18. Medication assisted opioid treatment;
- ▶ 19. Mental health community support;
- ▶ 20. Mental health intensive outpatient;
- ▶ 21. Mental health outpatient;
- ▶ 22. Mental health partial hospitalization;
- ▶ 23. Psychosocial rehabilitation;
- ▶ 24. Residential treatment;
- ▶ 25. Respite care;
- ▶ 26. Sponsored residential home;
- ▶ 27. Substance abuse intensive outpatient;
- ▶ 28. Substance abuse outpatient;
- ▶ 29. Substance abuse partial hospitalization;
- ▶ 30. Supervised living residential; and
- ▶ 31. Supportive in-home.



Regulations for Children's Residential Facilities 12VAC35-46

Services Licensed

- ▶ 14 -001 MH -Psychiatric Residential Treatment Facility for children and adolescents Psychiatric RTF for C/A Residential
- ▶ 14 -008 MH Therapeutic Group Home for Children and adolescents MH Therapeutic GH for C/A Residential
- ▶ 14 -035 DD Children Group Home Residential Srv DD Group Home for C/A Residential
- ▶ 14 -060 SA Clinically Managed, Medium-Intensity Residential Srv for Children and adolescents ASAM Level 3.5 C/A Residential
- ▶ 14 -063 SA Clinically Managed, Low-Intensity Residential Srv for Children and adolescents ASAM Level 3.1 C/A Residential
- ▶ 14 -066 DD -ICF-IID for Children and adolescents ICF-IID for C/A Residential
- ▶ 14 -094 DD RESIDENTIAL RESPITE SRV DD RESIDENTIAL RESPITE C/A Residential
- ▶ 14 -097 MH RESIDENTIAL RESPITE SRV MH RESIDENTIAL RESPITE C/A Residential

Billing for DBHDS Licensed Services



- ▶ Department of Behavioral Health and Developmental Services (DBHDS) licensed providers are eligible to bill and receive payment for administering services.
- ▶ The Office of Licensing (OL) only issues the license and monitors the service being provided.
- ▶ The OL is not responsible or involved in billing or payment of providers. Those questions should be directed to the agencies responsible for paying the provider for services.

An Introduction to the DBHDS Office of Licensing Website



Initial Applicants

www.dbhds.virginia.gov

The screenshot shows the website for the Virginia Department of Behavioral Health & Developmental Services. The header includes the department name, a link to 'Here's how you know', and navigation links for Home, Getting Help, Offices, About DBHDS, and Contact Us. A 'Select Language' dropdown is also present. The main content area is divided into two columns: 'DIVISIONS' and 'SERVICE PROVIDERS'. The 'DIVISIONS' column lists various units, with 'Office of Licensing' highlighted by a red box and a red arrow. The 'SERVICE PROVIDERS' column lists 'Licensed Provider Search'. A red arrow also points to the 'Offices' menu item in the top navigation bar. Below the navigation menu, there is a photograph of two women smiling.

Department of Behavioral Health and Developmental Services
Official website of the Commonwealth of Virginia [Here's how you know](#) ▾

Virginia Department of Behavioral Health & Developmental Services

Home Getting Help ▾ **Offices ▾** About DBHDS ▾ Contact Us ▾ Select Language ▾

DIVISIONS


- Architectural & Engineering
- Office of Behavioral Health Wellness (OBHW)
- Child and Family Services
- Office of Management Services
- Developmental Services
- Office of Budget and Financial Reporting
- Office of Forensic Services
- Office of SVP Services
- Health Equity
- Human Resources


Background Investigations Unit
Office of Integrated Health
Human Rights
Internal Audit
Office of Licensing
Pharmacy
Policy & Public Affairs
Procurement
Quality Management and Development
Office of Recovery Services
Substance Use Disorders
Office of Crisis Supports and Services


SERVICE PROVIDERS

- Licensed Provider Search

Initial Applicants

**Department of Behavioral Health and Developmental Services**
An official website of the Commonwealth of Virginia [Here's how you know](#) ▾

 Find a Commonwealth Resource

 Virginia Department of Behavioral Health & Developmental Services

Home

Getting Help ▾

Offices ▾

About DBHDS ▾

Contact Us ▾

Select Language ▾

How Do I...

Office of Licensing

Home » Quality Management » Office of Licensing

**OUR MISSION:** To be the regulatory authority for DBHDS licensed service delivery system through effective oversight.**OUR VISION:** The Office of Licensing will provide consistent, responsive, and reliable regulatory oversight to DBHDS licensed providers by supporting high quality services to meet the diverse needs of its clients.

CONNECT Provider Portal Resources and Information

Click below for help using the CONNECT Provider Portal or to report an issue.

CONNECT Help Desk

CONNECT User Resources

Initial Applicants

Initial Applicants

Click below for help using the CONNECT Provider Portal or to report an issue.

CONNECT Help Desk

CONNECT User Resources

Initial Applicants

Exciting News: The DBHDS Office of Licensing is dedicated to reducing any undue administrative burden to potential licensure applicants. Therefore, as of December 21, 2022, the OL has streamlined the licensing process for all "Priority" Services to ensure the services with the greatest need can be licensed within 90 days of the submission of a completed application. Updated new applicant information will be posted to this website as of January 3, 2023. Please see below for more information:

- The Office of Licensing is prioritizing processing initial applications for priority services needed throughout the Commonwealth. [The current prioritization list can be found here.](#)
- [Changes to the Licensing Initial Application Review Process Memo](#) (December 2022)
- [Initial Applications in Review Upcoming Changes Memo](#) (December 2022)
- [2023 Initial Applicant Licensing Resources](#) (January 2023)
- [2023 Initial Applicant Training](#)

The Provider Portal Dashboard provides access to applicant information online and allows direct communication with the Office of Licensing staff regarding your application.

Click [here](#) to access the DBHDS CONNECT Provider Portal System

Home and Community Based Services (HCBS)

Home and community-based services (HCBS) provide opportunities for individuals to receive Medicaid waiver services in their own home or community rather than in institutions or other isolated settings. *Providers of around home sponsored*

Prioritization List

The Prioritization List identifies services licensed by DBDHS based on the Commissioner's Initiatives as well as the need for services throughout the Commonwealth of Virginia.

The services highlighted green are Priority Services and those that are not highlighted are Non-Priority Services.

DBHDS PRIORITIZATION LIST

Services highlighted are considered a DBHDS PRIORITY SERVICE

SERV ID	PROG ID	POP	Description	Program Name	Service Type
01	001	DD	DD Group Home Srv	DD Group Home	Residential
01	003	MH	MH Group Home Srv	MH Group Home	Residential
01	004	DD	Group Home Srv-REACH	REACH Group Home Adult	Residential
01	005	DD	ICF-IID	ICF-IID	Residential
01	007	BI	Brain Injury Residential Tx Service	BI Residential Treatment Serv	Residential
01	011	DD	DD Supervised Living Srv	DD Supervised Living	Residential
01	012	MH	MH Supervised Living Srv	MH Supervised Living	Residential
01	019	MH	MH Crisis Stabilization Srv	MH Crisis Stabilization	Residential
01	020	MH	MH Crisis Stabilization Srv	MH Crisis Stabilization C/A	Residential
01	022	DD	DD Crisis stabilization - Residential	DD Crisis Stab Residential	Residential
01	036	DD	DD Residential Respite Srv	DD Residential Respite Adult	Residential
01	037	DD	DD Residential Respite Srv	DD Residential Respite C/A	Residential
01	041	DD	DD Group Home Srv -	REACH Group Home	Residential

Non - Priority Services

Serv ID	Program ID	Population	Description	Program Name	Service Type
01	001	DD	DD Group Home Srv	DD Group Home	Residential
01	005	DD	ICF-IID	ICF-IID	Residential
03	001	MH	Mental Health Community Supports Srv	Mental Health Skill Building	<u>Non Center-</u> Based/Home Based
14	066	DD	ICF-IID for Children and adolescents	ICF-IID for C/A	Residential

Priority Services

All other services on the Prioritization List in green are identified as Priority Services.



Submission of a Completed Application

- ▶ Once the initial application has been submitted, if all documents submitted are not sufficient to accept the application and place onto the Waitlist, the application will be rejected.
- ▶ The applicant will receive a rejection email with a list of items which will need to be addressed.
- ▶ Once the applicant has resubmitted the application with supporting documents, the application will be reviewed again.



Submission of a Completed Application

Attestation

- Applicants will be required to submit an **attestation** with their application swearing that all submitted policies and procedures comply with the Licensing Regulations.

12VAC35-105-110. Denial, revocation, or suspension of a license.

A. An application for a license or license renewal may be denied and a full, conditional, or provisional license may be revoked or suspended for one or more of the following reasons

7. The provider or applicant submits any misleading or false information to the department.

12VAC35-46-120. Denial.

A. An application for licensure may be denied when the applicant:

4. Has made false statements on the application or misrepresentation of facts in the application process;



Submission of a Completed Application

- ▶ Once the application has been submitted and accepted, the application will be placed on the waitlist.
- ▶ To view the waitlist, visit the DBHDS Office of Licensing website.



Submission of a Completed Application

Priority Services



Once the prioritized applicant submits a complete initial application, they will receive a welcome letter with additional instructions for beginning the background check and central registry search processes



The application will be placed on the waitlist.



The applicant should begin the background check and central registry search processes immediately as a DBHDS licensed provider may not serve individuals until they have requested background and central registry checks for all direct care staff and supervisors.



Priority applications will be pulled from the waitlist within 10 business days

Policy Review - Priority Services



A Policy Review Specialist will review the application and attachments to determine compliance with the Licensing Regulations and Code of Virginia.



If the submitted documentation requires revisions, the Policy Review Specialist will send a letter to the applicant citing the necessary revisions.



If necessary, the applicant makes required corrections and submits the updated documentation to the Policy Review Specialist through the DBHDS CONNECT Provider Portal.



Revisions must be received within 30 calendar days from the date on the last revision letter.



Applicants that do not provide revisions within 30 calendar days of a request for revisions will be closed for review.



Applicants whose applications are closed and want to continue to pursue a DBHDS license, will need reapply by following the initial application process.



Submission of a Completed Application - Non-Priority Services

Once the non-prioritized application is added to the waitlist, they will receive a welcome letter with next steps in the licensing process.



The Office of Licensing is prioritizing the review of the Commonwealth's most needed services. Non-priority applications will be placed on the waitlist when they are received and will be pulled from the waitlist based on priority.



It is important to know that for non-priority services it could take a year or longer to be licensed.



The application will remain on the waitlist until a Policy Review Specialist pulls the application for review.

Policy Review - Non-Priority Services



A Policy Review Specialist will review the application and attachments to determine compliance with the Licensing Regulations and Code of Virginia.



If the submitted documentation requires revisions, the Policy Review Specialist will send a letter to the applicant citing the necessary revisions.



The applicant makes required corrections and submits the updated documentation to the Policy Review Specialist through the DBHDS CONNECT Provider Portal.



Revisions must be received within 90 calendar days from the date on the last revision letter.



Applicants that do not provide revisions within 90 calendar days of a request for revisions, will be closed for review.





Policy Review - Assignment to a Licensing Specialist


- ▶ Once the Policy Review Specialist has reviewed and accepted all revisions, the application will be assigned to a Licensing Specialist.
- ▶ A letter will be sent to the applicant via the CONNECT Provider Portal with the contact information of their assigned Licensing Specialist.
- ▶ At this time, for Non-Priority Services, the applicant will be instructed to begin the background check process.

On Site Inspections

For Residential and Medication Assisted Opioid Treatment (MAT) services only, an onsite inspection is required prior to issuance of a license



For applicants of Residential and MAT Services, the Licensing Specialist will reach out to the applicant within 3 business days of assignment to schedule the onsite inspection




If the applicant is unavailable when the licensing specialist calls, the applicant should contact the licensing specialist as soon as possible in order to minimize delays in the licensure process.

On Site Inspections

The Onsite inspection will consist of a review of the regulations related to the Physical Environment (General Regulations 12VAC35-105-260 - 12VAC35-105-380 and for Children's Residential Services 12VAC 35-46-420 - 12VAC 35-46-620).



The Licensing Specialist will remind the provider that they have signed an attestation stating they are in compliance with the Rules and Regulations for Licensing Providers. This includes understanding DBHDS regulations and processes for background check and the central registry process. During the inspection, if it is determined that the applicant attested to something that was not done, then this is cause for rejecting and closing the application.



The Inspection **MUST** occur, and the license issued prior to the 45th calendar day for priority services and 90 calendar days for non-priority services for the application to remain open.



CONNECT OVERVIEW

DWAYNE LYNCH

ACTING QUALITY AND
INFORMATION SYSTEMS
MANAGER



What Is CONNECT?



CONNECT is the DBHDS online licensing system that went live in November 2021. CONNECT provides for a better, paperless licensing experience for initial applicants and DBHDS licensed providers.

Using CONNECT, initial applicants can initiate a new application. Existing providers can submit renewal applications, service, location and information modifications; view and print licenses, manage their users, send and receive correspondences, submit corrective action plans, apply for a variance, and so much more.

CONNECT is automated with specific workflows which has streamlined the licensing process and improved the transparency of data and communication with Office of Licensing staff, providing real-time information exchange and 24/7 account access.

Creating A CONNECT Account

Users that do not yet have a login, can access CONNECT using the blue *Log Into CONNECT* button from the DBHDS Office of Licensing home page.

CONNECT Provider Portal Resources and Information

Click below for help using the CONNECT Provider Portal or to report an issue.

CONNECT Help Desk

CONNECT User ResourcesInitial Applicants

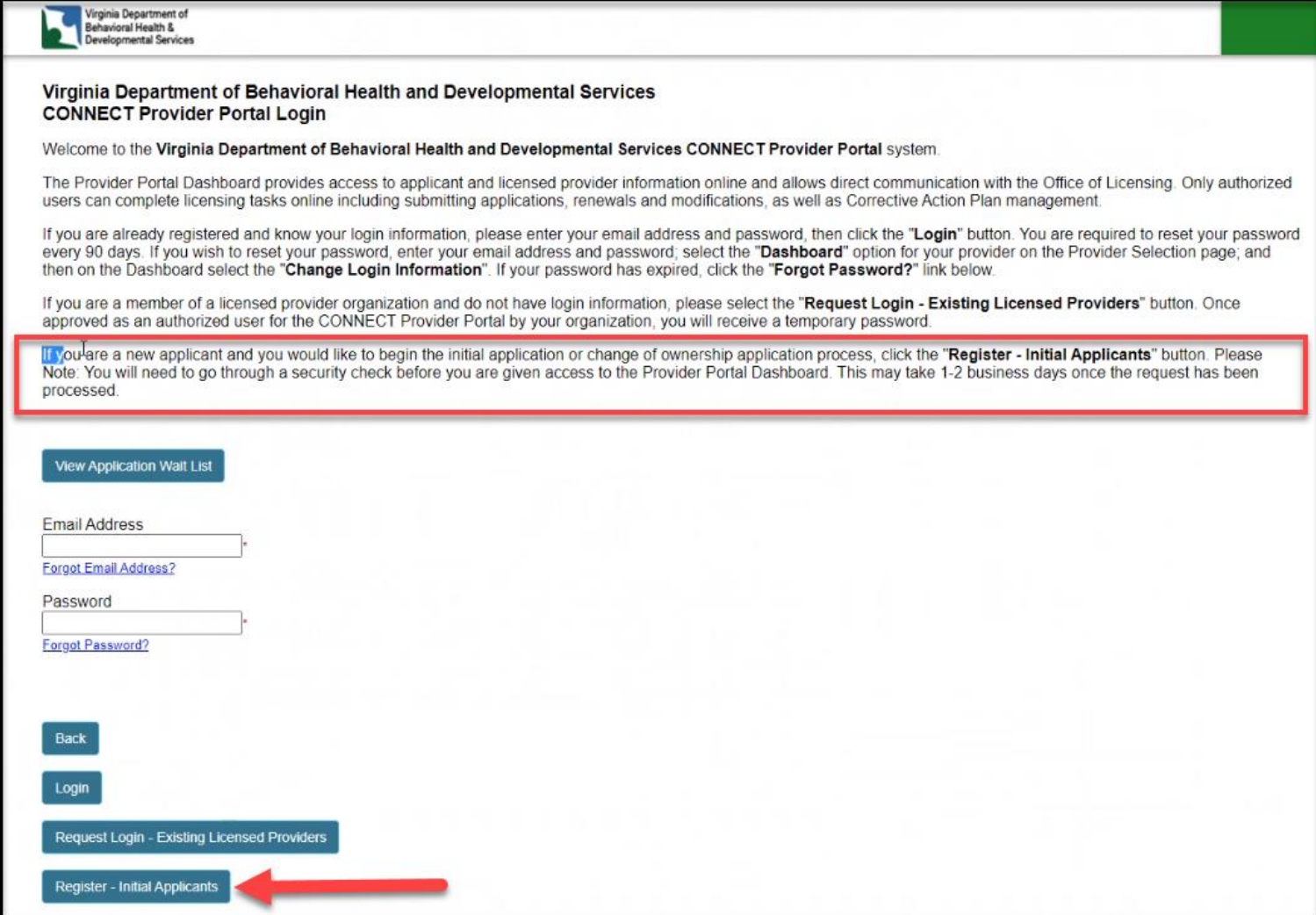
Log Into CONNECT

Licensed Provider SearchSubscribe to the Email List

Waitlist

Provider Portal Login Screen

Click the blue
Register - Initial Applicant
button to begin the
registration process.



Virginia Department of Behavioral Health & Developmental Services

CONNECT Provider Portal Login

Welcome to the **Virginia Department of Behavioral Health and Developmental Services CONNECT Provider Portal** system.

The Provider Portal Dashboard provides access to applicant and licensed provider information online and allows direct communication with the Office of Licensing. Only authorized users can complete licensing tasks online including submitting applications, renewals and modifications, as well as Corrective Action Plan management.

If you are already registered and know your login information, please enter your email address and password, then click the **"Login"** button. You are required to reset your password every 90 days. If you wish to reset your password, enter your email address and password; select the **"Dashboard"** option for your provider on the Provider Selection page; and then on the Dashboard select the **"Change Login Information"**. If your password has expired, click the **"Forgot Password?"** link below.

If you are a member of a licensed provider organization and do not have login information, please select the **"Request Login - Existing Licensed Providers"** button. Once approved as an authorized user for the CONNECT Provider Portal by your organization, you will receive a temporary password.

If you are a new applicant and you would like to begin the initial application or change of ownership application process, click the **"Register - Initial Applicants" button. Please Note: You will need to go through a security check before you are given access to the Provider Portal Dashboard. This may take 1-2 business days once the request has been processed.**

[View Application Wait List](#)

Email Address

[Forgot Email Address?](#)

Password

[Forgot Password?](#)

[Back](#)

[Login](#)

[Request Login - Existing Licensed Providers](#)

[Register - Initial Applicants](#)

Registration



Virginia Department of
Behavioral Health &
Developmental Services

Registration for Orientation and Training

Please enter your information below to begin the registration process.

First Name*

Last Name*

Email Address*

Phone Number*

[Back](#) [Next](#)

*Indicates a required field

Virginia Department of
Behavioral Health &
Developmental Services

Create New Record

Based on the information provided on the
"Next" to continue.

Name Title:

First Name:

Middle Name:

Last Name:

Suffix:

* Indicates a required field.

[Back](#) [Next](#)

Virginia Department of
Behavioral Health &
Developmental Services

Contact Information

Please enter or update your contact information by
of Licensing. Once you have completed this regist
communications.

Contact Information

Phone Number: *

Alternate Number:

Email Address: *

Fax:

Mailing Address

Street 1: *

Street 2:

City: *

State: *

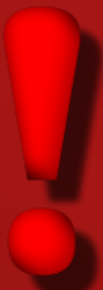
Zip: *

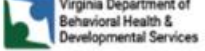
City/County: *

* Indicates a required field

[Back](#) [Next](#)

CONNECT Provider Portal Training - Required



Virginia Department of
Behavioral Health &
Developmental Services

Orientation and Training

Instructions: Please click each of the links below to complete the CONNECT Provider Portal training. Links with a red asterisk are required and must be completed before you can continue to the next step of the registration process. Please plan to spend 15 minutes watching the training and completing the attestation or your session will be timed out and you will have to start the process over.

All training links on this screen, as well as additional trainings, will be available on the Provider Portal Dashboard and you can reference them at any time.

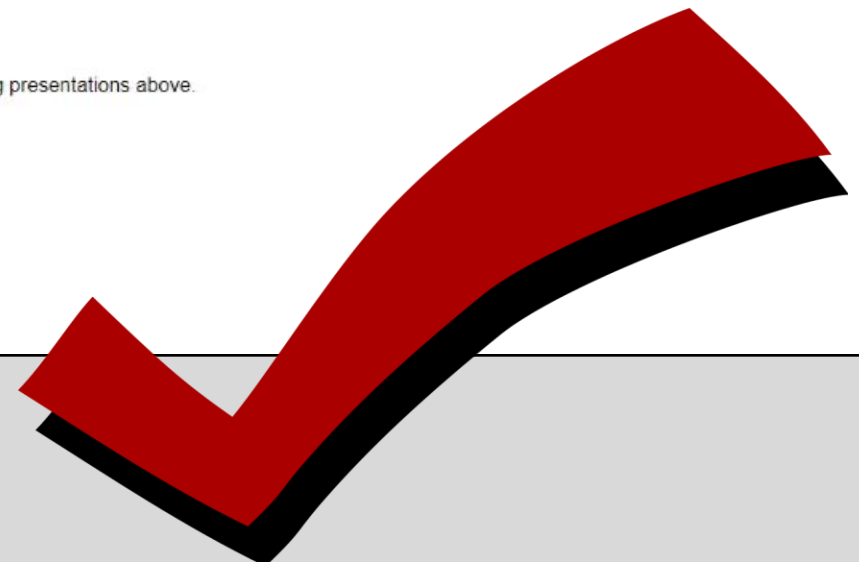
CONNECT Provider Portal Training:

- [How do I manage additional CONNECT Portal Users? *](#)
- [How do I manage Background Check Contacts? *](#)
- [How do I initiate a new application?](#)
- [How do I view and print a Corrective Action Plan?](#)
- [How do I know it is time to renew my license?](#)
- [How do I submit my renewal?](#)

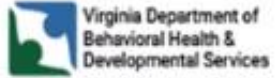
I hereby attest that I have viewed and completed all applicable orientation and training presentations above.

Signature: Date:

* Indicates a required field



Provider Organization Information



Provider Organization Information

Please enter the information for the provider organization serving the organization. An application must be submitted and approved.

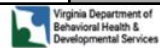
Provider Name

Organization Type

For Profit or Non-Profit?

[Back](#)[Next](#)

* Indicates a required field.



Provider Organization Contact Information

Please enter the address and contact information for the organization by clicking the Update links, when finished click "Next" to continue.

Provider Name:

Application Test, LLC

Physical Address:

[Update](#)

Provider Contact Information

Phone Number:

Fax:

Email:

[Update](#)

Mailing Address:

[Update](#)[Back](#)[Next](#)

Provider Organization Contact Information

Please enter the address and contact information for the organization by clicking the Update links, when finished click "Next" to continue.

Provider Name:

Application Test, LLC

Physical Address:

12 Test Ave Richmond, VA 23223 Henrico County

[Update](#)

Provider Contact Information

Phone Number: (804) 555-5555

Fax:

Email: 9000Test@email.com

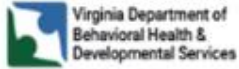
[Update](#)

Mailing Address:

12 Test Ave Richmond, VA 23223

[Update](#)[Back](#)[Next](#)

Provider Organization Information



Change of Ownership Questions

Please answer the questions below to indicate if the organization is applying for a change of ownership.

Are you purchasing an existing DBHDS licensed provider organization to be licensed as a new provider organization? *

No

Are you a part of an existing provider organization and applying to split service licenses? *

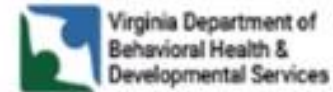
No

Are you a part of an existing DBHDS licensed provider organization where the owners or the percentage of ownership are changing? *

No

Back

Next



Relationship to Organization

Please enter the information for your relationship to the organization.

Title:*

Owner

Back

Next

*Indicates a required field



Registration Process Complete

Process Complete

You have successfully requested access to the **Virginia Department of Behavioral Health and Developmental Services CONNECT Provider Portal**. Your request has been submitted for approval. Once approved, you will be granted the appropriate access.

You will receive an email shortly with a temporary password to login to the Provider Portal Dashboard. To be sure you receive your temporary password, please add `smtprelay@gl solutions.com` to your email contact list. In addition, if you are a member of a larger organization, you will need to speak with your IT department to ensure emails sent from `smtprelay@gl solutions.com` are not blocked by the organization's firewall. If you request a temporary password and do not receive it within one business day, be sure to check your SPAM box to see if the email was sent there.

Note: Your username is the email address you provided during this online registration process.

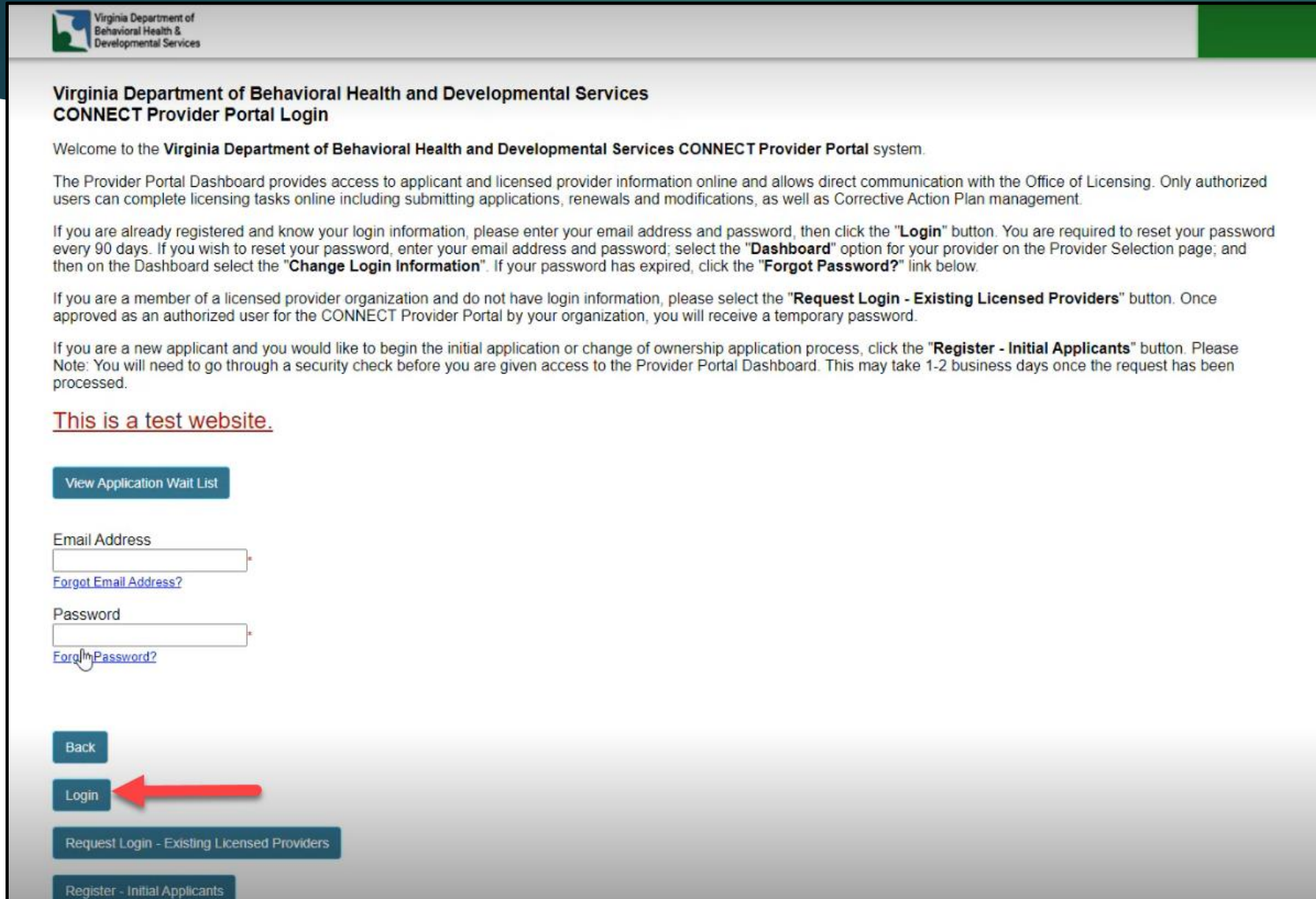
Next Steps:

1. Click the button below to return to the Login Page.
2. Login using your email address and the temporary password sent to your email.
3. Upon login, you will be prompted to reset your password and setup your security questions and answers.
4. Once the request for access has been approved, you will be able to access the Provider Portal Dashboard and follow the instructions to submit an Initial Application.

[Return to Login Page](#)



Logging In To CONNECT



Virginia Department of Behavioral Health and Developmental Services

CONNECT Provider Portal Login

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If you are already registered and know your login information, please enter your email address and password, then click the **"Login"** button. You are required to reset your password every 90 days. If you wish to reset your password, enter your email address and password; select the **"Dashboard"** option for your provider on the Provider Selection page; and then on the Dashboard select the **"Change Login Information"**. If your password has expired, click the **"Forgot Password?"** link below.

If you are a member of a licensed provider organization and do not have login information, please select the **"Request Login - Existing Licensed Providers"** button. Once approved as an authorized user for the CONNECT Provider Portal by your organization, you will receive a temporary password.

If you are a new applicant and you would like to begin the initial application or change of ownership application process, click the **"Register - Initial Applicants"** button. Please Note: You will need to go through a security check before you are given access to the Provider Portal Dashboard. This may take 1-2 business days once the request has been processed.

[This is a test website.](#)

[View Application Wait List](#)

Email Address

[Forgot Email Address?](#)

Password

[Forgot Password?](#)

[Back](#)

[Login](#)


[Request Login - Existing Licensed Providers](#)

[Register - Initial Applicants](#)

Enter the email address you registered with and the temporary password that was emailed to you.

Logging In To CONNECT

When logging in for the first time, you will be prompted to confirm your email address, complete security questions, and create a new password. When you have completed all required fields, click Save.

 Virginia Department of Behavioral Health & Developmental Services

Change Login Information

Please enter or update the following information for your login information.

Email Address:

Email

Confirm Email

Password:

NOTE: Password must be at least 14 characters long and contain one special character(ex. !, @, #), one upper case letter, one lower case letter, and one number.

Password

Confirm Password

Security Questions:

Security Question 1

Answer

Security Question 2

Answer

Security Question 3

Answer

☒ By checking this box, you are affirming that you are responsible for maintaining all authorized contacts for your Provider Organization and that you will remove user accounts within 24 hours of employee separation from the organization.

*Indicates required field.

Provider Selection

In order to complete an initial provider application, renew a license, submit a modification, manage contacts, print licenses, or access the communication center please select the Provider Portal Dashboard you would like to access. If the Provider Portal Dashboard is showing Access Pending, your access is pending approval. You will be able to select the dashboard once the request for access has been approved.

IMPORTANT: If you are applying for a change in ownership, you must submit the application under the new provider organization record that the license(s) will be issued to after the change in ownership takes place. If you see the provider organization with a Pending – Change of Ownership listed below, click the **"Change of Ownership Application"** button below the table.

Provider Name	Provider Number	Status	Select
Application Test, LLC	7864	Pending	Access Pending

Change of Ownership Application

Logout

Logging In To CONNECT

Provider Selection

In order to complete an initial provider application, renew a license, submit a modification, manage contacts, print licenses, or access the communication center please select the Provider Portal Dashboard you would like to access. If the Provider Portal Dashboard is showing Access Pending, your access is pending approval. You will be able to select the dashboard once the request for access has been approved.

IMPORTANT: If you are applying for a change in ownership, you must submit the application under the new provider organization record that the license(s) will be issued to after the change in ownership takes place. If you see the provider organization with a Pending – Change of Ownership listed below, click the Dashboard link for that organization. Otherwise, click the **"Change of Ownership Application"** button below the table.

Provider Name	Provider Number	Status	Select
Application Test, LLC	7864	Pending	Dashboard

Change of Ownership Application

Logout

Provider Portal Dashboard

Application Test, LLC - 7864

Log Out

Welcome to the Virginia Department of Behavioral Health and Developmental Services Provider Portal.

View Wait List

If your organization will be undergoing a change in ownership, please click [here](#) to submit a notification to the Office of Licensing. Note: this is not the change of ownership application, it is an alert to the Office of Licensing so they know of the upcoming change.

Communication Center:

The communication center allows you to correspond with the DBHDS Office of Licensing and manage your organization's contacts and access to this Provider Portal.

[Correspondence Inbox](#) 01

[Messaging](#) 01

[Login Request](#) 01

Menu:

You may choose from the various options below to submit applications and modifications, as well as to manage organization contacts and respond to corrective action plans.

If a menu option is greyed out, then you may not have security access to the process, or the process is not available to the Provider Organization at this time – Please hover over the question mark next to each menu option for more details.

The Manage Authorized Contacts menu option below allows authorized contacts with "All Access" to submit requests to grant access to the Provider Portal. Once the request is approved, the user can access the Provider Portal. Please contact the organization's Main Authorized Contact to make changes to your access level.

NOTE: Licenses on a License Status Letter or a Conditional License Type are not eligible for modifications. If an emergency change is required, please send a message to your Licensing Specialist using the Message Center above.

When navigating between screens on the CONNECT Provider Portal, always use the Back and Next buttons on the screen. Do not use the back button on the browser.

If you need assistance navigating the processes available to you or the organization, please contact the organization's primary contact before contacting the DBHDS Office of Licensing for assistance.

- [Manage Authorized Contacts](#)
- [Initial Provider Application](#)
- [Children's Residential Provider Application](#)

Pending Applications: 0

Pending Modifications: 0

Authorized Contacts: 0

Name	Title	Address	Phone Number	Email	Provider Portal Access
Test Staff	Owner - Main Authorized Contact	12 Test Ave Richmond, VA 23223	(804) 555-5555	9000Test@email.com	Provider Portal Access

Mailing Address

Physical Address

12 Test Ave
Richmond, VA 23223
(804) 555-5555
9000Test@email.com

12 Test Ave
Richmond, VA 23223

Training Links:

CONNECT Provider Portal Training:

- [How do I manage additional CONNECT Portal Users?](#)
- [How do I manage Background Check Contacts?](#)
- [How do I check Background Check Status?](#)
- [How do I view and print a Corrective Action Plan?](#)
- [How do I respond to my Corrective Action Plan?](#)
- [How do I know it is time to renew my license?](#)
- [How do I submit my renewal?](#)
- [How do I submit a Service Modification?](#)
- [How do I submit an application to add a location to an existing service?](#)
- [How do I submit an Information Modification?](#)
- [How do I submit more than one Information Modification at a time?](#)
- [How do I initiate a new application?](#)
- [How do I submit my requirements?](#)
- [How do I know if my application is submitted and on the waitlist?](#)
- [How do I know if I need to respond to a deficient requirement?](#)

Provider Portal Dashboard

Training Video: [How Do I Know if My Application is Submitted?](#)



Provider Portal Dashboard Menu

Select one of the Application options shown here to begin the application. For this example, we are going to select the *Initial Provider Application* option.

Menu:

You may choose from the various options below to submit applications and modifications, as well as to manage organization contacts and respond to corrective action plans.

If a menu option is greyed out, then you may not have security access to the process, or the process is not available to the Provider Organization at this time – Please hover over the question mark next to each menu option for more details.

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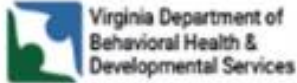
NOTE: Licenses on a License Status Letter or a Conditional License Type are not eligible for modifications. If an emergency change is required, please send a message to your Licensing Specialist using the Message Center above.

When navigating between screens on the CONNECT Provider Portal, always use the Back and Next buttons on the screen. Do not use the back button on the browser.

If you need assistance navigating the processes available to you or the organization, please contact the organization's primary contact before contacting the DBHDS Office of Licensing for assistance.

- > [Manage Authorized Contacts?](#)
- > [Initial Provider Application?](#) ←
- > [Children's Residential Provider Application?](#) ←
- > [Background Checks?](#)
- > [Service Modification?](#)
- > [Location Modification?](#)
- > [Information Modification?](#)
- > [Information Modification – Children's Residential?](#)
- > [License Renewal?](#)
- > [Corrective Action Plans?](#)
- > [Print License?](#)
- > [Change Login Information?](#)
- > [Return to Provider Selection Page](#)

Preparing to Apply: Priority or Non-Priority Service?



DBHDS Licensing Process Overview

IMPORTANT: Before beginning the application process, you must determine if the service for which you are applying is a priority or non-priority service. Please click the link below to review the Office of Licensing Initial Application Prioritization List.

[Initial Application Prioritization List](#) ←

Click below to download the instructions applicable to the priority or non-priority service for which you are applying. Save or print these instructions as you will need to refer to them as you complete the application and proceed through the licensing process. It is the applicant's responsibility to determine whether your application is for a priority or non-priority service.

Failure to follow the correct instructions may result in delays in the licensing process.

PRIORITY SERVICES:

[Application Instructions for Priority Services](#)

NON-PRIORITY SERVICES:

[Application Instructions for Non-Priority Services](#)

Cancel

Continue to Application ←



IMPORTANT

Preparing to Apply: Service Selection

Select Service

Please select the service for which you are applying, then click “Next” to continue.

IMPORTANT: Please ensure the service selected is the correct one. Once this application is submitted you will not be able to change the service/program for which you are applying. If an application is submitted with the wrong service, the application will need to be withdrawn and you will need to complete the Initial Application Registration process again to re-submit a new initial application.

Service/Program	Description	Licensed As	Select
01-001	DD Group Home Service	A developmental disability residential group home service for adults	<input type="radio"/>
01-003	MH Group Home	A mental health residential group home service for adults	<input type="radio"/>
01-004	Group Home Service - REACH	A residential group home with crisis stabilization REACH service for adults with co-occurring diagnosis of developmental disability and behavioral health needs	<input type="radio"/>
01-005	ICF-IID	An intermediate care facility for individuals with an intellectual disability (ICF-IID) residential service for adults	<input type="radio"/>
01-007	Brain Injury Residential Tx Service	A brain injury residential treatment center for adults	<input type="radio"/>
01-011	DD Supervised Living Service	A developmental disability supervised living residential service for adults	<input type="radio"/>
01-012	MH Supervised Living Service	A mental health supervised living residential service for adults	<input type="radio"/>
01-019	MH Crisis Stabilization - Residential	A mental health residential crisis stabilization service for adults	<input type="radio"/>
01-020	MH Crisis Stabilization - Residential	A mental health residential crisis stabilization service for children and adolescents	<input type="radio"/>
01-022	DD Crisis Stabilization - Residential	A developmental disability residential crisis stabilization service	<input type="radio"/>
01-023	MH Crisis Stabilization - Residential	A mental health residential crisis stabilization service	<input type="radio"/>
01-036	DD Residential Respite Service	A developmental disability residential respite service for adults	<input type="radio"/>
01-037	DD Residential Respite Service	A developmental disability residential respite service for children and adolescents	<input type="radio"/>
01-041	DD Group Home Service - REACH	A residential group home with crisis stabilization REACH service for children and adolescents with co-occurring diagnosis of developmental disability and behavioral health needs	<input type="radio"/>
01-043	SA Clinically Managed High-Intensity Residential Service	ASAM Level 3.5: Clinically managed high-intensity residential care for adults	<input type="radio"/>
01-044	SA Specific High-Intensity Residential Service	ASAM Level 3.3: Specific high-intensity residential service for adults	<input type="radio"/>
01-045	SA Clinically Managed Low-Intensity Residential Service	ASAM Level 3.1: Clinically managed low-intensity residential care for adults	<input type="radio"/>
02-004	DD Center-Based Respite Service	A developmental disability center-based respite service (children, adolescent, and/or adults)	<input type="radio"/>
02-006	DD Day Support Service	A developmental disability center-based day support service for adults	<input type="radio"/>
02-007	DD Day Support Service	A developmental disability center-based day support service for children and adolescents	<input type="radio"/>
1 2 3 4			

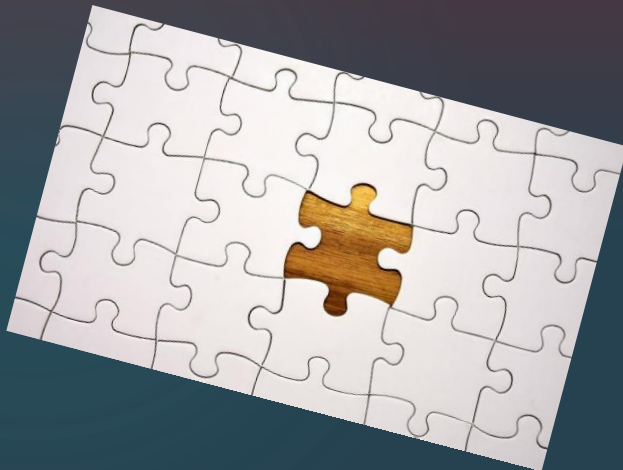
Cancel

Next



The Application

Note the two Requirement sections shown here (red arrows). If a requirement status is Incomplete, and the requirement is not optional, you will not be able to submit your application.



Initial Service Provider Application

[Return to Dashboard](#)[Print Application](#)

Application Instructions:

It is the applicant's responsibility to determine whether your application is for a priority or non-priority service. Failure to follow the correct instructions may result in delays in the licensing process.

[Initial Application Instructions for Priority Services](#)[Initial Application Instructions for Non-Priority Services](#)

Provider Name: Application Test, LLC
Organization Type: Partnership
Public Provider: No
For-Profit or Non-Profit: For-Profit
Mailing Address: 12 Test Ave
Richmond, VA 23223
Phone Number: (804) 555-5555
Email Address: 9000Test@email.com
Service: 01-001-DD Group Home Service

[Edit Service](#)

Requirements Checklist

The requirements below are required for submission of the initial application. You will not be able to submit the application until these requirements are met and show a status of Pending Review or Complete.

IMPORTANT: If you are applying for a priority service, you must complete these requirements, as well as the requirements listed in the Additional Application Requirements below prior to submitting your application. Failure to follow the correct instructions may result in delays in the licensing process.

NOTE: Application progress is automatically saved each time you select the "Next" button throughout this process. You may exit and continue the application anytime.

Requirement	Status
Add Provider Owners/Officers/Members	Incomplete
Service Program Information	Incomplete
Upload Service Description	Incomplete
Upload Certificate of Authority to Conduct Business in Virginia	Incomplete
Upload Organizational Structure	Incomplete
Upload Evidence of Financial Resources for 90 Days	Incomplete
Upload Proposed Working Budget	Incomplete
Upload Proposed Staffing Plan	Incomplete
Upload Position Descriptions	Incomplete
Upload Policy and Procedures	Incomplete

Additional Application Requirements

IMPORTANT: If you are applying for a priority service, you must complete these Additional Application Requirements prior to submitting your application.

If you are applying for a non-priority service, the Additional Application Requirements are not required at this time. Until you are confident that you are near the end of the licensing process, please delay buying a home, renting office space, buying insurance, and hiring staff. You will receive a deficiency letter once you are close to the end of the licensing process directing you to complete these requirements.

Requirement	Status
Add Location	Incomplete
Add Location Property Owner (optional)	Incomplete
Add Location Manager	Incomplete
Add Community Liaison	Incomplete
Upload Staff Resumes (optional)	Incomplete
Upload Certificate of Occupancy	Incomplete
Upload Building Floor Plan	Incomplete

To cancel this application and discard the submission please select the "Withdraw Application" button below.

[Withdraw Application](#)

The Application

When navigating between screens on the CONNECT Provider Portal, always use the Back and Next buttons on the screen. Do not use the back button on the browser.

If you need assistance navigating the processes available to you or the organization, please contact the organization's primary contact before contacting the DBHDS Office of Licensing for assistance.

- > [Manage Authorized Contacts?](#)
- > [Initial Provider Application?](#)
- > [Children's Residential Provider Application?](#)
- > [Background Checks?](#)
- > [Service Modification?](#)
- > [Location Modification?](#)
- > [Information Modification?](#)
- > [Information Modification – Children's Residential?](#)
- > [License Renewal?](#)
- > [Corrective Action Plans?](#)
- > [Print License?](#)
- > [Change Login Information?](#)
- > [Return to Provider Selection Page](#)

Pending Applications: ?

Type	Application Number	Description	Status	
Service Application	7864-01-001	01-001 - DD Group Home Service	Pending Submission	Continue

Pending Modifications: ?

Authorized Contacts: ?

Name	Title	Address	Phone Number	Email	Provider Portal Access
Test Staff	Owner - Main Authorized Contact	12 Test Ave Richmond, VA 23223	(804) 555-5555	9000Test@email.com	Provider Portal Access



Submitting the Application

Once you have completed all requirements, you will see the Certificate of Application section at the bottom of the Initial Service Provider Application screen. If you do not see this section, your application is missing a required element.

Certificate of Application ←

This certificate is to be read before completion and then signed by the applicant upon completion of this initial application.

- I am in receipt of and have read the [Rules and Regulations for Licensing Providers by the Department of Behavioral Health and Developmental Services](#) ("Licensing Regulations") and the [Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, Funded, or Operated by the Department of Behavioral Health and Developmental Services](#) ("Human Rights Regulations").
- My organization's policies and procedures comply with the requirements within the Licensing Regulations.
- All of my organization's application attachments including the service description, discharge criteria, admission criteria, and programming criteria also comply with the Licensing Regulations.
- The staffing plan complies with the requirements for supervision within 12VAC35-105-590(C). All staff hired will meet the qualifications outlined in the position description for their position and staffing allocations will be appropriate for the service provided.
- In accordance with 12VAC35-105-460, there will be at least one employee or contractor on duty at each location who holds a current certificate (i) issued by the American Red Cross, the American Heart Association, or comparable authority in standard first aid and cardiopulmonary resuscitation (CPR) or (ii) as an emergency medical technician.
- In accordance with 12VAC35-105-510, each new employee, contractor, student, or volunteer who will have direct contact with individuals receiving service must obtain a statement of certification by a qualified licensed practitioner indicating the absence of tuberculosis in a communicable form within 30 days of employment or initial contact with individuals receiving services.
- My organization will comply with the requirements for obtaining criminal history background checks and central registry searches as outlined in [§ 17.2-416.1 of the Code of Virginia](#).
- If the service I am applying for includes the administration of medication, the staffing plan includes qualified staff to administer medication in accordance with the organization's medication administration policy, the Licensing Regulations, and applicable state laws.
- All center-based and residential locations where services are to be provided will comply with the physical site requirements within the Licensing Regulations.
- In accordance with 12VAC35-105-900, when not in use, active and closed paper records for individuals receiving services shall be stored in a locked cabinet or room. In addition, personnel files are maintained in an organized system to manage and protect the confidentiality and employee health-related information is maintained in a file separate from personnel files in accordance with 12VAC35-105-390, the Americans with Disabilities Act and the Virginians with Disabilities Act.
- I have submitted the [Human Rights Compliance Verification Checklist](#) and my organization's complaint resolution policy to the DBHDS Office of Human Rights at OHRPolicy@dbhds.virginia.gov.
- I understand that following the review of the completed initial application, a conditional license will be issued. Pursuant to Code of Virginia 37.2-415, a conditional license may be granted to a provider to operate a new service in order to permit the provider to demonstrate compliance with all licensing standards.
- I understand that prior to the issuance of a conditional license for a residential service, representatives of the Department will conduct a remote or onsite inspection to confirm compliance with the applicable Licensing Regulations.
- I understand that following the issuance of a conditional license for non-residential center based services, representatives of the Department will conduct remote or onsite inspections to confirm compliance with the applicable Licensing Regulations and that an annual license will not be granted until compliance with all the applicable regulations is demonstrated.
- I understand that pursuant to 12VAC35-105-110 A.7, an application for a license or license renewal may be denied and a full, conditional, or provisional license may be revoked or suspended if the provider submits any misleading or false information to the Department.

TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL INFORMATION CONTAINED HEREIN IS CORRECT AND COMPLETE. I FURTHER DECLARE MY AUTHORITY AND RESPONSIBILITY TO MAKE THIS INITIAL APPLICATION.

Signature of Applicant: Title: Date:


COMPLETED

Submit Initial Application ←

Submitting the Application

Pending Applications: ?

Type	Application Number	Description	Status
Service Application	7864-01-001	01-001 - DD Group Home Service	Submitted

 [Continue](#)

Pending Modifications: ?

Provider Owner(s)/Officer(s) ?

Name	Title	Address	Phone Number	Email	Percent Owned
Staff Test	Owner	12 Test Ave Richmond, VA 23223	(804) 555-5555	9000Test@email.com	100%


Authorized Contacts: ?

Name	Title	Address	Phone Number	Email	Provider Portal Access
Test Staff	Owner - Main Authorized Contact	12 Test Ave Richmond, VA 23223	(804) 555-5555	9000Test@email.com	Provider Portal Access

Application Approved – License Issued

Pending Applications: ?

Pending Modifications: ?

Active Licenses?

License Type	License Number	Service	Period	Status	
Provider License - First Conditional	7864		06/06/2023-12/05/2023	Active	
Service License - First Conditional	7864-01-001	DD Group Home Service	06/06/2023-12/05/2023	Active	<button>View/Add Location</button>

Provider Owner(s)/Officer(s)?

Name	Title	Address	Phone Number	Email	Percent Owned
Staff Test	Owner	12 Test Ave Richmond, VA 23223	(804) 555-5555	9000Test@email.com	100%

Authorized Contacts?

Name	Title	Address	Phone Number	Email	Provider Portal Access
Test Staff	Owner - Main Authorized Contact	12 Test Ave Richmond, VA 23223	(804) 555-5555	9000Test@email.com	Provider Portal Access

Mailing Address

Physical Address



Provider Portal Dashboard Menu Accessibility

Menu:

You may choose from the various options below to submit applications and modifications, as well as to manage organization contacts and respond to corrective action plans.

If a menu option is greyed out, then you may not have security access to the process, or the process is not available to the Provider Organization at this time – Please hover over the question mark next to each menu option for more details.

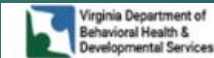
The Manage Authorized Contacts menu option below allows authorized contacts with "All Access" to submit requests to grant access to the Provider Portal. Once the request is approved, the user can access the Provider Portal. Please contact the organization's Main Authorized Contact to make changes to your access level.

NOTE: Licenses on a License Status Letter or a Conditional License Type are not eligible for modifications. If an emergency change is required, please send a message to your Licensing Specialist using the Message Center above.

When navigating between screens on the CONNECT Provider Portal, always use the Back and Next buttons on the screen. Do not use the back button on the browser.

If you need assistance navigating the processes available to you or the organization, please contact the organization's primary contact before contacting the DBHDS Office of Licensing for assistance.

- [Manage Authorized Contacts?](#)
- [Initial Provider Application?](#)
- [Children's Residential Provider Application?](#)
- [Background Checks?](#)
- [Service Modification?](#)
- [Location Modification?](#)
- [Information Modification?](#)
- [Information Modification – Children's Residential?](#)
- [License Renewal?](#)
- [Corrective Action Plans?](#)
- [Print License?](#)
- [Change Login Information?](#)
- [Return to Provider Selection Page](#)



Print License

Please click the Print buttons below to print you License Certificate and, if applicable, License Addendum.

License Certificate	7864	Print
License Addendum	7864-01-001	Print

[Return to Dashboard](#)

CONNECT Correspondence: The Communication Center



Provider Portal Dashboard

Application Test, LLC - 7864 Log Out

Welcome to the Virginia Department of Behavioral Health and Developmental Services Provider Portal.

View Wait List

If your organization will be undergoing a change in ownership, please click [here](#) to submit a notification to the Office of Licensing. Note: this is not the change of ownership application, it is an alert to the Office of Licensing so they know of the upcoming change.

Communication Center:

The communication center allows you to correspond with the DBHDS Office of Licensing and manage your organization's contacts and access to this Provider Portal.

[Correspondence Inbox](#) ⓘ ⓘ

[Messaging](#) ⓘ ⓘ

[Login Request](#) ⓘ ⓘ

Menu:

You may choose from the various options below to submit applications and modifications, as well as to manage organization contacts and respond to corrective action plans.

If a menu option is greyed out, then you may not have security access to the process, or the process is not available to the Provider Organization at this time – Please hover over the question mark next to each menu option for more details.

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- > [Manage Authorized Contacts](#) ⓘ
- > [Initial Provider Application](#) ⓘ
- > [Children's Residential Provider Application](#) ⓘ
- > [Background Checks](#) ⓘ
- > [Service Modification](#) ⓘ
- > [Location Modification](#) ⓘ



Correspondence Inbox



Virginia Department of
Behavioral Health &
Developmental Services

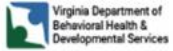
Communication Center

Date Received	Subject	View	Delete
06/06/2023	Pending Letter	Open	<input type="checkbox"/>
06/06/2023	License Wall Certificate	Open	<input type="checkbox"/>
06/06/2023	License Wall Certificate	Open	<input type="checkbox"/>

Return to Dashboard

Save

The Communication Center



Communication Center Messages

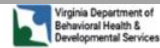
To submit questions or information to the Office of Licensing, select the **"New Message"** button. To view and respond to ongoing communication, select the appropriate **"Open Message"** link.

Please note that all messages displayed on this screen can be viewed and edited by all organization users. Messages sent and received within this communication center are not private.

New Message

Delete Selected

Return to Dashboard



Provider Inquiry

To submit a message to the Office of Licensing please fill out and submit the information below. When the Office of Licensing responds, you will receive an email notification.

NOTE: If there are not any names available to select in the "Send Message To" field, leave the field blank when you submit the message. We will still receive the message and it will be routed to the appropriate person to respond.

Send Message To:

Subject:

Upload Attachment

Message:

Rich text editor toolbar with options: Source, Undo, Redo, Bold, Italic, Underline, Strikethrough, Font, Size, Text Color, Background Color, Bulleted List, Numbered List, Indent, Outdent, Link, Unlink, Table, Table of Contents, Print, and a text area for composing the message.

Back

Submit Message



CONNECT User Resources

CONNECT Help Desk

CONNECT User Resources

Initial Applicants

CONNECT Blast Newsletters

- [CONNECT Blast Newsletter](#) (May 2023)
- [CONNECT Blast Newsletter](#) (April 2023)
- [CONNECT Blast Newsletter](#) (March 2023)
- [CONNECT Blast Newsletter](#) (February 2023)
- [CONNECT Blast Newsletter](#) (January 2023)
- [CONNECT Blast Newsletter](#) (November 2022)
- [CONNECT Blast Newsletter](#) (October 2022)
- [CONNECT Blast Newsletter](#) (September 2022)
- [CONNECT Blast Newsletter](#) (July 2022)
- [CONNECT Blast Newsletter](#) (June 2022)

CONNECT FAQs

Job Aids

- [How Do I Add a Service in the CONNECT Provider Portal?](#)
- [How Do I Send a Message in the CONNECT Provider Portal Job Aid?](#)
- [How Do I Reset My Password in CONNECT When It Is Expiring or Has Expired?](#)
- [How Do I Submit a Variance Application in CONNECT?](#)
- [How Do I Submit a Corrective Action Plan \(CAP\) in CONNECT?](#)
- [How do I Manage Authorized Contacts and Password Resets in the CONNECT Provider Portal?](#)
- [How do I View Licensing Information from the CONNECT Provider Portal Dashboard](#)
- [How do I Submit a Renewal in the CONNECT Provider Portal?](#)
- [How Do I Register for the CONNECT Provider Portal to Begin the Initial Application Process?](#)
- [How Do I Determine which Modification Application to Submit in CONNECT when a Change Needs to Be Made?](#)

Training Videos

- [How Do I Submit an Application to Add a Location to an Existing Service?](#)





Help Desk

CONNECT Provider Portal Resources and Information

Click below for help using the CONNECT Provider Portal or to report an issue.

CONNECT Help Desk

CONNECT Help Instructions

If you are having trouble accessing or using the CONNECT Provider Portal, please click the **Report an Issue** button below.

Please allow up to two business days for the Help Desk staff to respond to your issue.

Report an Issue

Your device sometimes may not allow the above button to function as intended. In that case, please send an email directly to licensingconnectinquiry@dbhds.virginia.gov with the information below:

- Name
- Provider ID
- Service License (If Applicable)
- Provider Name (Optional)
- Best Contact Phone Number
- Describe the issue that is occurring

You must provide the Provider ID and Service License in order to not delay the resolution of your issue.

Thank you for contacting the DBHDS Office of Licensing's CONNECT Help Desk.

CONNECT User Resources **Initial Applicants**


- ▶ For assistance with the CONNECT Provider Portal, go to the DBHDS Office of Licensing homepage and click the blue CONNECT Help Desk button.

Requirements of a Complete Application

Jamie Ball
Policy Review Specialist



Application Requirements



- Service Description
- Certificate of Authority to Conduct Business in VA
- Organizational Structure
- Evidence of Financial Resources for 90 Days
- Proposed Working Budget
- Proposed Staffing Plan
- Position Descriptions
- Policies and Procedures



Service Description

- **A Description of the Applicant's Program that includes:**
 - Service Goals
 - A Description of Care, Treatment, Skills Acquisition, or Other Supports Provided
 - Characteristics and Needs of Individuals to Receive Services
 - Contract Services, if any
 - Eligibility Requirements and Admission, Continued Stay, and Exclusion Criteria
 - Service Termination and Discharge or Transition Criteria
 - Types and Roles of Employees or Contractors



Certificate of Authority to Conduct Business in Virginia

- **State Corporation
Commission Certificate**

Commonwealth of Virginia



STATE CORPORATION COMMISSION

Richmond, March 7, 2020

This is to certify that the certificate of organization of

YOUR AGENCY NAME HERE

was this day issued and admitted to record in this office and that the said limited liability company is authorized to transact its business subject to all Virginia laws applicable to the company and its business.

Effective date: March 7, 2020



STATE CORPORATION COMMISSION

Attest:

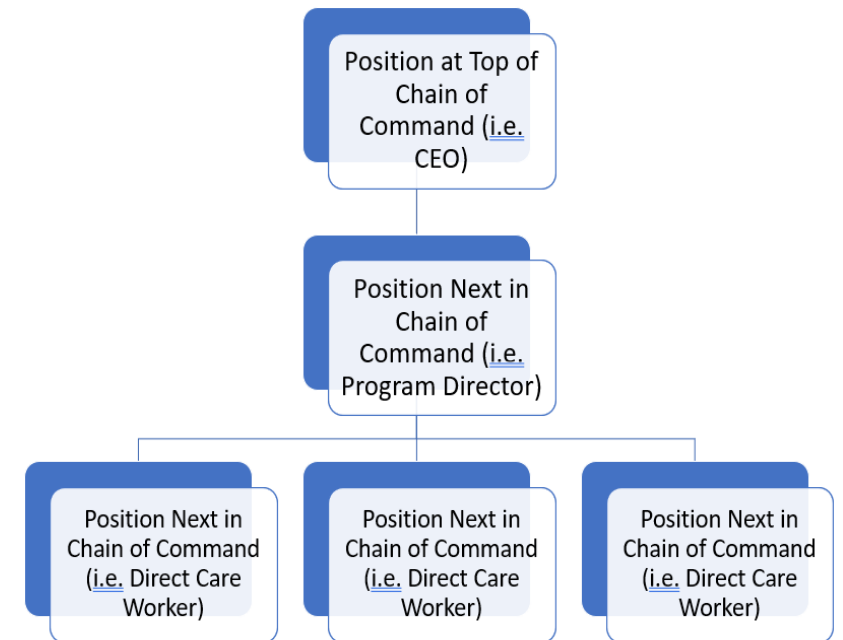
Joel H. Beck

Clerk of the Commission



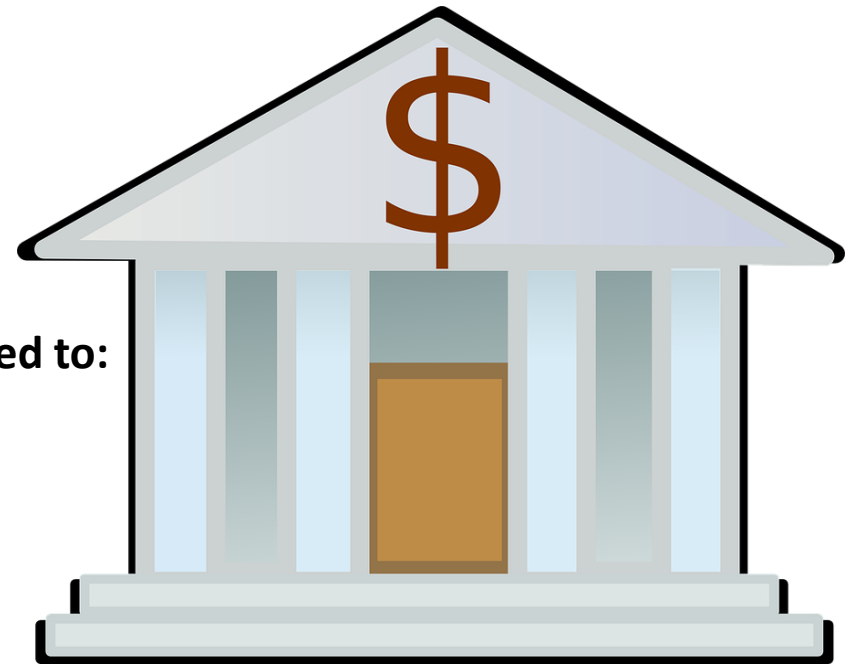
Organizational Structure

- **Chart that shows the relationship of management and leadership to the service**



Evidence of Financial Resources for 90 Days

- **The following forms of financial resources are acceptable to document proof of 90 days of operating expenses:**
 - Personal or business savings account
 - Personal or business checking account
 - Home equity line of credit
 - Bank line of credit
 - Credit card with an available balance
- **Unacceptable forms of financial resources include, but are not limited to:**
 - Promissory notes
 - Retirement accounts
 - Life insurance policies
 - Gifted funds



Evidence of Financial Resources for 90 Days

- **Financial Document should include the following:**
 - Account Holder's Name (Owner or Organization Name)
 - Financial Institution's Name
 - Statement Date(s)
 - Statement should be current within 30 days
 - Amount of Available Funds
 - Amount should be sufficient to cover 90 days of projected operating expenses

Proposed Working Budget

- Shows Projected Revenue and Expenses for the First Year of Operation.



DBHDS ANNUAL OPERATING BUDGET

Service Name: _____ Type of Service: _____ Date: _____

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTALS
1. ADMINISTRATION													
Office equipment & supplies													
Accounting													
Licensing fees													
Legal fees													
Insurance(s)													
Professional liability													
General liability													
Property liability													
Commercial Vehicular liability													
Employee Bonding													
Advertising													
2. SALARIES, WAGES & BENEFITS													
Salaries: (List each separately)													
1.													
2.													
3.													
4.													
5.													
6.													
7.													
8.													
9.													
FICA (Social Security)													
Health Insurance													
Life Insurance													
Employee training (special)													
Other benefits													
3. OPERATIONS													
Food													
Rent/Mortgage													
Utilities:													

Revised 1/25/10



Electricity													
Gas													
Cable													
Water													
Sewage													
Internet													
Auto Fuel													
Auto Maintenance													
Facility Maintenance													
Equipment/Supplies													
Motor vehicles													
Laundry/Linens													
Cleaning supplies													
Toiletries													
Staff Travel													
Staff Training (routine)													
Client recreation													
Client allowances													
Office equipment													
Contractual Services													
OTHER:													
Employee taxes													
TOTALS													

Use @ to indicate staff having current certification in First Aid. Use # to indicate staff who have received a certificate in Cardiopulmonary Resuscitation (CPR).

Revised 1/25/10



Proposed Staffing Plan

- **Comprised of Two Components: Written Staffing Plan and Staff Schedule**
 - **Written Staffing Plan:**
 - Includes the types, roles, and numbers of employees and contractors required to provide the service
 - Meets staffing requirements related to supervision
 - **Staff Schedule:**
 - Shows the staff name, positions, and scheduled hours



DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES

NAME OF SERVICE: _____ DATE: _____

LOCATION: _____

[illegible]

Use @ to indicate staff having current certification in First Aid. Use # to indicate staff who have received a certificate in Cardiopulmonary Resuscitation (CPR).



Position Descriptions

- **Submit a Position Description for each position listed on the org. chart.**
- **Position Descriptions should include the following:**
 - Job Title
 - Duties and Responsibilities Required of the Position
 - Job Title of the Immediate Supervisor
 - Minimum Knowledge, Skills, and Abilities, Experience or Professional Qualifications Required

Policies and Procedures

“Policy” defines what the plan or guiding principle of the organization is, as related to the required regulation.

“Procedures” are the process (or steps) the applicant takes to ensure the policy is carried out. Procedures should answer the questions of who, where, and how a policy will be implemented.

Policy and Procedures

- Policy and procedures shall be developed to address all applicable regulations for your service.
- Sometimes the regulation will indicate if the service is not applicable.



Policy and Procedures

- Regulation 12VAC35-105-530-Emergency Preparedness and Response Plan includes the following in section "M":
 - "M. This section does not apply to home and noncenter-based services."
- "Home and noncenter based" means that a service is provided in the individual's home or other noncenter-based setting. This includes noncenter-based day support, supportive in-home, and intensive in-home services.

Policy and Procedures

- Regulation 12VAC35-105-600-Nutrition includes the following in sections A and B:


12VAC35-105-600. Nutrition.

A. A provider preparing and serving food shall:

1. Implement a written plan for the provision of food services, which ensures access to nourishing, well-balanced, varied, and healthy meals;
2. Make reasonable efforts to prepare meals that consider the cultural background, personal preferences, and food habits and that meet the dietary needs of the individuals served; and
3. Assist individuals who require assistance feeding themselves in a manner that effectively addresses any deficits.

B. Providers of residential and inpatient services shall implement a policy to monitor each individual's food consumption and nutrition for:

1. Warning signs of changes in physical or mental status related to nutrition; and
2. Compliance with any needs determined by the individualized services plan or prescribed by a physician, nutritionist, or health care professional.

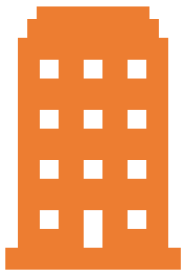


Additional Application Requirements

Location Information
Certificate of Occupancy
Building Floor Plan
Current Fire Inspection
Current Health Inspection



Location Information



Location



Location Manager



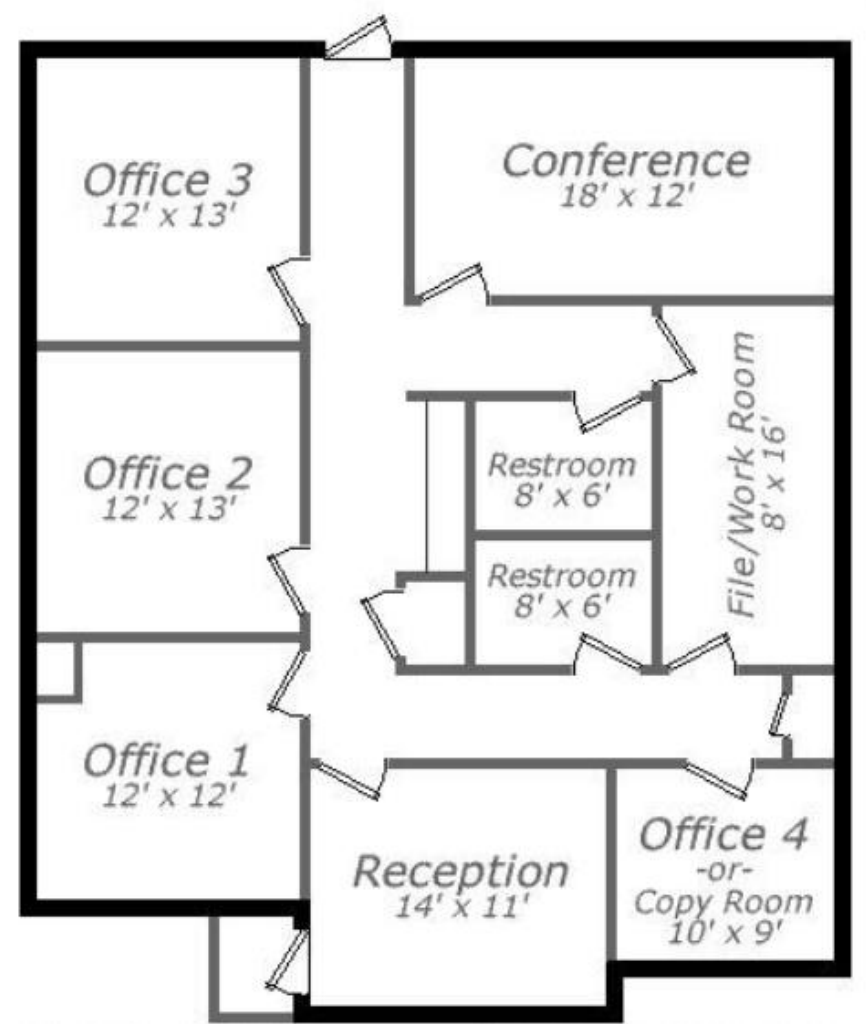
Community Liaison

Certificate of Occupancy

- This document is obtained from the locality from where the service location is.
- Indicates the building is classified for its proposed licensed purpose.
- Does not apply to Home Based Services and Non-Center Based Services
 - Some examples of Home and Non-Center Based services include: Supportive In-Home, In-Home Respite, Non-residential crisis stabilization, Mental Health Skill Building and Intensive In-Home

Building Floor Plan

- Include Room Dimensions
- Does Not Apply to Home Based or Non-Center Based Services



Current Fire Inspection

- Documentation that buildings and equipment in residential service locations are maintained in accordance with Virginia Statewide Fire Prevention Code (13VAC5-51)
 - For Non-Children's Residential this would apply to locations serving more than eight individuals
 - For Children's Residential this would apply to all locations, regardless of the number of individuals served.
- Does not apply to Home Based Services and Non-Center Based Services
- Does not apply to Sponsored Residential Services



Current Health Inspection

- Any location where the provider is responsible for preparing or serving food shall request inspection and shall obtain approval by state or local health authorities regarding food service and general sanitation.
 - For Children's Residential, inspection and approval shall also include:
 - The sewage disposal system, and
 - The water supply
- Does not apply to Sponsored Residential Services
- Does not apply to Group homes or Community Residential Homes

Processing of Initial Applications in CONNECT

Jamie Ball, Policy Review Specialist

Processing of Initial Apps

- Rejections
- Deficiency Letters
- Revision Reminder Emails
- Application Closure



Rejections

- Completed applications must include all required application documents and policies and procedures.
- If any items are missing, then the application will be rejected. The applicant will be notified of missing items through an email sent by CONNECT.

Sample Rejection Email

✕ Close

Application Rejected Email - [REDACTED]



DBHDS_Office_Of_Licensing <smtprelay@gl solutions.com>



To: A [REDACTED]

Mon 5/8/2023 8:26 AM

Cc: VADBHDSPROD_AppPool@gl solutions.com; Ball, Jamie (DBHDS)

[REDACTED]

Your application number [REDACTED] has been rejected due to the application being incomplete.

- Building Floor Plan: Not submitted.

Please log into the DBHDS CONNECT Provider Portal to review your application and submit the missing documentation. All policies, procedures and forms listed on the online application are required for submission and acceptance of an application for licensure.

↩ Reply

↩↩ Reply all

➦ Forward



Deficiency Letters

- After a review of the application form and application documents, if it is determined that there are items out of compliance or missing, then the Policy Review Specialist will send a deficiency letter which will include needed revisions by citing the specific Licensing Regulations which have not been met, including a brief narrative why it was not met.
- Applicant will receive an email notifying them of the new correspondence in the portal.

Sample Correspondence Notification

✕ Close

DBHDS - Correspondence Notification - [REDACTED]



DBHDS_Office_Of_Licensing <smtprelay@glsolutions.com>



Fri 5/19/2023 10:37 AM

To: [REDACTED]

Cc: VADBHDSPROD_AppPool@glsolutions.com

A new correspondence from the Department of Behavioral Health and Developmental Services is available to view on the CONNECT Provider Portal Dashboard.

Please click [here](#) to sign in to the CONNECT Provider Portal Dashboard to view the correspondence.

Thank you,

DBHDS, Office of Licensing
1220 Bank Street
Richmond, Virginia 23219
(804) 786-1747

↩ Reply

↩↩ Reply all

➦ Forward



Sample Deficiency Letter



COMMONWEALTH of VIRGINIA

DEPARTMENT OF

BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES

Nelson Smith
COMMISSIONER

Post Office Box 1797
Richmond, VA 23218-1797

Telephone (804) 786-3921
Fax (804) 371-6638
www.dbhds.virginia.gov

April 04, 2023



Re: DBHDS Licensing Application- [REDACTED]

Dear [REDACTED]:

I have reviewed the application and attachments we received on 04/03/2023 in support of your application to license an Outpatient Service /Crisis Stabilization. Please review the following request(s) and submit additional documents or revisions through the DBHDS Provider Portal as required for continuing with the licensing process. When responding to this request, you will need to submit the **entire document** in which revision(s) were made and **highlight** any changes.

Application Review:

1. Proposed Staffing Plan - Written staffing plan does not appropriately address regulation 12VAC35-105-590.C.1-5. Staffing schedule does not include all core staff to deliver the service (clinician is not identified).

Only your updated materials should be uploaded via the DBHDS Provider Portal.

Once we receive your revised application, we can continue with the licensing review process. Should you have any questions regarding this letter, please feel free to contact me through the Communications Center in the DBHDS Provider Portal.

ATTENTION: Applicants who do not submit revisions through the DBHDS CONNECT Provider Portal within 30 days from the date the deficiency letter was sent to the applicant (the date at the top of this letter), will have their application closed from further action. All future interest in receiving a DBHDS license will require restarting the application process including the submission of a new application.

Sincerely,

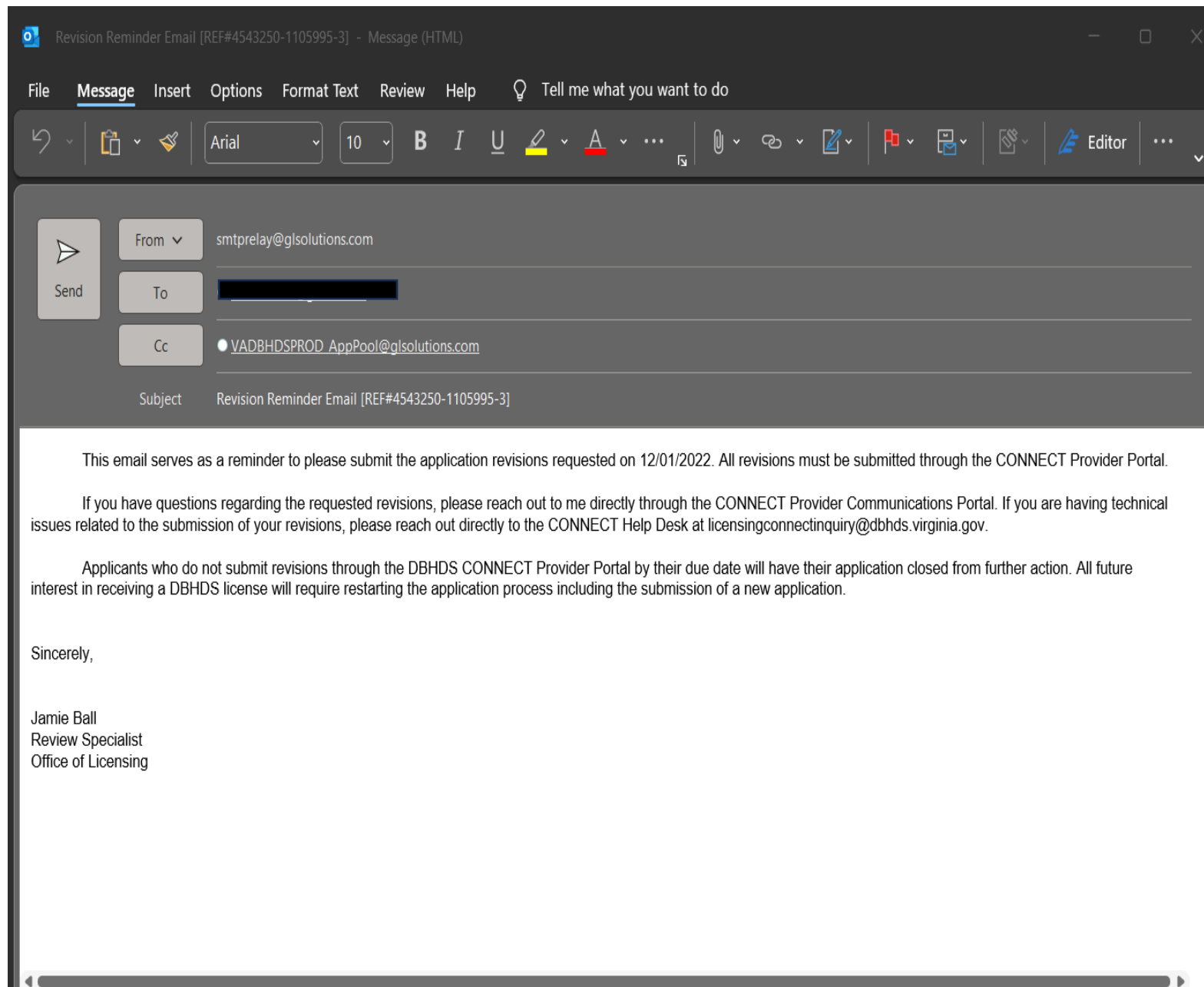
Jamie Ball
Review Specialist
Office of Licensing



Revision Reminder Emails and Application Closures

- **Priority Services:** Applicants are required to submit revisions within 30 calendar days from the date on the last deficiency letter. A reminder email will go out on day 25.
- **Non-Priority Services:** Applicants are required to submit revisions within 90 calendar days from the date on the last deficiency letter. A reminder email will go out on day 70.

Revision Reminder Emails



Closure Letter



COMMONWEALTH of VIRGINIA

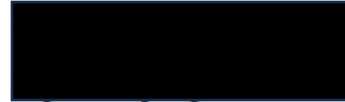
Department of
BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES

NELSON SMITH
COMMISSIONER

Post Office Box 1797
Richmond, VA 23218-1797

Telephone (804) 786-3921
Fax (804) 371-6638
www.dbhds.virginia.gov

April 21, 2023



Re: DBHDS Application - [REDACTED]

Dear [REDACTED]

The Office of Licensing sent correspondence requiring action from your agency. The required action was not completed within the specified timeframe. This letter serves as notification that your agency's application for licensure or modification application was administratively closed out.

In accordance with the Office of Licensing protocols, applicants who do not complete required actions within the specified timeframe will have their application closed from further action.

Sincerely,

Jamie Ball
Review Specialist
Office of Licensing



Virginia Department of
Behavioral Health &
Developmental Services

A Closer Look at the Application Process: Step-By-Step

Larisa Terwilliger
Training Coordinator

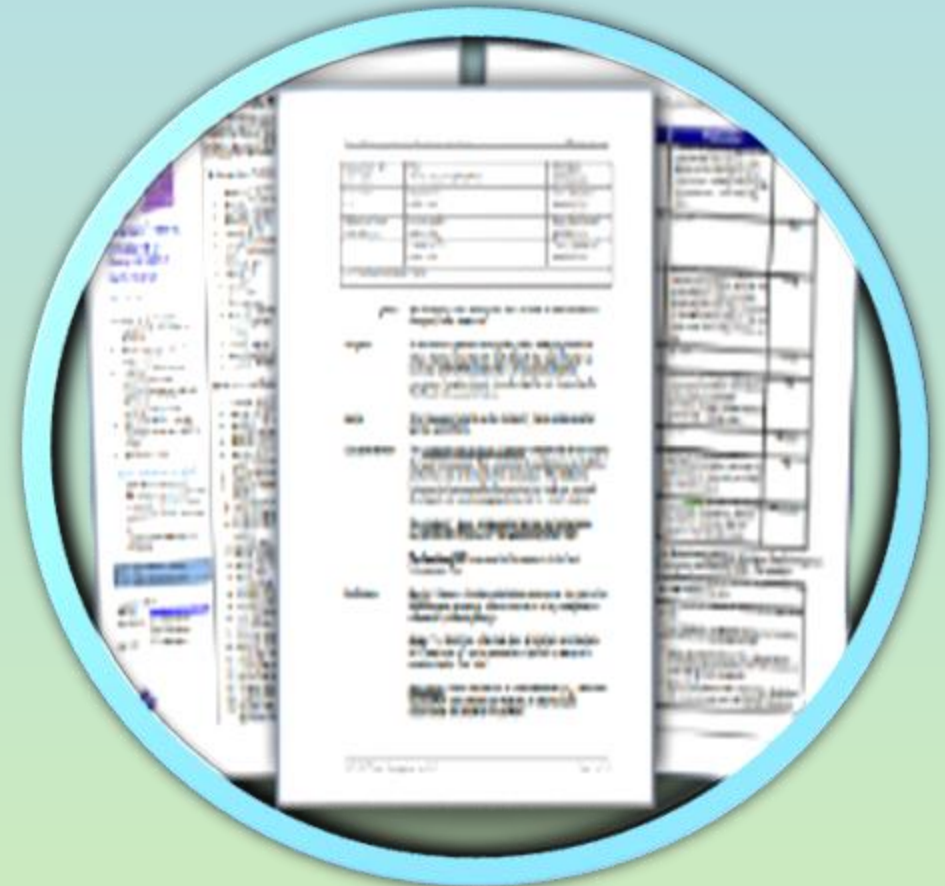
Four Phases of the Application Process – Priority Applicants



Four Phases of the Application Process – Priority Applicants

PHASE ONE: Submitting Your Application

- New applicants will submit the following documentation for review through the DBHDS CONNECT Provider Portal:
 - A completed **Licensing Application** with the required attachments **AND**
 - The **Licensing Policies and Procedures (P & Ps)**.
- Once the prioritized applicant submits a complete initial application, they will receive a welcome letter with additional instructions for beginning the background check and central registry search processes. The applicant should begin the background check and central registry search processes **immediately** as a DBHDS licensed provider may not serve individuals until they have requested background and central registry checks for all direct care staff and supervisors.



Four Phases of the Application Process – Priority Applicants

PHASE TWO: Review and Revisions

- A Policy Review Specialist will **review** the application, attachments, policies and procedures to determine compliance with the Licensing Regulations.
- If the submitted documentation requires revisions, the Policy Review Specialist will **send a letter** citing the necessary revisions to the provider via the DBHDS CONNECT Provider Portal.
- The applicant will make required corrections and submit the updated documentation to the Policy Review Specialist through the DBHDS CONNECT Provider Portal.
- Revisions must be received within **30 days** from the date on the last revision letter
 - Please note: Applicants that do not provide revisions within the required timeframe of a request for revisions will be closed for review. All future interest in receiving a DBHDS license will require the submission of a new application, including policies and procedures, which will be placed on the waiting list.



Four Phases of the Application Process – Priority Applicants

PHASE THREE (Residential and MAT Services Only): Assignment to Licensing Specialist

- The Policy Review Specialist will assign the applicant to a Licensing Specialist.
- The assigned Licensing Specialist will call the applicant to schedule their on-site inspection. If the applicant fails to schedule an on-site inspection within 30 days of the date on the letter assigning the applicant to the Licensing Specialist, the applicant's application will be closed.
- During the on-site inspection, the Licensing Specialist will review the regulations that apply to the physical environment.
- Once the on-site inspection is completed, the Licensing Specialist will make a licensing recommendation to the Office of Licensing management staff for review, who will then forward the recommendation to the DBHDS Commissioner for final approval.
 - Please note: Prior to the issuance of an annual license, the Licensing Specialist will conduct a full on-site inspection where they will review individual records, personnel records, and additional documentation, as appropriate, for compliance with the Licensing Regulations.



Four Phases of the Application Process – Priority Applicants

PHASE THREE (Non-Residential Services): Assignment to Licensing Specialist

- The Policy Review Specialist will assign the applicant to a Licensing Specialist.
- No additional action is needed from the applicant at this time.



Four Phases of the Application Process – Priority Applicants

PHASE FOUR: Approval

- Applicant will receive notification through the DBHDS CONNECT Provider Portal once their license has been approved.



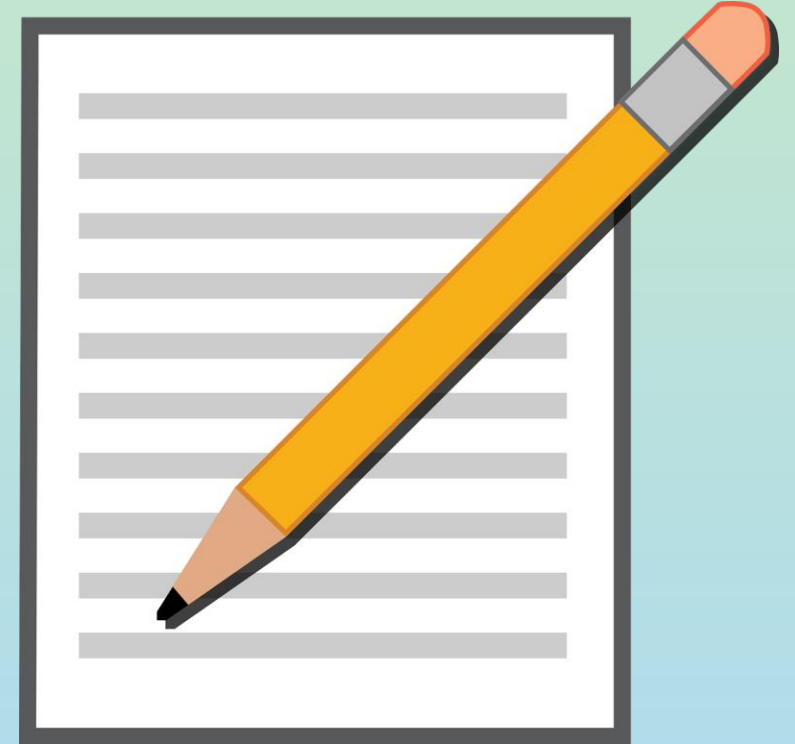
Four Phases of the Application Process – Non-Priority Applicants



Four Phases of the Application Process – Non-Priority Applicants

PHASE ONE:

- New applicants will submit the following documentation for review through the DBHDS CONNECT Provider Portal:
 - A completed **Licensing Application** with the required attachments **AND**
 - The **Licensing Policies and Procedures (P & Ps)**.
- When the Office of Licensing has a waiting list, the application is placed on the waiting list. The waiting list can be viewed on the DBHDS website. An up-to-date waitlist can be viewed from the CONNECT Provider Portal Dashboard at any time.



Four Phases of the Application Process – Non-Priority Applicants

PHASE TWO:

- A Policy Review Specialist will review the application and attachments to determine compliance with the Licensing Regulations and Code of Virginia.
- If the submitted documentation requires revisions, the Policy Review Specialist will send a letter to the applicant, via the DBHDS CONNECT Provider Portal, citing the necessary revisions.
- The applicant will make required corrections and submit the updated documentation to the Policy Review Specialist through the DBHDS CONNECT Provider Portal.
- Revisions must be received within 90 days from the date on the last revision letter.
- Once the Policy Review Specialist determines the application and attachments meet requirements within the Licensing Regulations and Code of Virginia, they will utilize the revision letter to request for non-prioritized applicants of center based and residential services to upload their location address, certificate of occupancy, and any additional physical site documentation, as appropriate, prior to assignment to a Licensing Specialist.
 - Please note: Applicants that do not provide revisions within 90 days of a request for revisions will be closed for review.



Four Phases of the Application Process – Non-Priority Applicants

PHASE THREE (Residential Services Only):

- A Policy Review Specialist will assign the applicant to a Licensing Specialist.
- During this time, the applicant will contact the DBHDS Background Investigation Unit and register with Fieldprint to initiate the Criminal Background Check process.
- The assigned Licensing Specialist will call the applicant to schedule their on-site inspection. If the applicant fails to schedule an on-site inspection within 90 days of the date on the letter assigning the applicant to the Licensing Specialist, the applicant's application will be closed.
- During the on-site inspection, the Licensing Specialist will review the regulations that apply to the physical environment.
- Once the on-site inspection is completed, the Licensing Specialist will make a licensing recommendation to the Office of Licensing management staff for review, who will then forward the recommendation to the DBHDS Commissioner for final approval.
 - Please note: prior to the issuance of an annual license, the Licensing Specialist will conduct a full on-site inspection where they will review individual records, personnel records, and additional documentation, as appropriate, for compliance with the Licensing Regulations.



Four Phases of the Application Process – Non-Priority Applicants

PHASE THREE (Non-Residential Services):

- The Policy Review Specialist will assign the applicant to a Licensing Specialist.
- During this time, the applicant will contact the DBHDS Background Investigation Unit and register with Fieldprint to initiate the Criminal Background Check process. No additional action is needed from the applicant.



Four Phases of the Application Process – Non-Priority Applicants

PHASE FOUR:

- The finalized license is provided to the new provider.
- Applicant will receive notification through the DBHDS CONNECT Provider Portal once their license has been approved.



Helpful Information as You Navigate the Initial Application Process

Licensing Regulations, Tools and Resources

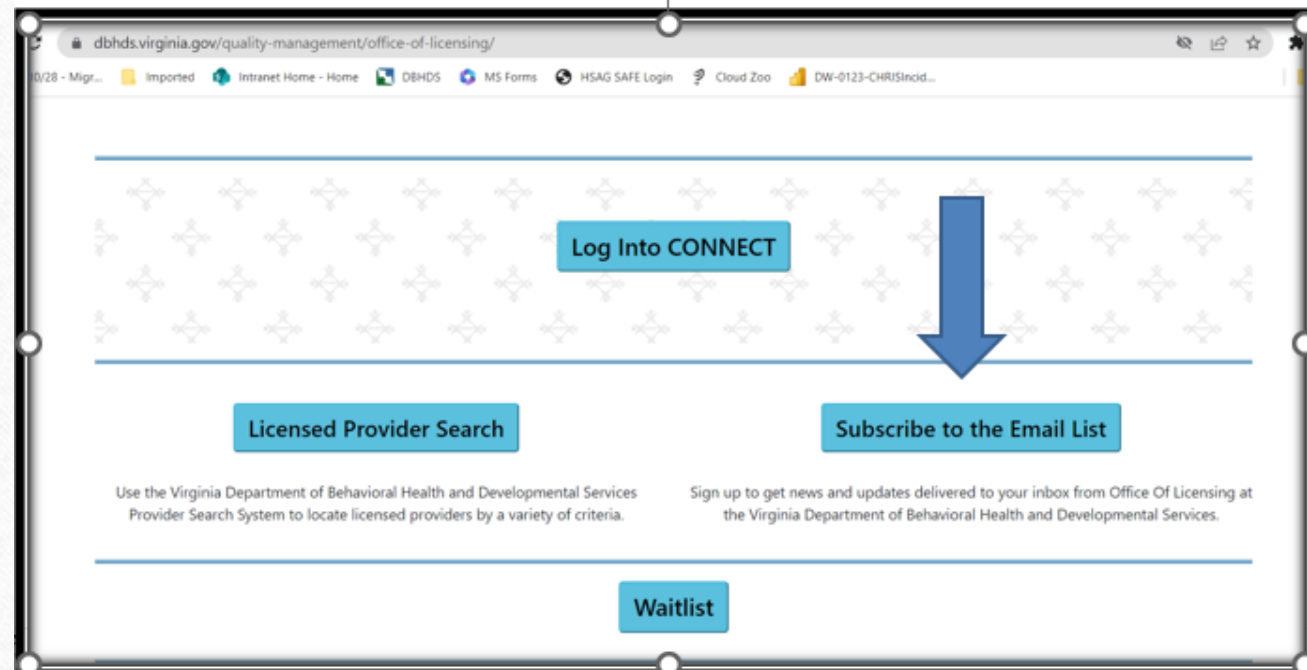
Mackenzie Glassco
Associate Director of Quality and Compliance
DBHDS Office of Licensing



Virginia Department of
Behavioral Health &
Developmental Services

Make sure you get future announcements from the Office of Licensing by subscribing to the email list.

<https://dbhds.virginia.gov/quality-management/office-of-licensing/>



DBHDS Office of Licensing (OL)



OL

WEBSITE: <https://dbhds.virginia.gov/quality-management/office-of-licensing/>



The Office of Licensing's website includes the regulations and guidance documents. It also includes several tools, resources and training documents to assist providers in achieving compliance with the regulatory requirements.

Navigating the OL Website

CORRESPONDENCE

- [Changes from the Emergency BHE Regulations to the Final BHE Regulations Memo](#) (February 2023)
- [Changes from the Emergency ASAM Regulations to the Final ASAM Regulations Memo](#) (February 2023)
- [Changes from the Emergency Children's ASAM Regulations to the Final Children's ASAM Regulations Memo](#) (February 2023)
- [Revised-Care-Concern-Criteria-Level-I-Serious-Incidents-Memo](#) (February 2023)
- [2023 Annual Inspections for Providers of Developmental Services Memo](#) (January 2023)
- [Medication Assisted Opioid Treatment Services \(MAT\) legislative changes effective January 1, 2023 Memo](#) (December 2022)
- [TDT and Outpatient Memo](#) (August 2022)
- [New Regulation Affecting 12VAC35-46 Effective 1-10-22 Memo](#) (December 2021)
- [Word Version of the Sponsor Certification Form](#)
- [Sponsored Provider Certification Process](#) (November 2021)
- [December 1, 2021 Behavioral Health Enhancement \(BHE\) Licensed Services](#) (October 2021)
- [Memo – Grace Period for Documentation of ISPs](#) (March 2021)



What is a correspondence and how is a provider notified?

Navigating the OL Website

- [Regulations for Children's Residential Facilities 12VAC35-46](#)
- [Emergency/NOIRA:12VAC35-46. Regulations for Children's Residential Facilities \(adding 12VAC35-46- 1260, 12VAC35-46-1270\) Effective January 10, 2022 – January 8, 2024](#)
- [Rules and Regulations For Licensing Providers by the Department of Behavioral Health and Developmental Services \[12 VAC 35 - 105\]](#)



Navigating the OL Website

- **What is a guidance document?** A "guidance document" is any document developed by a state agency that provides information or guidance of a general nature to agency staff or the public to interpret or implement statutes or the agency's regulations.
-

Guidance

- [LIC 16: Guidance for A Quality Improvement Program](#) (November 2020)
- [LIC 17: Guidance for Serious Incident Reporting](#) (November 2020)
- [LIC 18: Individuals with Developmental Disabilities with High Risk Health Conditions](#) (June 2020)
- [LIC 19: Corrective Action Plans \(CAPs\)](#) (August 2020)
- [LIC 20: Guidance on Incident Reporting Requirements](#) (August 2020)
- [LIC 21: Guidance for Risk Management](#) (August 2020)

All current DBHDS Guidance Documents can be found here:

<https://www.townhall.virginia.gov/L/GDocs.cfm?BoardID=65>

Virginia.gov

Agencies | Governor



VIRGINIA

REGULATORY TOWN HALL

Home >

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Petitions

Legislative Mandates

Periodic Reviews

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Meetings

Guidance Documents

Comment Forums

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State Agency

Registered Public

Sign up

Agency

Department of Behavioral Health and Developmental Services

Guidance Document Information

Title	Corrective Action Plans (CAPs)
Document ID	LIC 19
Summary	Purpose: This document provides guidance to DBHDS licensed providers on how to develop and implement an acceptable correction action plan (CAP). Questions should be directed to Jae Benz, phone -- (804) 786-1747 or email -- jae.benz@dbhds.virginia.gov.
Effective Date	8/22/2020
<div> <div>View document text</div> <div>Posted On 12/20/2022</div> <div>Document on Town Hall</div> </div>	
Explanation or Citations	Regulations addressed: Note all regulatory language is formatted in italics while guidance language is in plain text located within boxes under the label "guidance." 12VAC35-105-20. Definitions 12VAC35-105-170. Corrective Action Plan Settlement Agreement indicators addressed: V.C.4.8

This document applies to all boards for this agency

Public Comment Forums / Change History

Proposed Change	Register Date	Status
This document provides guidance to DBHDS licensed providers on how to develop and implement an acceptable correction action plan (CAP).	6/22/2020	Forum ended on 7/22/2020 with 22 Comments.

Back to showing guidance documents for this agency

Guidance for Corrective Action Plans (CAPs)

Guidance for Corrective Action Plans (CAPs)

DBHDS Office of Licensing
Guidance on Corrective Action Plans (CAPs)

Effective: August 22, 2020

Purpose: This document provides guidance to DBHDS licensed providers on how to develop and implement an acceptable corrective action plan (CAP).

Regulations addressed: Note all regulatory language is formatted in *italics* while guidance language is in plain text located within boxes under the label "guidance."

12VAC35-105-20, Definitions

12VAC35-105-170, Corrective Action Plan

Settlement Agreement Indicators addressed:
V.C. 4.8

Guidance:

12VAC35-105-20, Definitions.

The following definitions are relevant to this guidance document.

"Corrective action plan" means the provider's pledged corrective action in response to cited areas of noncompliance documented by the regulatory authority.

"Systemic deficiency" means violations of regulations documented by the department that demonstrate multiple or repeat defects in the operation of one or more services.

Guidance:

The development, implementation, and monitoring of CAPs are important components of a provider's overall quality improvement process. Adequate CAPs address identified deficiencies on both an individual and systemic level.

12VAC35-105-170, Corrective action plan.

A. If there is noncompliance with any applicable regulation during an initial or ongoing review, inspection, or investigation, the department shall issue a licensing report describing the noncompliance and requesting the provider to submit a corrective action plan for each violation cited.

Navigating the OL Website-Root Cause Analysis



Root Cause Analysis – 12VAC35-105-160.E.2

• Sample(s)

- [Serious Incident Review and RCA Template Example 5 Whys Stories Billy](#) (June 2023)
- [Serious Incident Review and RCA Template Example 5 Whys Stories Jasmine](#) (June 2023)
- [Serious Incident Review and RCA Template Example 5 Whys Stories Sam](#) (June 2023)
- [Sample Root Cause Analysis Policy](#) (February 2022)

• Training(s)

- [Flow-Chart Incident Reviews](#) (April 2023)
- [QI-RM-RCA Webinar](#) (December 2021)
- [Regulatory Compliance with Root Cause Analysis Regulations Training](#) (December 2021)
- [Risk Management & Quality Improvement Strategies Training by the Center for Developmental Disabilities Evaluation and Research – Handout](#) (December 2020)
- [Root Cause Analysis Training](#) (October 2020)

• FAQs

- [Root Cause Analysis Q&A's](#) (Updated July 2022)

Navigating the OL Website-Risk Management

Risk Management – 12VAC35-105-520

• Attestation

- [Updated Crosswalk of DBHDS Approved Attestation Trainings \(August 2022\)](#)
- [Updated Risk Management Attestation Form \(August 2022\)](#)

• Sample(s)

- [Sample Provider Systemic Risk Assessment \(February 2022\)](#)
- [Sample Provider Risk Management Plan \(June 2021\)](#)

• Tools and Templates

- [Individual Risk Tracking Tool \(April 2023\)](#)
- [Monthly Risk Tracking Tool \(April 2023\)](#)
- [Instructional Video-Risk Tracking Tool \(April 2023\)](#)
- [Serious Incident Review and Root Cause Analysis Template \(April 2023\)](#)
- [Systemic Risk Assessment Template \(April 2023\)](#)

• Training(s)

- Day 1: [Minimizing Risk Session 1 Webinar \(April 2023\)](#)
- [Minimizing Risk Session 1 PowerPoint \(April 2023\)](#)
- Day 2: [Minimizing Risk Session 2 Webinar \(April 2023\)](#)
- [Minimizing Risk Session 2 PowerPoint \(April 2023\)](#)
- Day 3: [Minimizing Risk Session 3 Webinar \(April 2023\)](#)
- [Minimizing Risk Session 3 PowerPoint \(April 2023\)](#)
- [Flow-Chart Incident Reviews \(April 2023\)](#)
- [QI-RM-RCA Webinar \(December 2021\)](#)
- [Regulatory Compliance with Risk Management Regulations Training \(December 2021\)](#)
- [Risk Management Tips and Tools Training \(June 2021\)](#)
- [Risk Management & Quality Improvement Strategies Training by the Center for Developmental Disabilities Evaluation & Research – Recorded Webinar \(December 2020\)](#)
- [Risk Management Training \(November 2020\)](#)



Virginia Department of
Behavioral Health &
Developmental Services

Monitoring and Evaluating Service Quality – Quality Improvement – 12VAC35-105-620

• *Memo(s)*

- [Tracking of Level I Serious Incidents vs Baseline Behaviors Memo](#) (February 2023)

• *Sample(s)*

- [Tools for Developing a Quality Improvement Program](#) (February 2022)
- [Sample Provider Quality Improvement Plan](#) (June 2021)

• *Training(s)*

- [QI-RM-RCA Webinar](#) (December 2021)
- [Regulatory Compliance with Quality Improvement Regulations Training](#) (December 2021)
- [Quality Improvement Tips and Tools Training](#) (June 2021)
- [Risk Management & Quality Improvement Strategies Training by the Center for Developmental Disabilities Evaluation & Research – Recorded Webinar](#) (December 2020)
- [Quality Improvement Training](#) (November 2020)

• *FAQs*

- [Quality Improvement Q&A's](#) (Updated June 2022)



Navigating the OL Website-Quality Improvement

Navigating the OL Website-SIRs and CHRIS



SERIOUS INCIDENT REPORTING AND CHRIS TRAINING

- [Serious Incident Reporting-Covid-19 \(December 2022\)](#)
- [Individual and Systematic Risk – How to Report and Respond to Incidents \(April 2022\)](#)
- [Serious Incident Reporting COVID19 \(January 2021\)](#)
- [Memo – Revoking A User Access \(February 2020\)](#)
- [CHRIS System Training \(May 2021\)](#)
- [Creating A New Serious Incident Case \(August 2019\)](#)
- [Creating A New Death Case \(August 2019\)](#)
- [Updating A Serious Incident \(August 2019\)](#)
- [Updating A Death Record \(August 2019\)](#)
- [DELTA Overview](#)

- *Care Concerns*

- [2023 Care Concern Threshold Criteria Memo](#) (February 2023)
- [IMU Care Concern PowerPoint Training](#) (February 2023)
- [Risk Triggers and Threshold Handout](#) (February 2023)

- *FAQ*

- [Risk Management Q&A's \(Updated July 2022\)](#)



Navigating the OL Website-Care Concerns

Policy and Form Templates

*If applicants use the templates, it will significantly increase the likelihood that they will be found to be in compliance when the policies and forms are reviewed for content.



The Office of Licensing is in the process of finalizing several policy and form templates which will be in a fillable PDF format. Once they are finalized, they can be found on the Office of Licensing's website.

These are not required templates; however, utilization of these templates will assist providers in achieving compliance with the regulatory requirements.

REGULATIONS & GUIDANCE

Pending Exempt Action

The State Board of Behavioral Health and Developmental Services approved this [Exempt Action](#) to amend 12VAC35-105 to incorporate federal mobile Medication Assisted Treatment (MAT) requirements into Virginia regulations.

Please note that the action will not be fully visible [here](#) until the Office of the Attorney General completes and certifies its review, a date that is unknown at this time.

For more information about exempt regulatory actions, please visit the [Virginia Regulatory Town Hall](#) website.

Public Comment Requested

There are no public comment forums at this time.

Regulations

- [Rules and Regulations For Licensing Providers by the Department of Behavioral Health and Developmental Services \[12 VAC 35 - 105\]](#)
- [Regulations for Children's Residential Facilities 12VAC35-46](#)
- [Emergency/NOIRA:12VAC35-46. Regulations for Children's Residential Facilities \(adding 12VAC35-46-1260, 12VAC35-46-1270\) Effective January 10, 2022 – January 8, 2024](#)

Guidance

- [LIC 16: Guidance for A Quality Improvement Program](#) (November 2020)
- [LIC 17: Guidance for Serious Incident Reporting](#) (November 2020)
- [LIC 18: Individuals with Developmental Disabilities with High Risk Health Conditions](#) (June 2020)
- [LIC 19: Corrective Action Plans \(CAPs\)](#) (August 2020)
- [LIC 20: Guidance on Incident Reporting Requirements](#) (August 2020)
- [LIC 21: Guidance for Risk Management](#) (August 2020)

Policy and Form Templates **Coming Soon!**

These are not required templates; however, utilization of these templates will assist providers in achieving compliance with the regulatory requirements.



Policy and Form Templates

Rules and Regulations For Licensing Providers by the Department of Behavioral Health and Developmental Services [12 VAC 35 - 105]

- 160.E. – Root Cause Analysis Policy
- 160.J. – Serious Incident Management Policy
- 400 – Background Checks
- 450 – Employee Training and Development
- 520 – Risk Management Plan
- 620 – Monitoring and Evaluating Service Quality
- 645 – Initial Screening/Assessment, Admission, Service Planning, Orientation, and Discharge
- 650 – Assessment Policy
- 660 – ISP policy
- 700 – Crisis and Clinical Emergency
- 720 – Health Care
- 770 – Medication Management
- 800 – Behavior Intervention and Support

Policy and From Templates

Regulations for Children's Residential Facilities 12VAC35-46

- 310 – Staff Development
- 710 – Application for Admission
- 720 – Written Placement Agreement
- 750 – Individualized Service Plans/Quarterly Reports
- 810 – Health Care Procedures
- 820 – Written Policy and Procedures for a Crisis or Clinical Emergency
- 850 – Medication
- 940 – Behavior Interventions

Final Preparations



Staffing



**Background and
Central Registry Checks**



**Staff Training
Requirements**

Final Preparations: Staffing



Children's Residential Services: The staffing plan complies with the requirements within 12VAC35-46-320 through 12VAC35-46-390. All staff hired will meet the qualifications outlined in the position description for their position and the ratio of staff to residents shall be at least one staff to eight residents for facilities during the hours residents are awake.

General Regulations: The staffing plan complies with the requirements for supervision within 12VAC35-105-590(C). All staff hired will meet the qualifications outlined in the position description for their position and staffing allocations will be appropriate for the service provided.

Don't forget about the staff schedule which must include staff names, their position and scheduled hours.

Final Preparations: Criminal Background Checks and Registry Searches



Priority Applicants: Once the prioritized applicant submits a complete initial application, they will receive a welcome letter with additional instructions for beginning the background check and central registry search processes. The applicant should begin the background check and central registry search processes immediately as a DBHDS licensed provider may not serve individuals until they have requested background and central registry checks for all direct care staff.

Non-Priority Applicants: Once the Policy Review Specialist has reviewed and accepted all revisions, the application will be assigned to a Licensing Specialist. A letter will be sent to the applicant via the CONNECT Provider Portal with the contact information of their assigned Licensing Specialist. At this time, for Non-Priority Services, the applicant will be instructed to begin the background check process.

Final Preparations: Criminal Background Checks and Registry Searches



- Central Registry Checks are conducted through the Department of Social Services, Office of Background Investigations (OBI).
- Applicants should access the [Request for Search of the Child Protective Services \(CPS\) Central Registry](#) form from the [DSS Website](#)

- Providers should initiate the background check through the DBHDS Background Investigations Unit. To begin this process, email: backgroundinvestigations@dbhds.virginia.gov
- It is also recommended that applicants review Attachment 2: [Barrier Crimes List for DBHDS Direct Consumer Care Providers \(Effective January 1, 2023\)](#)

Final Preparations: Criminal Background Checks and Registry Searches for Children's Residential Services



- For Children's Residential Services 12VAC35-46-300.B.7

For all individuals that began providing services after July 1, 2007, the actual date that the individual began working with children should be documented in the personnel record. This may be the same date as the date the individual began his actual duties. For individuals who work alone with children, the date they began working alone with children should be documented. **The criminal background check must be received by the provider before an individual can begin working with children. The child protective services check must be received by the provider before an individual can work alone with children.**

Final Preparations: Training



- Ensure that employees and contractors are oriented to the service and receive the required trainings as outlined in the DBHDS regulations and the provider's own policies.
- Develop a Training Policy that addresses areas related to serious incident reporting, medication administration, behavior intervention, emergency preparedness, infection control; including flu epidemics, CPR/First Aid Certification, and others as applicable. This policy should also include the frequency of retraining.
- Applicants must refer to the regulatory requirements to ensure that all areas are addressed as it relates to orientation, required trainings and staff development.



Home and Community Based Services (HCBS)



Home and Community Based Services (HCBS)

Home and community-based services (HCBS) provide opportunities for individuals to receive Medicaid waiver services in their own home or community rather than in institutions or other isolated settings. Providers of *group home, sponsored residential, supervised living, and group day services* available in a **Developmental Disabilities (DD)** waiver must demonstrate full compliance with HCBS settings requirement in ALL settings in order to receive reimbursement for services. (42 CFR Part 430, 431).



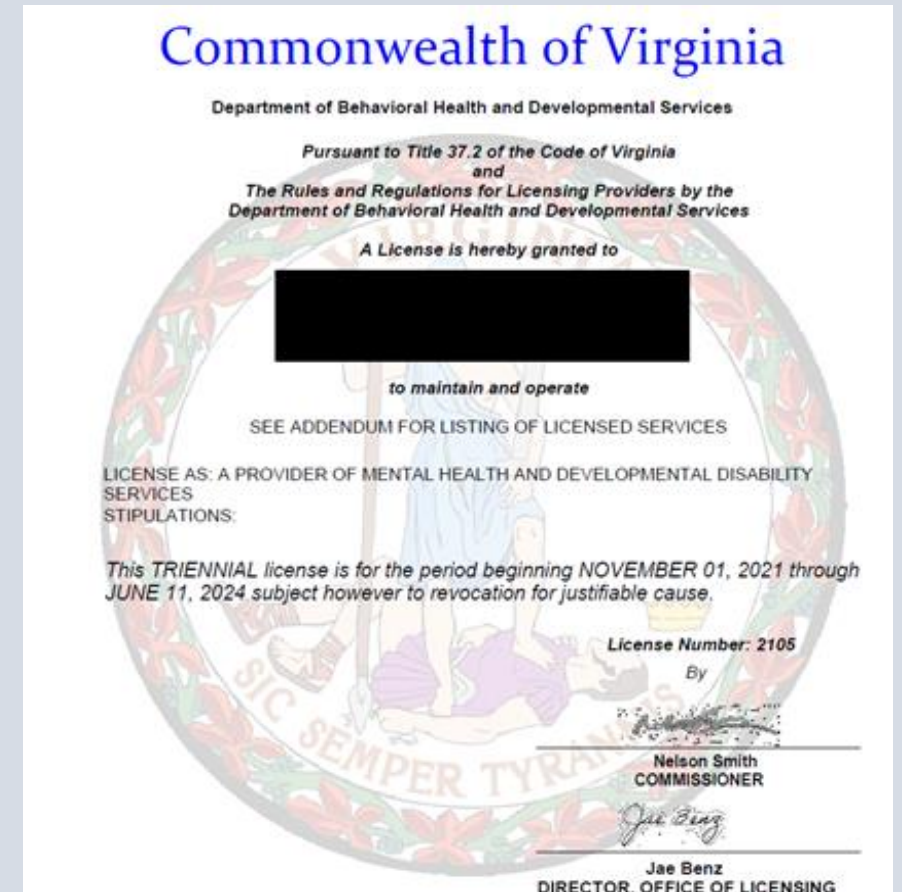
Home and Community Based Services (HCBS)

- **New providers** are required to visit the [HCBS Toolkit](#) on the DMAS website to view resources and other information to help develop your HCBS policies. Providers **must also** submit their HCBS policies to: hcbcomments@dmass.virginia.gov for internal review prior to enrolling with Medicaid as a DD waiver provider and in order to receive reimbursement for services.
- For additional information, please visit the [Department of Medical Assistance Services](#) or click on the links below:
- **New Providers HCBS Overview:** [Home and Community-Based Services \(HCBS\) Settings Rule \(virginia.gov\)](#)
- **New Settings Guidance:** [CMS Home and Community-Based Services \(HCBS\) Regulations: Developmental Disability \(DD\) Waivers \(virginia.gov\)](#)
- If you have additional questions related to HCBS please contact: hcbcomments@dmass.virginia.gov

What's Next? The Conditional License

Issuance of Licenses

Once the initial applicant has met the minimum regulatory requirements to be licensed, then a conditional license will be issued. This type of license is issued to a new provider for services that demonstrate compliance with administrative and policy regulations but has not demonstrated compliance with all the regulations.



What's Next? The Conditional License

It is important to know that:

- A conditional license shall not exceed six months.
- A conditional license may be renewed if the provider is not able to demonstrate compliance with all the regulations at the end of the license period. A conditional license and any renewals shall not exceed 12 successive months for all conditional licenses and renewals combined.
- A provider holding a conditional license for a service shall demonstrate progress toward compliance.
- A provider holding a conditional license shall not add services or locations during the conditional period.
- A group home or community residential service provider shall be limited to providing services in a single location, serving no more than four individuals during the conditional period.

What's Next? Onsite Reviews

- The department conducts announced and unannounced onsite reviews of all new providers and services to determine compliance with the DBHDS regulations
- The department also conducts unannounced onsite reviews of licensed providers and each service at any time and at least annually to determine compliance with these regulations.
- The annual unannounced onsite reviews are focused on preventing specific risks to individuals, including an evaluation of the physical facilities in which the services are provided.
- The department may also conduct announced and unannounced onsite reviews at any time as part of the investigations of complaints or incidents to determine if there is a violation of regulations.

What's Next? Renewing the License

- "12VAC35-105-40. Application requirements.
C. The provider shall confirm his intent to renew the license prior to the expiration date of the license and notify the department in advance of any changes in service or location."
- A renewal application and proof of SCC must be submitted via CONNECT prior to the expiration of the license.
- For this document to be accepted with your application, your SCC registration should be in an "Active" Status on the SCC website. Additionally, the name on the license and the name of the organization on the SCC website should match. If the license is not active or the name does not match; then the renewal will not be processed, and the license will be at risk for closure.

What's Next? Onsite Reviews

- In most cases, onsite reviews require a review of individual records, personnel records and an inspection of the physical environment.
- For onsite reviews, it is imperative that the provider identify a designated staff who is available any time for such reviews.
- This designated staff should be able to quickly provide a roster of individuals and employees/contractors.
- Additionally, the designated staff should have access to all individual records, personnel records, the licensed location and be able to answer questions.
- Providers are expected to maintain all records in a consistent and organized manner.

What's Next? The Annual License

- If during the conditional period, the provider has provided services, and is able to demonstrate compliance with all the applicable regulations then an annual license will be issued.
- If during the conditional period, there are significant concerns, and the provider is unable to demonstrate implementation of approved CAPs then this may be grounds to deny the provider an annual license.
- If during the conditional period the provider has not served any individuals or the provider is unable to demonstrate compliance with applicable regulations which includes at a minimum: completion of an initial and comprehensive assessment, an initial and comprehensive ISP, quarterly reviews and demonstrate implementation of services through progress notes or other documentation, then this is grounds to deny the annual license.
- It is extremely important that your business plan outlines the steps for acquiring admissions.
- If a provider on a conditional license is denied an annual license they will be closed. If the provider would like to reapply, they can do so by following the initial application process.

Wrap Up

Thank you for attending this orientation!

Reminders:

- FAQ will be sent after the training.
- Slides will also be sent out.

Wrap Up: Post Assessment

Help us help you!

- Please click this link to complete the Post Assessment:
[Post Assessment - Initial Applicant Orientation](#)
- Scan this QR code to complete the Post Assessment on your mobile device:



- Completing the Post Assessment provides an opportunity for you to share your feedback and assists us with improving future training events.

Resources Referenced In This Presentation

- [Office of Licensing Website](#)
- [DBHDS Website](#)
- [Rules and Regulations For Licensing Providers by the Department of Behavioral Health and Developmental Services \[12 VAC 35 - 105\]](#)
- [Regulations for Children's Residential Facilities \[12VAC35-46\]](#)
- [Guidance Documents](#)
- [Current Prioritization List](#)
- [DBHDS CONNECT Provider Portal System](#)
- [Video-How Do I Know if My Application is Submitted?](#)
- [Department of Medical Assistance Services](#)
- [HCBS Toolkit](#)
- [Home and Community-Based Services \(HCBS\) Settings Rule \(virginia.gov\)](#)
- [CMS Home and Community-Based Services \(HCBS\) Regulations: Developmental Disability \(DD\) Waivers \(virginia.gov\)](#)
- [Department of Social Services Website](#)
- [Request for Search of the Child Protective Services \(CPS\) Central Registry](#)
- [Barrier Crimes List for DBHDS Direct Consumer Care Providers \(Effective January 1, 2023\)](#)



Additional CONNECT Resources



- [How Do I Register for the CONNECT Provider Portal to Begin the Initial Application Process?](#)
- [How do I Login to CONNECT?](#)
- [How Do I Initiate a New Application?](#)
- [How Do I Submit My Requirements?](#)
- [How Do I Know if I Need to Respond to a Deficient Requirement?](#)
- [How Do I Know if My Application Is Submitted and on the Waitlist?](#)
- [CONNECT Blast Newsletter \(June 2023\)](#)



Thank you!