

Proposed Changes to Autism State Plan

Applied Behavioral Analysis (ABA) is a type of therapy that can improve social, communication, and learning skills through positive reinforcement. Many experts consider ABA to be the gold-standard treatment for children with Autism Spectrum Disorder (ASD) and other developmental conditions, but it can be used in the treatment of other conditions as well. The Developmental Disabilities Program is proposing the following changes to the Autism Treatment State Plan and ABA services to expand access to and reduce delay in receiving these services.

- 1. Current practice: ABA services are provided to Medicaid eligible members, up to age 21, with a diagnosis of ASD. Proposed change: Continue to provide ABA services to Medicaid eligible members, up to age 21, with a diagnosis of ASD, but expand services to also include Medicaid Members, up to age 21, with a diagnosis of Intellectual and/or Developmental Disability (defined as having been deemed eligible for the receipt of state sponsored developmental disabilities services). Further expansion of the program is proposed to include Medicaid eligible members with a primary diagnosis of Serious Emotional Disturbance (SED), who are up to 17 years of age and younger or up to 20 years of age if they demonstrate attendance at an accredited secondary school.
- Current Practice: All ABA services must be prior authorized by the Department prior to a member receiving any services by a Board Certified Behavior Analyst (BCBA).
 Proposed Change: No prior authorization will be needed before a member can begin receiving ABA services. The ABA service provider merely needs to submit documentation notifying the Department of the intent to initiate services.
- 3. Current Practice: A Medicaid member must have been diagnosed with ASD by a physician or psychiatrist prior to receiving ABA services under the Autism State Plan.
 Proposed Change: A member may begin receiving ABA services under a provisional qualifying diagnosis provided by a licensed mental health professional, psychologist, nurse practitioner, or physician. It is important to note though that the qualifying diagnosis must be confirmed by a qualified health care professional with expertise in the diagnostic area for continued ABA services after the initial 180 calendar days and/or units of service package has been used.
- 4. Current Practice: Only a certain number of units of service under each of three billable code are allowed within the authorized period of 180 calendar days.

Proposed Change: A package of 1,260 units of service (each unit = 15 min.) to be used over 180 calendar days will be available to the member before any authorization is required. These units are applied to an expanded list of billable codes. Currently, three CPT codes, 97151, 97153 and 97155, are available for billing services. We propose expanding billable codes to eight CPT codes, 97151 through 97518. These codes may be used as the ABA service provider sees fit to meet the needs of the individual member. Additional units of service in a package of 1,260 may be authorized before the 180 calendar day time period is up if the all the units have been used and the member needs continued services.

- 5. Current Practice: ABA treatment must be provided in the home setting or other community settings that are a part of the member's typical day and parents or caregivers must always be present and actively participating.
 Proposed Change: The parent or guardian/caregiver will not be required to be present for treatment being received by the member, only that which is specifically targeted to parent or guardian/caregiver training. Services may be provided in whatever setting the ABA service provider feels is appropriate.
- Current Practice: Vineland testing and scores are the only assessment tool used to demonstrate the level of functional impairment required for initial and subsequent access to services.
 Proposed Change: Functional impairment criteria have been broadened and modified to align with accepted practices in other behavioral health services. Additionally, the ABA service provider may now choose the assessment tool they feel is most useful and beneficial in measuring and tracking a member's progress.