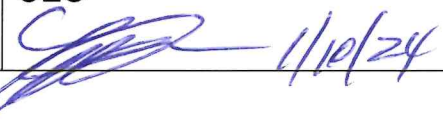


CHAPTER Service Delivery	CHAPTER 02	SECTION 004	SUBJECT 150
SECTION Clinical and Support Services		DESCRIPTION Autism Benefit	
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APPLICATION:

<input checked="" type="checkbox"/> CMH Staff	<input type="checkbox"/> Board Members	<input type="checkbox"/> Provider Network	<input checked="" type="checkbox"/> Employment Services Providers
<input checked="" type="checkbox"/> Employment Services Provider Agencies	<input checked="" type="checkbox"/> Independent Contractors	<input checked="" type="checkbox"/> Students	<input checked="" type="checkbox"/> Interns
<input checked="" type="checkbox"/> Volunteers	<input checked="" type="checkbox"/> Persons Served		

POLICY:

Lapeer County Community Mental Health (LCCMH) provides Behavioral Health Treatment (BHT) services for Applied Behavior Analysis (ABA), to children under 21 years of age with Autism Spectrum Disorders (ASD).

STANDARDS:

- A. Medical necessity and recommendation for BHT services is determined by a physician, or other licensed practitioner working within their scope of practice under Michigan state law utilizing valid evaluation tools.
- B. Direct patient care services treating or addressing ASD under the state plan are available to children under 21 years of age as required by the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) benefit.
- C. Eligibility determination and recommendation for BHT must be performed by a qualified licensed practitioner through direct observation utilizing the Autism Diagnostic Observation Schedule-second Edition (ADOS-2), comprehensive clinical interview such as the Autism Diagnostic Interview-Revised (ADI-R) and symptom rating using the Developmental Disabilities Children’s Global Assessment Scale (DD-CGAS) within 30 calendar days of the assessment.

CHAPTER Services Delivery	CHAPTER 02	SECTION 004	SUBJECT 150
SECTION Clinical and Supports Services		DESCRIPTION Autism Benefit	

- D. The Michigan Department of Health and Human Services (MDHHS) Behavioral and Developmental Disabilities Administration (BHDDA) makes the final eligibility determinations for ABA services. The Medicaid Provider Manual is used as the reference point for guidance in diagnosis criteria.
- E. BHT services do not include special education and related services defined in the Individuals with Educations Improvement Act of 2004 (IDEA) which are available to the beneficiary through local education agency.
- F. Screenings for ASD may occur during an EPSDT well-child visit or as part of an assessment being conducted by the Region 10 Prepaid Inpatient Health Plan (PIHP) access department, a LCCMH clinician or other contracted provider through community partners (such as education system).
 - 1. Approved screening tools are:
 - a. Modified Checklist for Autism in Toddlers (M-CHAT), validated for toddlers 16 through 30 months of age.
 - b. Social Communication Questionnaire (SCQ) validated for individuals older than four years of age with a mental age greater than two years of age.
- G. Other MDHHS approved tools may be utilized to determine diagnosis and medical necessity service recommendations, such as cognitive/developmental tests, adaptive behavior tests and/or symptom monitoring.
- H. The Case Manager processes and completes referrals, evaluations, re-evaluations and disenrollments from the ABA benefit and send to Region 10 PIHP liaison.
- I. The Case Manager manages documents being uploaded to Microsoft Teams for notification to Region 10 PIHP.
- J. LCCMH provides performance measurement and data in a timely matter upon the request of Region 10 PIHP.
- K. ABA services are administered under the direction of a state licensed and Board Certified Behavior Analyst (BCBA) with at least one-year experience in diagnosing and treating ASD.

CHAPTER Services Delivery	CHAPTER 02	SECTION 004	SUBJECT 150
SECTION Clinical and Supports Services		DESCRIPTION Autism Benefit	

- L. LCCMH ensures other medically necessary assessments for other functional domains are provided. These are performed by qualified professionals to determine service needs leading up to the development of the Individual Plan of Service (IPOS).
- M. Behavioral assessments is completed minimally every six months and can include but not limited to direct observation, record review, data collection and analysis by a qualified provider. Assessments must include the current level of functioning using validated data collection and documented with ongoing measurement of improvement including the application of behavioral outcome tools. Approved behavioral outcome tools include:
1. Verbal Behavior-Milestones Assessment and Placement Program (VB-MAPP)
 2. Assessment of Basic Language and Learning Skills-Revised (ABLLS-R)
 3. Assessment of Functional Living Skills (AFLS)
 4. Promoting Emergence of Advanced Knowledge (PEAK)/PEAK LIFE
 5. Social Skills Checklist
- N. With prior authorization obtained by MDHHS, behavioral observation and direction may be provided using tele-practice services.
- O. Treatment methodology utilizes an ethical, positive approach to behaviors based on a comprehensive bio-psychosocial assessment.
- P. Services are typically provided in the home, community or clinical setting as appropriate for person served and family.
- Q. Individualized ABA behavior plans with youth and family based strengths is part of the IPOS and identifies measurable, achievable and realistic goals targeting specific behaviors to increase functioning skills and independence.
- R. IPOS is reviewed by the planning team, including BCBA or other qualified provider and parent(s)/guardian(s) minimally every three months. Documenting specific service level changes, interventions, hours to be provided to the individual weekly.
- S. Families are provided and participate in family training as dictated by MDHHS and as medically necessary.

CHAPTER Services Delivery	CHAPTER 02	SECTION 004	SUBJECT 150
SECTION Clinical and Supports Services		DESCRIPTION Autism Benefit	

- T. BCBA provides strategies for reasonable accommodations and the use of assistive equipment in communications, environmental control, , activities of daily living, employment, recreation, sensory needs, transportation, mobility and destination training.
- U. Assistive technology planning is individualized to the person's interests, involve family input and evaluation of home and other common environments. Training is provided as needed to family, person served and staff.
- V. Re-evaluations are completed every three years from the first date of most recent evaluation to assess individual's eligibility criteria utilizing the ADOS-2 and DD-CGAS, and other assessment tools as necessary to determine medical necessity and recommended services.
- W. Results of all evaluations are appropriately delivered to the individual and parent(s)/guardian(s) in a face-to-face session when appropriate. The Case Manager submits evaluation information to Region 10 PIHP within 60 days of the date the ADOS-2 was administered.
- X. Discharge/disenrollment from ABA services is determined by a qualified ABA professional. When able, an exit ADOS-2 is completed as part of the discharge process and submitted to the Region 10 PIHP.

PROCEDURES:

A. Referrals

1. LCCMH receives referrals from Region 10 PIHP Access Center or at point of initial intake appointment.
2. LCCMH ensures the individual is younger than 21 years of age with active Lapeer Medicaid.
3. LCCMH staff documents screening tool utilized to prompt referral for evaluation, and ensures a comprehensive diagnostic evaluation is completed with an independent evaluator within 30 days of referral date.

CHAPTER Services Delivery	CHAPTER 02	SECTION 004	SUBJECT 150
SECTION Clinical and Supports Services		DESCRIPTION Autism Benefit	

4. LCCMH staff receives comprehensive diagnostic evaluation, documents findings by completing Region 10 PIHP Autism Benefit Case Action Form (ABCAF), and submits to Region 10 PIHP through Microsoft Teams.
 - a. The ABCAF is submitted to Region 10 PIHP for consideration of initial evaluations within 30 days.
 - b. The ABCAF is also submitted to Region 10 PIHP for consideration of re-evaluations within 30 days.

B. Initial Evaluations/Re-evaluations

1. An independent evaluator completes a comprehensive diagnostic evaluation using the ADOS-2, prepares report findings and submits results to LCCMH.
2. The independent evaluator conducts a feedback session with parent(s)/guardian(s).
3. The independent evaluator conducts the ADOS-2 every three years or when requested by parent/caregiver or qualified behavioral health professional to assess for continued ABA benefit services.

C. Region 10 PIHP Autism Coordinator/Designee

1. Reviews the ABCAF for completion and criteria, completes disposition on the form, and returns a copy to LCCMH Case Manager.

D. LCCMH Service Level ABA Assignment

1. Children's supervisor identifies a Case Manager to monitor, link, advocate, support and coordinate ABA services and other services identified through the IPOS.
2. Autism supervisor assigns case to a Board Certified Behavior Analyst (BCBA) to conduct a behavioral assessment and develop a behavioral plan, and coordinates with the Case Manager to be incorporated in the IPOS.
3. Case Manager reviews behavioral plan of care and IPOS for content and criteria, ensures authorizations entered for ABA services are congruent with recommendations from ABA qualified provider.

CHAPTER Services Delivery	CHAPTER 02	SECTION 004	SUBJECT 150
SECTION Clinical and Supports Services		DESCRIPTION Autism Benefit	

4. Case Manager assures the intensity range of ABA services are maintained within +/- 25% variance of hours assigned. MDHHS requirement is 75% of hours approved for ABA services.
5. Records plan of care completion dates and notifies Region10 PIHP of case closure or re-evaluation.
6. Continues to monitor all service recommendations in the IPOS and updates minimally every 6 months to match with BCBA behavior plan.

E. Discharge/Disenrollment

1. Case Manager ensures individual completes an exit ADOS-2, if family is willing.
2. Case manager notifies Region 10 PIHP of any disenrollment through monthly reporting.

F. Inactivity

1. Case Manager ensures the reason for inactivity is not related to provider service capacity.

DEFINITIONS:

Autism Diagnostic Observation Schedule (ADOS): The Autism Diagnostic Observation Schedule (ADOS) is a semi-structured assessment of communication, social interaction, and play (or imaginative use of materials) for individuals suspected of having Autism or other Pervasive Developmental Disorders

Autism Diagnostic Observation Schedule-Second Edition (ADOS-2): An instrument used to assess and diagnose Autism Spectrum Disorders, which provides several modules for use across various age, developmental and language skill levels.

Autism Diagnostic Interview-Revised (ADI-R): is a structured interview conducted with the parents of individuals who have been referred for the evaluation of possible Autism or Autism Spectrum Disorders.

Autism Spectrum Disorders (ASD): A developmental disability that can cause substantial impairments in a person's behaviors, social, and communication skills. Signs of these

CHAPTER Services Delivery	CHAPTER 02	SECTION 004	SUBJECT 150
SECTION Clinical and Supports Services		DESCRIPTION Autism Benefit	

impairments usually occur before a child turns three years old, although children are often diagnosed between ages three and five.

Applied Behavioral Analysis (ABA) Services: refers to the science of analyzing socially significant behavior and producing behavior change by modifying related environmental variables. ABA services may be used to address issues relevant to those with Autism Spectrum Disorder including, but not limited to, language acquisition, peer interactions and social skills, following routines, self-help and daily living skills, and reducing challenging behaviors. There are two service levels within the Behavioral Health Treatment, Applied Behavioral Analysis model:

- **Comprehensive Behavioral Intervention (CBI):** is the level of ABA service intensity applying to individuals with an ADOS-2 score, which falls within the classification range of Autism. This level of intensity has a recommended average number of service hours ranging from 16-25 per week.
- **Focused Behavioral Intervention (FBI):** is the level of ABA service intensity applying to individuals with an ADOS-2 score, which falls within the classification range of Autism. This level of intensity has a recommended average number of service hours ranging from 5-15 per week.

Assessment of Basic Language and Learning Skills-Revised (ABLLS-R): A tool for assessing skills in children with language and learning deficits and is most commonly used in the process of the development of a behavioral program for children in the autism spectrum.

Behavioral Health Treatment (BHT): Medicaid covered services under the umbrella of evidence-based practices related to behavioral health services for Early and Periodic Screening, Diagnosis and Treatment benefit. Currently the only evidence-based treatment modality within this policy as part of BHT is Applied Behavioral Analysis.

Board Certified Behavior Analyst (BCBA): An LP, LLP, or professional with at least a Master's degree in a human service area approved by the Behavior Analyst Certification Board who has completed training and certification in Applied Behavior Analysis.

Board Certified Assistant Behavior Analyst (BCaBA): A professional with at least a Bachelor's degree in a human service area approved by the Behavior Analyst Certification Board who has completed training and certification in Applied Behavior Analysis.

Developmental Disabilities Children's Global Assessment Scale (DD-CGAS): A tool providing clinician assessment of the individual's overall adaptive behavior and is anchored to domains often weak for children with ASD.

CHAPTER Services Delivery	CHAPTER 02	SECTION 004	SUBJECT 150
SECTION Clinical and Supports Services		DESCRIPTION Autism Benefit	

Modified Checklist for Autism in Toddlers (M-CHAT): A brief, initial screening tool, which is validated for toddlers 16 through 30 months of age.

Social Communication Questionnaire (SCQ): A brief, initial screening tool for children older than 4 years of age with a mental age greater than 2 years of age.

Verbal Behavior Milestones Assessment Placement Program (VB-MAPP): An assessment, skills-tracking system and curriculum guide to assess the language, learning and social skills of children with autism or other developmental disabilities.

REFERENCES/EXHIBITS:

- Michigan Department of Health and Human Services, Medicaid Provider Manual, Section 18-Applied Behavior Analysis
- Region 10 Policy: 05.03.10 Autism Waiver Benefit
- LCCMH Policy 02.001.15 Person Centered Planning

TH:js/lr