6.21 Applied Behavior Analysis (ABA)

DESCRIPTION OF SERVICES

Applied Behavior Analysis (ABA) is an evidence-based treatment for individuals diagnosed with Autism Spectrum Disorder (ASD). It includes behavioral techniques to increase pro-social behaviors such as communication, and reduce behaviors that may be harmful or interfere with the development and maintenance of social interactions or behaviors that may be harmful to self or others. ABA services shall be delivered in a home or community setting, including a clinic, when medically necessary.

The following ABA therapy services will be available to eligible individuals with ASD as outlined in COMAR 10.09.28:

- **ABA Assessment:** During the assessment and reassessment there is an evaluation of the participant's current level of functioning, skills deficits, and maladaptive behaviors using validated instruments; a treatment plan is also developed. The assessments and reassessments are administered to a child/adolescent by an ABA provider (Psychologist, BCBA- D or BCBA).
 - **ABA Assessment by Technician:** Administered as a follow-up assessment conducted in person by a RBT under the direction of a licensed psychologist, BCBA-D or BCBA.
 - Severe Behavior Assessment with four required components: Administered as a follow-up assessment conducted on a participant with specific, severed destructive behaviors in a structured, safe environment. A psychologist, BCBA-D or BCBA must be onsite with two or more BCaBAs or RBTs conducting the assessment. The participant is exposed to a customized series of social and environmental conditions using testing to determine events, cues, responses and consequences association with the destructive behavior.
 - Reassessment: Administered by a psychologist, BCBA-D or BCBA and evaluates progress toward each behavior treatment goal using objective, quantifiable measures and includes the results of validated instruments. Also includes a revision of the treatment plan based on progress and includes a clinical recommendation as to what level, if any, ABA services continue to be medically necessary.
- **ABA Treatment Planning:** ABA treatment planning is an ongoing indirect service performed by a psychologist, BCBA-D or BCBA. A maximum of 4 hours per month may be requested. ABA treatment planning may consist of:
 - Development and revision of the treatment plan and goals;
 - o Data analysis; and
 - Real-time, direct communication and coordination with the participant's other service providers.
- ABA Therapy: ABA therapy is the utilization of behavioral interventions designed in advance by a psychologist, BCBA-D or BCBA, who will provide supervision during a portion of the treatment. ABA therapy is most often administered by the BCaBA or RBT. ABA therapy may be delivered as:
 - Individual therapy administered face to face to a participant by an ABA provider (psychologist, BCBA-D, BCBA, BCaBA or RBT);

- Group therapy administered to multiple children/adolescents by an ABA provider (psychologist, BCBA-D, BCBA) or by a BCaBA or RBT utilizing a behavior intervention protocol designed in advance by a psychologist, BCBA-D or BCBA.
- Social skills group therapy administered in person to multiple participants by an ABA provider (psychologist, BCBA-D or BCBA); focus on social skills training and aimed at identifying and targeting individual participants' social deficits and maladaptive behaviors
- Severe behavior treatment with four required components is conducted on a
 participant with specific, severe destructive behaviors in a customized structured,
 safe environment. A psychologist, BCBA-D or BCBA must be *onsite* with the
 assistance of two or more BCaBAs or RBTs. Includes in person direction of two or
 more BCaBAs or RBTs eliciting behavioral effects exposing the participant to
 specific environmental conditions in treatment and modifies ineffective components
 of treatment.
- ABA Direction of Technician: ABA Direction of technician is the real-time monitoring, supervision and oversight of a BCaBA or RBT, delivered by a psychologist, BCBA-D or BCBA, while the BCaBA or RBT is delivering direct ABA therapy. Guidelines require the amount of direction be equal to at least 10 percent of the total amount of hours that direct ABA therapy is delivered. ABA direction of a technician can be provided directly or remotely. If approved to provide remote supervision, at least 25 percent of the supervision must be delivered in-person. When delivering remote supervision, providers must secure access to HIPAA compliant technology, which provides an auditory and visual connection between the above mentioned provider types.
- ABA Parent Training: ABA parent training is behavior treatment guidance that is provided in-

person with a participant's parent or caregiver, with or without the presence of the participant. During parent training, maladaptive behaviors and skills deficits are identified, then instructions are given to the parent or caregiver on how to utilize ABA treatments to reduce those maladaptive behaviors and skill deficits. ABA parent training may be delivered as:

- Individual parent training with or without the presence of the participant, administered by an ABA provider (psychologist, BCBA-D, BCBA or BCaBA); in person with a participant's parent or caregiver.
- Multiple-family group training administered by an ABA provider (psychologist, BCBA-D or BCBA) in person with parents or caregivers of multiple participants (up to eight participants) without the presence of participants.

SERVICE RULES

ABA services shall be delivered in a home or community setting, including a clinic, when medically necessary.

Clinical information that outlines medical necessity is required to support the need for initial and continuing ABA services, including:

- Confirmation of ASD diagnosis documented by ONE of the following:
 - A comprehensive diagnostic evaluation (CDE) completed within the last 3 years confirming an ASD diagnosis and a referral outlining the need for ABA services written within the last 6 months by one of the following qualified health care professionals (QHCP):

- Pediatricians
- Developmental Pediatricians
- Pediatric Neurologists
- Child Psychiatrists
- Clinical Psychologists
- Nurse Practitioners
- Neuropsychologists

OR

• A CDE completed more than 3 years ago accompanied by a current Beacon Health Options form: *Clinical Review for ASD and ABA*

OR

- A diagnostic report completed by a non-QHCP (i.e., school psychologist or speech language pathologist) within the last 3 years accompanied by the Beacon Health Options form: *Physician Confirmation of ASD Diagnosis*
- Written and signed referral from a QHCP for ABA therapy dated within the last 6 months.

LIMITATIONS

The ABA provider may not bill Maryland Medical Assistance program or the participant for the following services:

- Rendering services when measurable functional improvement or continued clinical benefit is not met, and treatment is not deemed necessary;
- ABA services not preauthorized by Beacon Health Options;
- Services rendered beyond the provider's scope of practice;
- Services rendered but not documented in accordance with COMAR 10.09.28.04F;
- Services rendered by mail or telephone;
- Services that are vocationally or recreationally based;
- Respite services;
- Services that duplicate a service that a participant is receiving in another medical care program;
- Services provided in a 24-hour, 365-day residential program funded with federal, State or local government funds;
- Nonconventional settings such as camps, spas or resorts;
- Custodial care;
- Travel to and from site of service; and
- Broken or missed appointments.

The participant's parent or caregiver shall:

- Be trained to reinforce ABA services for the participant in a clinically effective manner; and
- Be present or available in the setting where services are being provided at all times, even if not directly participating in the services.

Relevant limitations of service are listed in COMAR 10.09.28.05

PARTICIPANT ELIGIBILITY

To qualify for ABA services, a participant must have active Maryland Medicaid, be less than 21 years old, live in the community, exhibit the presence of maladaptive behavior or developmental skills deficits that significantly interferes with home, school, or community activities, and be medically stable. The participant must have a confirmed diagnosis of ASD by a QHCP following the above outlined service rules.

PROVIDER ELIGIBILITY

All ABA providers must have a National Provider Identification (NPI), be enrolled as a Maryland Medicaid provider and meet all necessary provider qualifications and conditions for participation as set forth in COMAR 10.09.36.03 and outlined per COMAR 10.09.28. In addition to being an ABA provider, the provider shall be licensed, certified, or otherwise legally authorized to provide ABA services in the jurisdiction in which the services are provided and may not have current disciplinary actions or sanctions against their license.

A Board Certified Behavior Analyst/Board Certified Behavior Analyst - Doctoral (BCBA/BCBA-D) rendering ABA services requires current certification through the Behavior Analyst Certification Board (BACB) and must be licensed by the State of Maryland Board of Professional Counselors and Therapists.

A Board Certified Assistant Behavior Analyst (BCaBA) rendering ABA services must have current certification through the BACB, work under the supervision of a psychologist, BCBA-D or BCBA and have the supervisory relationship documented in writing.

A Registered Behavior Technician (RBT) rendering ABA services must be 18 years or older and have a high school degree or national equivalent. An RBT must be registered by the BACB. They must work under the supervision of a psychologist, BCBA-D, or BCBA and have the supervisory relationship documented in writing.

Licensed Psychologist rendering ABA services are required to attest to the following educational coursework and supervisory experience outlined by Medicaid as part of their enrollment as an ABA provider:

Coursework: Master's degree or doctoral degree in psychology that includes, at a minimum, 40 coursework hours in behavior analysis, behavior management theory, techniques, interventions and ethics, and autism spectrum disorders; *and*

Supervisory experience*: At a minimum, one year (1,500 hours) of supervised clinical experience inclusive of:

a. Minimum one year direct care services to children; and

b. Minimum one year direct care utilizing applied behavior analysis, behavior techniques, interventions and monitoring of behavior plan implementation; *and*

c. Experience must have included work with individuals with ASD.

*The Behavior Analyst Certification Board (BACB) outlines additional supervisory requirements including documentation, an 8-hour training course, and oversight by a Requirements Coordinator. For more information and to complete the *Noncertified Supervisor Form*, please see the RBT Supervision and Supervisor Requirements at <u>https://www.bacb.com/information-for-supervisors/.</u>

COMBINATION OF SERVICES

Relevant limitations are listed in COMAR 10.09.28.

For more information on the combination of services, please see the Beacon website at http://maryland.beaconhealthoptions.com/autism/info/Combination-of-Services-Rules-Updated-01-01-2019.pdf

AUTHORIZATION PROCESS

All services within ABA require preauthorization. Preauthorization requests are submitted through ProviderConnect ensuring all necessary supporting documents are attached with the initial authorization request. Once the initial request has been authorized, the provider has 60 days to complete the initial assessment and develop a treatment plan.

Once the initial assessment is complete, the provider should submit a request for treatment preauthorization including all supporting treatment plan documentation via ProviderConnect. Ongoing ABA service authorization requests must be submitted at least two weeks, but no more than 30 days, prior to the treatment authorization expiration. All authorization requests are subject to a BCBA peer review process. In the event that any clarification or changes are needed, the reviewing BCBA will communicate via email and/or telephone to the requesting provider. A resubmission of the updated documents will be required prior to the authorization of continued ABA treatment. This includes updated documentation outlining the recipient's most current clinical review in the event that a participant's CDE is past three years at the time of continued treatment request. Once authorization is given, an electronic authorization letter will be uploaded to ProviderConnect including all relevant authorization information. This will serve as your authorization notification from Beacon Health Options. Please allow 24 to 48 hours for the authorization status and letter to be uploaded in the ProviderConnect system.

CLAIMS REIMBURSEMENT PROCESS

Claims for unauthorized service codes will be denied.

Claims for unauthorized rendering providers will be denied.