

OFFICE OF MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES BULLETIN

DEPARTMENT OF HUMAN SERVICES		ES SERVICES BULLETIN
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		BY:
Applied Behavioral Analysis Using Behavioral Specialist Consultant-Autism Spectrum Disorder and Therapeutic Staff Support Services		Dennis Marion Deputy Secretary Office of Mental Health and Substance Abuse Services

PURPOSE:

The purpose of this bulletin is to inform Behavioral Health Managed Care Organizations (BH-MCOs) and providers of the procedures for requesting Applied Behavioral Analysis (ABA) using Behavioral Specialist Consultant-Autism Spectrum Disorder (BSC-ASD) and Therapeutic Staff Support (TSS) services, the minimum qualifications needed to provide ABA using BSC-ASD and TSS services, and the procedure code and modifier combinations that can be used to bill for services when BSC-ASD and TSS services are used by appropriately qualified individuals to provide ABA.

SCOPE:

This bulletin applies to all BH-MCOs and providers enrolled in the Medical Assistance (MA) Program who render behavioral health rehabilitation services (BHRS) to MA beneficiaries under 21 years of age in the fee-for-service (FFS) and managed care delivery systems.

BACKGROUND:

ABA is a treatment approach available for providing services to individuals diagnosed with ASD. ABA is available to children and adolescents with ASD though Behavioral Specialist Consultant (BSC) services and TSS services.

Act 62 of 2008 defines ABA as the design, implementation and evaluation of environmental modifications, using behavioral stimuli and consequences, to produce socially significant improvement in human behavior or to prevent loss of attained skill or function, including the use of direct observation, measurement, and functional analysis of the relations between environment and behavior.

DISCUSSION:

ABA is used to develop needed skills (behavioral, social, communicative, and adaptive functioning) through the use of reinforcement, prompting, task analysis, or other appropriate

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interventions in order for a child or adolescent to master each step necessary to achieve a targeted behavior. It can also be used to reduce or ameliorate the presence of a child's or adolescent's maladaptive or restricted behaviors, impairments in communication, or impairments in social interactions or relationships or assist a child or adolescent with achieving or maintaining the skills needed for maximum functional capacity in performing activities of daily living. A child or adolescent does not have to present with externalizing or negative behaviors in order for ABA to be medically necessary.

ABA includes:

- Completing comprehensive assessments at the beginning of treatment that will inform selection of targeted behaviors or skill deficits to establish treatment goals, including
 - Selecting behaviors or skill deficits to target that are developmentally and ageappropriate, socially significant, and strengths-based.
 - Describing behavior in precise terms so that it can be observed and measured.
 - Collecting indirect and direct data on the targeted behaviors. This may include completing standardized supplementary assessments as necessary that match the skill deficit or behavioral need, such as social deficits, communication deficits or deficits in self-regulation, adaptive or self-help areas of development.
- Describing and prioritizing, with team input, the current and future value (or social importance) of behavior(s) or deficits targeted for treatment.
- Collecting, quantifying, and analyzing direct observational data on behavioral or deficit targets during treatment to maximize and maintain progress toward treatment goals.
- Designing treatments for problem behaviors that link the function of (or the reason for) the behavior with the intervention strategies and develop appropriate replacement and/or desired behaviors, including:
 - Designing individualized, evidence-based treatment plans that utilize elements of behavior change.
 - Designing treatment plans that encourage the child or adolescent to participate in treatment, using an understanding of their likes and dislikes, as well as natural motivators and reinforcements available in natural settings.
- Designing treatment methods that can be implemented repeatedly, frequently, and consistently across environments, including natural settings.
- Conducting ongoing assessment (including data collection and visual display) to quantify changes in behavior.
- Adjusting and changing interventions based on the results of the ongoing assessment.

 Delivering direct support and training to family members and other individuals that implement the treatment plan to promote optimal behavioral changes.

PROCEDURE:

BSC-ASD services and TSS services are used to provide ABA to children and adolescents with ASD. The individual providing BSC services designs or evaluates a behavior modification intervention component of a treatment plan. The treatment plan can be implemented by a TSS worker.

In the FFS delivery system, TSS services are prior authorized. BH-MCOs may require prior authorization of both TSS and BSC-ASD services.

Requests for prior authorization of ABA services using BSC-ASD or TSS services for children or adolescents with ASD are to be reviewed using the guidelines included in OMHSAS 16-_____. If a request for prior authorization of ABA using BSC-ASD or TSS services includes a prescription for ABA that does not differentiate between BSC-ASD and TSS services or does not include the specific number hours per week of BSC-ASD services and TSS services needed to deliver ABA, additional information may be requested.

For FFS providers, prior authorization requests for TSS services to provide ABA may be submitted online, by telephone, or faxed to the Department. Providers should contact the FFS Provider Service Center at 1-800-537-8862, Monday through Friday 8:00 am to 4:30 pm if they have a question about submitting requests for service authorizations.

Providers seeking to provide services to a child or adolescent enrolled in a BH-MCO, should contact the BH-MCO for information on the prior authorization process or refer to their provider handbook for additional details regarding prior authorization of services.

<u>Qualifications of Individuals and Providers That Use BSC-ASD and TSS Services to</u> Provide ABA

In an effort to ensure that the individuals that are using BSC-ASD and TSS services to provide ABA to children and adolescents with ASD have the requisite knowledge and skills to provide ABA, the Department has issued several bulletins concerning requirements that apply to individuals who deliver ABA. In addition, the Department has created a form that must be completed by individuals using BSC-ASD services to deliver ABA and any individual that oversees the implementation of a treatment plan that includes ABA interventions that confirms that the individual has knowledge and skills to provide ABA.

Qualifications of Individuals Providing ABA Using BSC-ASD Services

As set forth in OMHSAS-14-02, "Enrollment and Payment of Licensed Providers that Provide Behavior Specialist Consultant Services to Children with Autism Spectrum Disorders," issued May 23, 2014, in order to receive payment for providing BSC-ASD services to children and adolescents with ASD, an individual must either be a licensed behavior specialist or have a license whose scope of practice includes the diagnostic assessment or treatment of ASD and must directly provide the BSC-ASD services.

Additionally, as set forth in OMHSAS-16-04, "Training Requirements for Licensed Behavior Specialists Who Use Behavioral Specialist Consultant-Autism Spectrum Disorder services to Provide Applied Behavioral Analysis," issued April 26, 2016, individuals who apply for a behavior specialist license after May 15, 2016 and are planning to use BSC-ASD services to provide ABA to children and adolescents with ASD and who meet the training requirements for the behavior specialist license through trainings approved by the Bureau of Autism Services or the Behavior Analyst Certification Board must complete at least 45 hours of training that address ABA.

In addition to holding an appropriate license, if a Behavioral Specialist Consultant provides services that includes ABA to a child or adolescent with ASD, the Behavioral Specialist Consultant must also confirm that he or she has the knowledge and skills to provide ABA using the *Confirmation of Knowledge and Skills to Provide Applied Behavioral Analysis* form, which is attached as Attachment I to this bulletin. The completed *Confirmation* form must be kept by the provider in the personnel file of the individual providing BSC-ASD services and made available upon request by a BH-MCO or the Department.

Qualifications of Individuals Providing ABA Using TSS Services

TSS workers who implement treatment plans that include ABA for children or adolescent diagnosed with ASD must receive training in ABA so that they understand the basic principles of ABA and are able to carry out the specific procedures and techniques used in the treatment plans they are implementing.

As set forth in OMHSAS-16-02, "Training and Supervision Requirements for Therapeutic Staff Support Workers that Implement Treatment Plans that Include Applied Behavioral Analysis," issued March 11, 2016, the minimum required hours of training for new TSS workers who serve children or adolescents diagnosed with ASD and implement treatment plans that includes ABA are 6 hours of training in ABA prior to working alone with children or adolescents and an additional 6 hours of training in ABA within the first 6 months of working with children or adolescents. In addition, TSS workers who serve children or adolescents diagnosed with ASD and who are currently implementing a treatment plan that includes ABA must complete a minimum of 6 hours of training in ABA by October 10, 2016. If a TSS worker is not a new TSS worker and is not currently implementing a treatment plan that includes ABA, the TSS worker must complete at least 6 hours of training in ABA prior to implementing a treatment plan that includes ABA. Finally, OMHSAS-16-02 requires that TSS workers receive at least 6 hours of training in ABA every year.

Qualifications of Providers That Use BSC-ASD and TSS Services to Provide ABA

BHRS providers that use BSC-ASD services and TSS services to provide ABA to children and adolescents with ASD must use individuals to provide services who have skills and knowledge related to the provisions of ABA. BHRS providers must attest that the individuals that provide BSC-ASD services or who otherwise oversee the implementation by TSS workers of treatment plans that include ABA have completed a *Confirmation of Knowledge and Skills to Provide Applied Behavioral Analysis* form, which is attached as Attachment I to this bulletin. In addition, BHRS providers must attest that they use TSS workers who understand the basic

principles of ABA and have received training to enable them to carry out the specific procedures and techniques used in the treatment plans they are implementing. As a result, BHRS providers must complete an *Attestation for Behavioral Health Rehabilitation Services Providers that Provide Applied Behavioral Analysis Using Behavioral Specialist Consultant-Autism Spectrum Disorder and Therapeutic Staff Support Services,* which is attached as Attachment II to this bulletin. If the provider participates in a BH-MCO's network, the provider should provide a copy of the completed *Attestation* form to the BH-MCO. If the provider serves children or adolescents in the FFS system, the provider should be prepared to make a completed Attestation form available upon request by the Department.

Enrollment of Providers Using BSC-ASD and TSS Services to Provide ABA

Individuals who are licensed as a behavior specialist or have another professional license whose scope of practice includes the diagnostic assessment or treatment of ASD, may enroll in the MA Program to provide BSC-ASD services. Providers that are licensed to provide outpatient clinic, family-based mental health, or partial hospitalization services may use BSC-ASD and TSS to provide ABA. In addition, entities that do not hold a license to provide outpatient clinic, family-based mental health, or partial hospitalization services can also enroll to provide ABA to children or adolescents with ASD using BSC-ASD and TSS services based on the licenses held by the individuals that will be using BSC-ASD services to provide ABA.

Further information on how to enroll to provide BSC-ASD and TSS services can be found in the following bulletins:

MAB 01-94-01, "Outpatient Psychiatric Services for Children Under 21 Years of Age," issued January 11, 1994.

OMHSAS-14-02, "Enrollment and Payment of Licensed Providers that Provide Behavior Specialist Consultant Services to Children with Autism Spectrum Disorders," issued May 23, 2014.

OMHSAS-16-07, "Enrollment and Payment of Provider Entities that Do Not Have a License to Provide Outpatient, Partial Hospitalization, or Family Based Mental Health Services to Use Behavioral Specialist Consultant Services and Therapeutic Staff Support Services to Provide Applied Behavioral Analysis to Children with Autism Spectrum Disorders," issued June 6, 2016.

Payment for Providing ABA Using BSC-ASD and TSS Services

The Department has created new procedure code and modifier combinations that can be used when BSC-ASD and TSS services are being used to deliver ABA.

Individual practitioners and entities that use practitioners to provide BSC-ASD and TSS services that meet the qualifications described above to deliver ABA to children or adolescents with ASD in the FFS system must bill for ABA using the following procedure codes:

If BSC-ASD services are used by a licensed psychologist to provide ABA, use procedure code H0046 (HP) + (HA) to bill for BSC-ASD services.

If BSC-ASD services are used by a licensed provider other than a psychologist to provide ABA, use procedure code H0046 (HO) + (HA) to bill for BSC-ASD services.

If TSS services are used to implement a treatment plan that includes ABA, use procedure code H2021 (UB) + (HA).

BH-MCOs can use these new procedure code and modifier combinations or other code and modifier combinations. The procedure code and modifier combinations must separately designate ABA.

ATTACHMENTS:

Attachment I - Confirmation of Knowledge and Skills to Provide Applied Behavioral Analysis

Attachment II - Attestation for Behavioral Health Rehabilitation Services Providers that Provide Applied Behavioral Analysis Using Behavioral Specialist Consultant-Autism Spectrum Disorder and Therapeutic Staff Support Services

RELATED BULLETINS:

MAB 01-94-01, "Outpatient Psychiatric Services for Children Under 21 Years of Age 3," issued January 11, 1994

MAB 01-01-05, "Revisions to Policies and Procedures Relating to Mobile Therapy, Behavioral Specialist Consultant and Therapeutic Staff Support Services," issued June 1, 2001

OMHSAS-14-02, "Enrollment and Payment of Licensed Providers that Provide Behavior Specialist Consultant Services to Child with Autism Spectrum Disorders," issued May 23, 2014

OMHSAS-16-02, "Training and Supervision Requirements for Therapeutic Staff Support Workers that Implement Treatment Plans that Include Applied Behavioral Analysis," issued March 11, 2016

OMHSAS-16-04, "Training Requirements for Licensed Behavior Specialists Who Use Behavioral Specialist Consultant-Autism Spectrum Disorder Services to Provide Applied Behavioral Analysis," issued April 26, 2016

OMHSAS-16-07, "Enrollment and Payment of Provider Entities that Do Not Have a License to Provide Outpatient, Partial Hospitalization, or Family Based Mental Health Services to Use Behavioral Specialist Consultant Services and Therapeutic Staff Support Services to Provide Applied Behavioral Analysis to Children with Autism Spectrum Disorders," issued June 6, 2016.