13(c). Preventive Services

(2) Services to Treat Autism Spectrum Disorders Pursuant to EPSDT

A. Service Description

General Description. Services to treat autism spectrum disorders (ASD) pursuant to EPSDT are provided only to Medicaid beneficiaries (defined below as individual or individuals) under age twenty-one. Pursuant to 42 C.F.R. § 440.130(c), these services are provided as preventive services and are recommended by a physician or other licensed practitioner of the healing arts within his or her scope of practice under state law to prevent disease, disability, and other health conditions or their progression; prolong life; and promote physical and mental health and efficiency.

If the Level of Support Determination is signed by a qualified practitioner and recommends services consistent with a requested comprehensive diagnosis to pursue development of the behavioral plan of care or ASD treatment services, as applicable, then such evaluation report is the licensed practitioner’s recommendation of the services pursuant to 42 C.F.R. § 440.130(c).

1. Screenings Prior to Receiving ASD Treatment Services. These screenings are covered under the Physician Services, Other Licensed Practitioner, or Clinic benefit category, as applicable.

<table>
<thead>
<tr>
<th>Service</th>
<th>Service Description</th>
<th>Qualified Practitioners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Screening</td>
<td>A review of the individual's overall medical and physical health, hearing, speech,</td>
<td>Medical Doctor (MD, OD)</td>
</tr>
<tr>
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<td>and vision, including relevant information and must include an ASD screening tool</td>
<td>Physician’s Assistant (PA)</td>
</tr>
<tr>
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<td>as approved by the state agency. The screening is also designed to rule out medical</td>
<td>Nurse Practitioner (NP) or Advanced Practice</td>
</tr>
<tr>
<td></td>
<td>or behavioral conditions other than ASD, including those that may have behavioral</td>
<td>Registered Nurse (APRN)</td>
</tr>
<tr>
<td></td>
<td>implications and/or may co-occur with ASD.</td>
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</tbody>
</table>

The individual must receive a Medical Screening Evaluation indicating the possibility of an ASD before receiving a comprehensive Autism Diagnostic Evaluation, behavior assessment, or ASD treatment services including development of a behavioral plan of care.
### 2. Autism Diagnostic Evaluation:

<table>
<thead>
<tr>
<th>Service</th>
<th>Service Description</th>
<th>Qualified Practitioners including Credential/Licensure and Required Supervision (if applicable)</th>
<th>Tools Required</th>
</tr>
</thead>
</table>
| Autism Spectrum Disorders Diagnostic Evaluation | Purpose: Determine ASD diagnosis and medical necessity of services  
- Collaborate with the family to determine the professionals best suited for the child’s Evaluation and Diagnostic Team (EDT).  
- The Evaluation and Diagnostic Team (EDT) will conduct a coordinated multidisciplinary assessment using multiple tools to evaluate and diagnose (or confirm the diagnosis of) ASD. The evaluation will incorporate relevant medical information and identify the child’s strengths, needs, interests, and challenges as related to the child’s daily routines. Evaluations will also include an environmental assessment in order to determine interventions, supports, and resources that are appropriate for the child, as well as his or her family. | Clinical Oversight (The individual’s primary care provider OR one of the following to Administer Diagnostic Evaluation - Required)  
- Licensed Psychologist (PhD, PsyD, EDD)  
- Clinical Psychiatrist (MD)  
- Pediatrician (MD)  
- Licensed Independent Clinical Social Workers (LICSW)  
- Psychiatric Clinical Nurse Specialist (CNS)  
- Psychiatric Nurse Practitioner (NP) | ADOS-2 (for determining ASD)  
Vineland II (Behavior Assessment Tool for determining Medical Necessity) |
| Speech-Language Pathologist (Required)        | Speech and Language Pathology - Certificate of Clinical Competence (SLP-CCC)  
Speech and Language Pathology with Audiology Specialty (A-SLP-CCC) |                                                                                                                                                    |                                                                                                   |
| Occupational Therapist (OT) (Required if no PT) | Licensed Occupational Therapist (OTRL)  
Certified Occupational Therapy Assistant (COTA)  
  - Licensed Occupational Therapist (COTA) supervision required |                                                                                                                                                    |                                                                                                   |
### 13(c). Preventive Services

**Services to Treat Autism Spectrum Disorders Pursuant to EPSDT (continued)**

<table>
<thead>
<tr>
<th>Service</th>
<th>Service Description</th>
<th>Qualified Practitioners including Credential/ Licensure and Required Supervision (if applicable)</th>
<th>Tools Required</th>
</tr>
</thead>
</table>
|         | • The Evaluation and Diagnostic Team (EDT) will produce a collaborative report based upon findings of the initial evaluation including a Level of Support determination form (Attachment A). | Licensed Physical Therapist (PT) (Required if no OT)  
  • Licensed Physical Therapist (PT)  
  • Licensed Physical Therapist Aide (PTA)  
    o Licensed Physical Therapist (PT) supervision required | Additional practitioners may incorporated, as determined by the clinical oversight, as optional additions to a diagnostic team in the event that other possible disorders or conditions must be ruled out to successfully diagnose Autism |

The individual must receive a Medical Screening Evaluation and an Autism Diagnostic Evaluation determining medical necessity before receiving ASD treatment services.
13(c). Preventive Services
Services to Treat Autism Spectrum Disorders Pursuant to EPSDT (continued)

B. Service Components

<table>
<thead>
<tr>
<th>Service</th>
<th>Service Description</th>
<th>Qualified Practitioners including Credential/Licensure and Required Supervision (if applicable)</th>
<th>Care Plan Tools Allowed</th>
<th>Practices Required</th>
</tr>
</thead>
</table>
| Behavioral Program Design and Monitoring (BPDM) | The BPDM is:  
- Behavior Assessment; a clinical compilation of observational data, behavior rating scales, and reports from various sources (e.g., schools, family, pediatricians, and other sources) designed to identify the individual's current strengths and needs across developmental and behavioral domains  
- Development of a Care Plan including the following:  
  o measurable goals and expected outcomes to determine if ASD treatment services are effective;  
  o specific description of the recommended amount, type,  
  o Board Certified Behavior Analyst-Doctoral (BCBA-D)  
  o Board Certified Behavior Analyst (BCBA)  
  o Registered Behavior Analyst (RBA)  
  o Licensed Psychologist (PhD, PsyD, EDD)  
  o Social Worker  
    o Licensed Clinical Social Worker (LCSW)  
    o Licensed Independent Clinical Social Worker (LICSW) | Behavioral Interventionist  
- Board Certified Behavior Analyst-Doctoral (BCBA-D)  
- Board Certified Behavior Analyst (BCBA)  
- Registered Behavior Analyst (RBA)  
  RBA oversight required:  
  o BCBA-D,  
  o BCBA,  
  o Licensed Psychologist (PhD, PsyD, EDD)  
- Licensed Psychologist (PhD, PsyD, EDD)  
- Social Worker  
  o Licensed Clinical Social Worker (LCSW)  
  o Licensed Independent Clinical Social Worker (LICSW) | Essentials for Living  
- The Assessment of Basic Language and Learning Skills - Revised (ABLLS-R)  
- CARD assessment  
- Individualized Goal Selection Curriculum  
- VB-MAPP: Verbal Behavior Milestones Assessment and Placement Program  
- Autism Spectrum Rating Scale | Evidence-based practices based upon national standards set by the Autism Evidence-Based Practice Review Group, University of North Carolina at Chapel Hill. |
### 13(c). Preventive Services
**Services to Treat Autism Spectrum Disorders Pursuant to EPSDT (continued)**

| Service  | Service Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Qualified Practitioners including Credential/ Licensure and Required Supervision (if applicable) | Care Plan Tools Allowed                                                                                                                                                                                                                                                                                                                                 | Practices Required |
|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|
|          | frequency, setting and duration of ASD treatment services;  
|          | o Amount and type of caregiver (defined below) ongoing participation in the ASD treatment services necessary to maximize the success of the services.  
|          | • Trains and oversees the Skills Trainers who work directly with the participant on implementing their specific training plan protocol.  
|          | • The formal Care Plan is written in accordance with the objectives specified in the individual’s Participant Service Plan.  
|          | • Meet with the participant’s Skills Trainer and the parents at least monthly for the purpose of:  
|          | • Gilliam Asperger Disorder Scale  
|          | • Social Communication Questionnaire  
|          | • Wechsler Intelligence Scale for Children  
|          | • Stanford Binet  
|          | • Wechsler Individual Achievement Test II  
|          | • Yale Brown Obsessive Compulsive Scale  
|          | • Peabody Individual Achievement Test  
|          | • Kaufman Brief Intelligence Test 2  
|          | • Revised Children’s Manifest Anxiety Scale 2  
|          |                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                                                                                           |
## 13(c). Preventive Services

**Services to Treat Autism Spectrum Disorders Pursuant to EPSDT (continued)**

<table>
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<tr>
<th>Service</th>
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<th>Care Plan Tools Allowed</th>
<th>Practices Required</th>
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<tbody>
<tr>
<td></td>
<td>of reviewing progress on the formal training objectives and reviewing the need for changes in the formal Care Plan.</td>
<td></td>
<td>• Children’s Depression Inventory</td>
<td>Evidence-based practices based upon national standards set by the Autism Evidence-Based Practice Review Group, University of North Carolina at Chapel Hill.</td>
</tr>
<tr>
<td>Skills Training (ST)</td>
<td>• The Skills Training (ST) professional will train the parent(s) on implementing interventions across multiple settings as long as it is for the direct benefit of the child.</td>
<td>Practitioners providing Skills Training (ST) services that are not enrolled with ND Medicaid to provide Behavioral Program Design and Monitoring (BPDM) services must be under the supervision of a practitioner that is enrolled to provide BPDM and will follow the specific training protocols developed in the Care Plan.</td>
<td>N/A</td>
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<td>• ST provides hands-on training, to parents and others, as needed, for the direct benefit of the child, using evidence-based behavioral intervention methods as directed by the Behavioral Program Design and Monitoring Professionals.</td>
<td>Behavioral Analyst • Board Certified Behavior Analyst - Doctoral (BCBA-D) • Board Certified Behavior Analyst</td>
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### 13(c). Preventive Services

**Services to Treat Autism Spectrum Disorders Pursuant to EPSDT (continued)**

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<th>Practices Required</th>
</tr>
</thead>
</table>
| ST      | ST may also provide general assistance and support on interventions to individuals who provide unpaid support, training, companionship or supervision to participants. ST professionals will meet with the participant’s Behavioral Program Design and Monitoring Professional and the parents at least monthly for the purpose of reviewing progress on the formal training objectives and reviewing the need for changes in the Care Plan. | (BCBA)  
- Registered Behavior Analyst (RBA)  
- Registered Behavior Technician (RBT)  
Psychology  
- Licensed Psychologist (PhD, PsyD, EDD)  
- Licensed Professional Clinical Counselor (LPCC)  
- Licensed Professional Counselor (LPC)  
- Psychiatric Triage Therapist  
- Licensed Marriage and Family Therapist (LMFT)  
- General psychology degree (BA, BS)  
Nursing  
- Psychiatric Clinical Nurse Specialist (CNS)  
- Registered Nurse (RN)  
- Licensed Practical Nurse (LPN)  
- Psychiatric Nurse Practitioner (NP)  
- Social Worker | | |
### 13(c). Preventive Services
#### Services to Treat Autism Spectrum Disorders Pursuant to EPSDT (continued)

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<tr>
<td></td>
<td></td>
<td>• Licensed Independent Clinical Social Worker (LICSW)</td>
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<td>• Licensed Clinical Social Worker (LCSW)</td>
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<td>• Licensed Social Worker (LSW)</td>
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<td>• Masters in Social Work (MSW)</td>
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<td><strong>Occupational Therapy</strong></td>
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<td></td>
<td>• Licensed Occupational Therapist (OTRL)</td>
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<td>• Certified Occupational Therapy Assistant (COTA)</td>
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<td><strong>Physical Therapist</strong></td>
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<td>• Licensed Physical Therapist (PT)</td>
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<td>• Licensed Physical Therapist Aide (PTA)</td>
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<td><strong>Speech-Language Pathologist</strong></td>
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<td>• Speech and Language Pathology - Certificate of Clinical Competence (SLP-CCC)</td>
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<td>• Speech and Language Pathology with Audiology Specialty (A-SLP-CCC)</td>
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<td><strong>Education</strong></td>
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<td>• Special Education</td>
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13(c). Preventive Services
Services to Treat Autism Spectrum Disorders Pursuant to EPSDT (continued)

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<tbody>
<tr>
<td></td>
<td></td>
<td>• Elementary Education • Secondary Education • Early Childhood Development</td>
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</table>

ASD Services Framework
1. Care plan goals will be outcome based and progress toward goals will be monitored by training data. ASD Preventative Services seek to develop, maintain or restore skills and functioning in all areas (including):
   a. Social Skills, and related skills to enhance participation across all environments (school, home and community settings) and relationships, including imitation, initiation of social interactions with both adults and peers, reciprocal exchanges, parallel and interactive play with peers and siblings;
   b. A functional communication system which may include expressive verbal language, receptive language and nonverbal communication skills and augmentative communication;
   c. Increased engagement and flexibility in the exhibition of developmentally appropriate behaviors, including: play behavior, attending behavior, responding to environmental cues (including cues from the training staff and others) and cooperation with instructions;
   d. Replacement of inappropriate behaviors with more conventional and functional behaviors;
   e. Working with caregivers and others in the environment to promote the participant’s competence and positive behavior;
   f. Fine and gross motor skills used for age-appropriate, functional activities, as needed;
   g. Cognitive skills related to play activity and academic skills;
   h. Adaptive behavior and self-care skills to enable the participant to become more independent and/or;
13(c). Preventive Services

Services to Treat Autism Spectrum Disorders Pursuant to EPSDT (continued)

i. Independent exhibition of organizational skills including completing a task independently, asking for help, giving instructions to peers and following instructions from peers, following routines, self-monitoring and sequencing behavior.

2. Participation by Caregiver in ASD Treatment Services: Over half of all interventions must involve the primary caregiver to ensure generalization of skills.

3. Presence / Availability of Caregiver: A caregiver shall be present or available at all times in or around the home when services are being provided in the home. For services provided outside of the home, a caregiver shall be present or available as necessary based on the ASD treatment services provider’s clinical judgment.

4. Supervision of Skills Trainers. Skills Trainers requiring supervision by a qualified provider (described above). Such supervision must:
   a. Be with the supervising provider and documented on an ongoing basis.
   b. Be at least ten percent of the amount of hours that the Skills Trainer is providing ASD treatment services to each individual.

C. Limitations

1. Total ASD treatment services under this authority may only be the amount medically necessary for each individual as determined by the Vineland II scores. These limits may be exceeded due to medical necessity.

2. The department shall not pay for program services or components of services that:
   a. Are of an unproven, experimental, cosmetic or research nature.
   b. Do not relate to the individual’s diagnosis, symptoms, functional limitations or medical history.
   c. Are intended solely to prepare individuals for paid or unpaid employment or for vocational equipment and uniforms.
   d. Are solely educational, vocational, recreational, or social.
13(c). Preventive Services

Services to Treat Autism Spectrum Disorders Pursuant to EPSDT (continued)

e. Are not coverable within the preventive services benefit category, such as respite care, child care, or other custodial services.
f. Duplicate other State Plan Services.

D. Teletherapy

a. Nothing in this state plan is intended to prohibit or restrict the use of telehealth services to deliver services under this amendment.

E. Free Choice of Provider

Individuals eligible to receive ASD services described in this section have a free choice of any available provider qualified to perform the services. Providers must be enrolled as a Medicaid provider.