Autism State Plan slide presentation

Following slides were presented at the 2016 ND Autism Conference
Oct 26-28, 2016

This is being posted as informational only and is subject to changes pending Center of Medicare & Medicaid approval of ND Autism State Plan.
Autism
Medicaid State Plan

By
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Oct 28, 2016
Autism State Plan has been submitted to the Centers for Medicare & Medicaid Services
Has NOT been approved November 1, 2016 or later!
What does State Plan mean?

**Medicaid** = provide comprehensive and uniform medical services that enable persons previously limited by their circumstances to receive needed medical care.

**Funding** is shared by federal and state governments. Eligibility determinations are at the county level.

**Medicaid** pays for health services for qualifying adults, children, pregnant women, and individuals who are elderly, or disabled.
Why Autism State Plan?

• Autism State Plan:

Why are we doing this?

The Center for Medicare & Medicaid Services is requiring states to provide coverage of all medically necessary service for children with ASD (Autism Spectrum Disorder) under the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) benefit.

Medically Necessary is defined as:

- To prevent disease, disability, and other health conditions or their progression;
- To prolong life; and
- To promote physical and mental health and efficiency
What is Autism State Plan?

Autism services 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.

Services available:

- Autism Spectrum Disorder Diagnostic Evaluation
- Behavioral Program Design and Monitoring
- Skills Training

- Length of service will be determined by Vineland II results.
How to enroll in Autism State Plan? 

step 1

Child receives a screening for EPSDT or a physical –
• overall medical and physical health, hearing, speech, and vision, including relevant information.
• must include an ASD screening tool.

❖ This screening MUST indicate the possibility of an ASD.

Who: medical doctor/ nurse practitioner
How to enroll in Autism State Plan?
step 2

Child receives an Autism Spectrum Disorder Diagnostic Evaluation (completed by a team)

**Purpose:** determine ASD diagnosis and medical necessity of service.

**Tasks:**
- Conduct coordinated multidisciplinary assessment (incorporate relevant medical information, identify strengths, needs, interests, and challenges of child. This will also include an environmental assessment.
- Produce a collaborative report based upon findings obtain from the evaluation to also include a Level of Support (Vineland II).

**Who:** family helps decide who is on team.
- **MUST** have the **child’s primary care provider** or one of the following: Pediatrician or Licensed Psychologist or Clinical Psychiatrist or Licensed Independent Clinical Social Workers or Psychiatric Clinical Nurse Specialist or Psychiatric Nurse Practitioner.
- **Must** have **Speech-Language Pathologist** (speech and language pathology certificate or clinical competence. Or speech and language pathology with audiology specialty.)
- **Must** have **Occupational Therapist if no PT** (Licensed Occupational Therapist, or Certified Occupational Therapy Assistant with Licensed Occupational Therapist (OT) supervision.)
- **Must** have **Physical Therapist if no OT** (Licensed Physical Therapist or Licensed Physical Therapist Aide with Licensed Physical Therapist supervision.)
- **And** any additional practitioners that may be needed to rule out other possible disorders/conditions.
How to enroll in Autism State Plan?
step 3
Child is referred for Behavioral Program Design and Monitoring

❖ This step cannot occur unless there has been a physical or EPSDT Screening and a Autism Diagnostic Evaluation.

What: behavior assessment-identifying current strengths/ needs across developmental and behavioral domains.

Task:
• Developed plan that must have:
  • measurable goals with expected outcomes.
  • Specific description of the recommended amount, type, frequency, setting and duration of how goals will be reached.
  • Amount and type of caregiver participation.
  • Service in accordance with objectives within plan.
• Train and oversee the Skills Trainers
• Meet monthly with Parents and Skills Trainer to review progress of plan.

Who: Board Certified Behavior Analyst-Doctoral or Board Certified Behavior Analyst or Registered Behavior Analyst (with oversight from BCBA-D, BCBA, Licensed Psychologist) or Licensed Psychologist or Licensed Certified Social Worker or Licensed Independent Clinical Social Worker.
How to enroll in Autism State Plan?
step 4

Child works with a skills trainer directly to learn how to handle identified behaviors in a positive alternative way.

**Tasks:**
- Train the parents on implementing interventions across multiple setting
- Provides hands–on training using evidence-based behavioral intervention methods as directed by the Behavioral Program Design and Monitoring Professionals.
- Provide general assistance and support on interventions to individuals who provide unpaid support, training, companionship or supervision to participants.
- 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.

**Who:**
- Approved professionals 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.

Board Certified Behavior Analyst - Doctoral or Board Certified Behavior Analyst or Registered Behavior Analyst or Registered Behavior Technician or Licensed Psychologist or Licensed Professional Clinical Counselor or Licensed Marriage and Family Therapist or Psychiatric Clinical Nurse Specialist or Registered Nurse or Licensed Practical Nurse or Psychiatric Nurse Practitioner or Licensed Independent Clinical Social Worker or Licensed Social Worker or Licensed Occupational Therapist or Certified Occupational Therapy Assistant or Licensed Physical Therapist or Licensed Physical Therapist Aide
Other points of interest

**Care plan goals** will be outcome based and progress toward goals will be monitored by training data.

**Parent involvement:**
- Based on the provider’s clinical judgment as specified and explained in the behavioral plan of care, a caregiver must participate in treatment sessions on an ongoing basis in a manner and amount that are sufficient to ensure the quality and clinical effectiveness of the services, as tailored to each individual.
- 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.

**Limitations:**
Total ASD treatment services from all sources may only be the amount for each individual as determined by the Vineland II scores. These limits may be exceeded due to medical necessity.

Services and intensity will vary by individual as determined by level of support determination. Services will be reevaluated annually.
Vineland II

A total score or a score on any two elements of the Adaptive Areas (Communication, Daily Living Skills, Socialization and Motor Skills) of two standard deviations below the mean of 100 (a score of 70 or below)

OR

A total score, or a score on any two elements of the Adaptive Areas (communication, Daily Living Skills, Socialization and Motor Skills) of one standard deviation below the mean of 100 (score of 71-85)

AND a score on the Maladaptive Scale internal, external or total is clinically significant, a v-scale score over 20.

Skills Training

Level 1 12 hours per week
Level 2 13 hours per week
Level 3 15 hours per week
Provider enrollment

New Provider

• Enroll as a Medicaid provider (as a group provider).
  • Type 39
  • Specialties 554/506/507
  • If also doing waiver services – specialties of 086/508

EVAL- Lead team profession needs to be affiliated to the group. (complete affiliation form)

PROGRAM DESIGN - BCBA needs to enroll as an individual with affiliation to the group.

SKILLS TRAINER – must enroll as an individual with affiliation to the group.

Skills Trainers must be under a Program Design Group.

Current Provider

• Eval – must have lead team profession affiliated with Autism provider number.

• Program Design – must enroll as an individual and be affiliated to the group

• Skills Trainer – must enroll as an individual and be affiliated to the group.
Provider Enrollment
Billing

**Screening:** covered under Physicians Services within Medicaid.

**Autism Spectrum Disorders Diagnostic Evaluation:**
- prior approval from Medicaid – autism unit
  - (Letter given to parents)
  - team leader would be billing for entire team

**Behavioral Program Design & Monitoring**
- must have evaluation / vineland II completed
- must have prior approval from Medicaid- autism unit
  - (letter from Autism Coordinator stating family qualifies)
- BCBA-D or BCBA would be billing
- must be enrolled as a provider or
- must be enrolled within a group provider

**Skills Trainer**
- must be listed on a Behavioral Program Design & Monitoring plan
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