A. SUBJECT
Applied Behavior Analysis (ABA) for the treatment of Behavioral Intensive Level Therapy for Treatment of Pervasive Developmental Disorders including Autism Spectrum Disorder

B. BACKGROUND
Autism Spectrum Disorder (ASD) can vary widely in severity and symptoms, depending on the developmental level and chronological age of the patient. Autism is often defined by specific impairments that affect socialization, communication, and stereotyped (repetitive) behavior, which collectively are called the “Core” symptoms of autism. Children with autism spectrum disorders have pervasive clinically-significant deficits which are present in early childhood in areas such as intellectual functioning, language, social communication and interactions, as well as restricted, repetitive patterns of behavior, interests and activities. Individuals with a well-established diagnosis of autistic disorder, Asperger’s disorder, or pervasive developmental disorder NOS under previous diagnostic criteria should be given the diagnosis of ASD.

There is currently no cure for ASDs, nor is there any one single treatment for the disorder. S individuals with ASDs may be managed through a combination of therapies, including behavioral, cognitive, pharmacological, and educational interventions. The goal of treatment for autistic patients is to minimize the severity of autism symptoms, maximize learning, facilitate social integration, and improve quality of life for both autistic individuals and their families or caregivers.

Behavioral therapy programs studied to treat ASD include Intensive Behavioral Intervention (IBI), including Lovaas therapy, Early Intensive Behavioral Intervention (EIBI), or Applied Behavior Analysis (ABA). IBI therapy involves use of operant conditioning, a behavioral modification technique using positive reinforcement to increase desired behaviors, or a neutral response to not reinforce undesired behaviors. The operant conditioning is delivered in a highly-structured and intensive program, with one-to-one instruction by a trained therapist. Parents are active
participants in the treatment process and are taught to continue the training at home. IBI is initiated when a child is young, usually by 3 years of age.

These intensive behavioral intervention programs involve time-intensive, highly-structured positive reinforcement techniques by a trained behavior analyst or therapist. There is a wide variation in ABA practices from philosophy, approach, interventions and methodology, and outcome reporting. Clinical evidence from small studies and meta-analyses suggests that intensive behavioral therapy may have effects on intellectual functioning, language-related outcomes, acquisition of daily living skills and social functioning for some individuals. Methodological problems including small sample sizes (limiting statistical analysis), lack of randomization, blind assessments, and use of prospective design limit the generalizability of the results. There is lack of definition and guidelines around characteristics of children who would benefit from treatment, lack of evidence-based guidelines for training and credentialing, program content, measurement of success, intensity, duration and clinical criteria. CareSource fully supports the recommendation for ongoing research, randomized control studies, standardized protocols, and longitudinal research to determine long term outcomes.

C. DEFINITIONS
Refer to Attachment A for state-specific provider definitions

D. POLICY
I. CareSource supports early intervention services and therapies, such as physical, speech, occupational therapy, as well as psychological/psychiatric services, for the treatment of autism spectrum disorders.

II. CareSource provides for state and federal required covered services as part of a comprehensive plan of treatment for autism spectrum disorders when ordered by a pediatrician or psychiatrist and provided by a certified, credentialed and licensed CareSource participating therapist.
   A. For member’s whose Plan includes a benefit for ABA Therapy, treatment may be found to be medically necessary when ALL of the following conditions are met:
      1. Providers must meet ALL of the following:
         1.1 All state-specific criteria for providers (as listed under “Definitions”)
         1.2 Have a scope of practice that includes diagnosis and appropriate documentation of treatment for ASDs
         1.3 The certification, experience and education standards published in The Behavior Analyst Certification Board’s (BACB) guidelines “Health Plan Coverage of Applied Behavior Analysis Treatment for Autism Spectrum Disorder”
         1.4 Hold a valid, current certification from BACB
         1.5 Ensure all staff working under their direction has BCBA certification
         1.6 Participate in the CareSource provider network
      2. There must be evidence of a diagnosis of an autism spectrum disorder and when requested, a comprehensive assessment completed prior to initiation of services. Additional evidence such as the Autism Diagnostic Observation Schedule (ADOS) or similar testing instrument may be requested as evidence to support the treatment plan
      3. Upon request, a letter of medical necessity from a licensed psychologist, psychiatrist, or developmental pediatrician that includes documentation of consideration of less-intensive interventions and clinical rationale for ABA therapy.
      4. There is a documented time-limited, individualized treatment plan developed by a licensed practitioner as defined in 1.a., that includes ALL of the following:
4.1 Includes identifiable maladaptive target behaviors having a negative impact on
development, communication, social interactions, safety, environment or function
4.2 There is a time-limited individualized treatment plan developed
4.3 Defines objective baseline measures including frequency, rate, intensity and
duration
4.4 Establishes specific and quantifiable criteria for progress
4.5 Demonstrates that ABA therapy is not custodial or maintenance-oriented in
nature and is planned to prevent, diagnose, evaluate, correct, ameliorate, or treat
the ASD
4.6 Is completed by the treating provider and includes coordination across all
providers, supports and resources
4.7 Includes services that are not recreational in nature, or for the purposes of
respite or residential care
4.8 Identifies parental or guardian involvement in prioritizing target behaviors,
and training in behavioral techniques in order to provide additional and supportive
interventions
4.9 Includes criteria and specific behavioral goals and interventions for lesser
intensity of care and discharge
4.10 There is evidence of identified and involved community resources
5. Ongoing review of progress, the frequency of which is determined by clinical review
and/or applicable state laws, must be developed and documented by a licensed
practitioner as defined in 1.a., and include ALL criteria above, as well as:
5.1 Upon request, a letter indicating the continued medical necessity from a licensed
credentialed psychologist, psychiatrist, or developmental pediatrician that
includes consideration of less intensive interventions and rationale for continued
ABA therapy
5.2 An updated individualized treatment plan noting specific measurable progress on
targeted behaviors identified in initial treatment plan (e.g. frequency, rate,
intensity and duration), and new or refined interventions evidencing individualized
need and demonstrating the non-custodial nature of care. Updated criteria and
specific behavioral goals and interventions for lesser intensity of care and
discharge must be included; as well as documentation of updated parental or
guardian involvement in prioritizing target behaviors and training in behavioral
techniques in order to provide additional and supportive interventions
6. Professional Societies
6.1 American Academy of Pediatrics (AAP) states children that receive early
intensive behavioral treatment have been shown to make substantial, sustained
gains in IQ, language, academic performance, adaptive behavior and social
behavior
6.2 American Academy of Child and Adolescent Psychiatry (AACAP) has practice
parameters for treatment of children and adolescents with ASD. The quality of
the literature is variable. None of the treatment models has emerged as superior

For Medicare Plan members, reference the Applicable National Coverage Descriptions
(NCD) and Local Coverage Descriptions (LCD).

CONDITIONS OF COVERAGE

HCPCS
CPT 0359T, 0364T, 0365T, 0368T, 0369T, 0370T
AUTHORIZATION PERIOD

E. RELATED POLICIES/RULES

KENTUCKY State ABA Laws Chapter link:

INDIANA State ABA Laws Chapter link:
http://www.iga.in.gov/legistlative/laws/2014/ic/titles/027/

WEST VIRGINIA State Law link:

Attachment A


I. Kentucky:
   A. KRS
      1. Licensed behavior analyst meets the requirements of KRS 319C.080
         1.1 Is credentialed by the Board Certified Behavior Analyst (BCBA) certification board; taking the class and passing the exam
            a. Aba.ky.gov
               http://aba.ky.gov/Form%20Library/Application%20for%20Licensure.pdf – application for licensure
         1.2 Maintains active status and fulfills requirements of the BCBA
         1.3 Is in compliance with KRS 319C.050
            a. On file and registered with updated information with the BCBA
         1.4 Complies with regulations from the BCBA board
      2. Licensed assistant behavior analyst meets the requirements of KRS 319C.080 and works under supervision of certified behavior analyst
      3. Certified practitioners meet the certification requirements of the Behavior Analyst Certification Board
      4. Persons who are allowed to use the term Behavioral Analyst or Registered Behavior Technician are:
         4.1 Providing applied behavior analytic [analysis] services to an individual in a public school setting
         4.2 Implementing applied behavior analytic [analysis] intervention services to an immediate family member [or as a supervisee]
         4.3 Licensed, certified, or registered as a health or allied health professional under any other provisions of the Kentucky Revised Statutes, including but not limited to physicians, psychologists, social workers, nurses, counselors, therapists, including occupational therapists, physical therapists and speech therapists, or students within accredited training programs of these professions. Nothing in this chapter shall be construed to limit, interfere with, or restrict the practice, descriptions of services, or manner in which the health or allied health professional listed in this subsection hold themselves out to the public
         4.4 Providing applicable Medicaid waiver services.

II. Indiana
   A. Indiana General Assembly
      1. IC 25-41-1-1 The individual must hold and maintain the certified behavior analyst credentials administered by the Behavior Analyst Certification Board, Inc. (BACB) – 2015
1.1 Four credential levels:
   a. Registered Behavior Technician
      (1) Must work under a Responsible Certificant, be 18 year old, have a HS
diploma or GED, complete 40 hours of training, pass a background check, pass the RBT Competency Assessment and Exam
   b. Board Certified Assistant Behavior Analyst
      (1) Must work directly under a Board Certified Behavior Analyst, have a bachelor’s degree from an accredited university, complete approved coursework, submit application for credential, and pass the BCaBA exam
   c. Board Certified Behavior Analyst
      (1) Must meet one of three eligibility requirements in order to apply
         i. Have acceptable graduate degree from an accredited university, complete graduate coursework in behavior analysis, and have a defined period of supervised practical experience
         ii. Have acceptable graduate degree, full time faculty position in behavior analysis that includes research and teaching, and supervised practical experience
         iii. Have acceptable doctoral degree that was conferred at least 10 years ago and at least 10 years post-doctoral practical experience
   d. Board Certified Behavior Analyst – Doctoral
      (1) Must be actively certified as a BCBA, be in good standing, have earned a degree from a doctoral program accredited by the Association for Behavior Analysis International. If doctorate was obtained by non-accredited program they may still apply with the degree came from an acceptable institution, if they conducted a behavior-analytic dissertation including at least one experiment, passed at least 2 behavior analytic courses, AND met all BCBA coursework requirements before receiving their doctoral degree.

III. Ohio
A. ORC 09/29/2013
   1. Will not be punished for practicing applied behavioral analysis if they:
      1.1 Hold a current, valid certificate issued under section 4783.04
      1.2 Is a licensed psychologist who has behavior analysis in their education, training or experience
      1.3 Are an individual licensed under 4757 to practice counseling, social work, or marriage and family therapy IF the person has training, education and experience in behavioral analysis
      1.4 Are a person working directly under the direction of a certified Ohio behavior analyst
      1.5 Are a matriculated graduate student or postdoctoral trainee acting as part of a defined program of study or professional training
      1.6 Are acting within their scope of employment for the department of developmental disabilities, a county board of developmental disabilities, or a council of government
      1.7 Are a professional employed in a school or other setting that falls under the state board of education and acting within the scope of employment
   2. Persons are eligible to apply for a certificate if they meet the criteria:
      2.1 Are of good moral character and act in accordance with accepted professional and ethical standards
      2.2 Comply with sections 4776.01 to 4776.04 of the ORC
         a. Background and criminal checks
      2.3 Demonstrate an understanding of the law regarding behavioral health practices
2.4 Demonstrate current certification as a board certified behavior analyst by the behavior analyst certification board or its successor organization or demonstrate completion of equivalent requirements and passage of a psychometrically valid examination administered by a nationally accredited credentialing organization

2.5 Pay the fee established by the board of psychology

2.6 Meet board of psychology criteria

3. OAC

3.1 The requirements are the same and have the following additional criteria mentioned – effective 04/07/2014:

   a. Must have evidence of earned masters or doctoral degree in behavior analysis or other natural science, education, psychology, counseling, social work, human services, or a field related to behavior analysis

   b. Must have completed all required hours of training, testing, and supervised practical experience in behavioral analysis

IV. Georgia

A. OCGA

1. "To be eligible for coverage, applied behavior analysis shall be provided by a person professionally certified by a national board of behavior analysts or performed under the supervision of a person professionally certified by a national board of behavior analysts." 33-24-59.10 (2015) – This was regarding insurance coverage of patients diagnosed with autism. There were no other specifications regarding applied behavioral analysis.

V. West Virginia

A. WVC

1. "Certified behavior analyst" means a West Virginia licensed psychiatrist or psychologist who is also board certified as a behavior analyst by the Behavior Analyst Certification Board. The state’s Legislative Auditor declared that national certification is sufficient to protect the citizens of the state and provide quality care. – WVC 33-24-7k

F. REVIEW/REVISION HISTORY

   Date Issued: 08/16/2010
   Date Reviewed: 08/16/2010, 07/16/2011, 07/16/2012, 09/15/2014, 11/17/2015
   Date Revised: 07/16/2011, 07/16/2012, 07/16/2013, 09/15/2014

   11/17/2015 – Revisions include: Add various state laws, clarify language, addition of state specific licensing, and update references

G. REFERENCES


8. Handbook of Clinical Psychology, Herson & Gross eds., 2008


11. Standards of Practice for Applied Behavior Analysis in Minnesota, Minnesota Northland Association for Behavior Analysis (MNABA) 8/2012

12. Synopsis, Ohio Revised Code 4783.01-4783.05, 4783.09-4783.13, 4783.99, 109.572, 4732.06-4732.08, 4776.01. Ohio Administrative Code 5122-29-17 (CPST service)


14. The Beacon Spotlight, “AUTISM SPECTRUM DISORDER; BENEFIT EXPANSION AND A NEW SERVICE MODEL, Summer 2013

15. Wisconsin Administrative Code, Section Ins 3.36. 8/2009


This guideline contains custom content that has been modified from the standard care guidelines and has not been reviewed or approved by MCG Health, LLC.

The Medical Policy Statement detailed above has received due consideration as defined in the Medical Policy Statement Policy and is approved.