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VCHCP Policy for Applied Behavioral Analysis Therapy

Applied Behavioral Analysis is the science of human behavior that is based in the learning theory of behaviorism which postulates that all behavior that can be observed and measured is caused by external stimuli, without regard for feelings and internal states, creating a “stimulus-response” relationship for the learner. Treatment approaches based in this science utilize the principles of ABA to systematically design, implement and evaluate environmental modifications to improve human behavior in a socially significant manner such that the individual is more fully able to function in their environment. Research has shown ABA treatment approaches to be effective in addressing deficits in communication, social skills, and other adaptive behaviors. In order for ABA interventions to be appropriate for coverage by The Ventura County Health Care Plan there must be a diagnosis of Autism or Pervasive Spectrum Disorders as defined in the most current edition of the Diagnostic and Statistical Manual of Mental Disorders and the level of maladaptive behavior or inadequate skills must significantly inhibit the individual’s ability to function at an age-appropriate level, including in the home, school or care facility. ABA Therapy must be provided by a provider agency experienced in providing ABA Services with supervisors and staff who meet criterion levels for fidelity of implementation in the type of ABA services they provide. ABA Therapy must be prescribed by a licensed physician contracted with the VCHCP. If a VCHCP member has been receiving ABA Therapy that has been funded by another payer and the VCHCP is now requested to cover the ABA Therapy, the VCHCP must receive records documenting the diagnosis of a covered disorder, the physician order for ABA Therapy, the initial treatment plan and the most recent periodic evaluation of the status of the member. In order to provide continuity of care, those members who have had previous ABA Therapy, may initially be approved for a limited 60 day period of time while the Plan receives and evaluates the records. The Plan may require a re-evaluation prior to approving ABA Therapy after the initial 60 day approval.

In order for a Plan Member to be considered for referral for evaluation for ABA Therapy the member must meet the criteria for the diagnosis of Autism or Pervasive Developmental Disorders as defined in the most current edition of the Diagnostic and Statistical Manual of Mental Disorders, the member must be under the age of 18, and must have been referred by a physician familiar with identification and diagnosis of these disorders. If referral is considered appropriate, the Plan will refer to an appropriate ABA Provider for evaluation and recommendation for treatment.

If treatment is recommended the following requirements for ABA Treatment must be documented as having been met.

Requirements for ABA Treatment:

1. There must be a diagnosis of Autism or a Pervasive Developmental Disorder (DSM IV or V & ICD-9 299.0-299.9)
2. The member must be under the age of 18
3. There are identifiable target behaviors or lack of age appropriate skills having an impact on development, communication, interaction with typically developing peers, teachers, adults and family or adjustment to the settings in which the member functions, such that the member cannot adequately participate in developmentally appropriate essential activities such as school and the home.
4. Parents must be involved in prioritizing target behaviors.
5. Parents, family and caregivers must be involved in training in behavioral techniques so that they can provide additional hours of intervention.
6. ABA Therapy is not custodial in nature.
7. There is a time limited, individualized treatment plan developed by the ABA Certified therapist that is:
 - a. Child-centered, strengths-specific, family focused, community-based, multi-system, and culturally competent
 - b. Clearly defines specific target behaviors or skills in terms of frequency, rate, symptom intensity or duration
 - c. Records objective measure of baseline levels
 - d. Establishes quantifiable criteria for progress
 - e. Describes behavioral intervention techniques appropriate to the target behavior or skill, reinforcers selected, and strategies for generalization of learned skills
 - f. Plans for transition through the continuum of interventions, services, and setting, as well as discharge criteria.
8. There is involvement of other appropriate community resources such as the school district.
9. The initial evaluation must be done by an individual certified by the Behavior Analyst Certification Board (BACB) as a Board Certified Behavior Analyst (BCBA) or Board Certified Behavior Analyst-Doctoral Level (BCBA-D). The treatment plan must also be prepared by a BCBA or BCBA-D. Services must be provided directly or billed by individuals certified as a BCBA or BCBA-D. Individuals providing ABA Therapy who are not certified must be supervised by a BCBA or BCBA-D. Supervision is to be documented and is defined as at least one (1) hour of face-to-face supervision of the uncertified provider by a certified behavior analyst for each ten hours of

ABA therapy by the supervised provider, and at least one (1) hour a month face-to-face, onsite with the member.

A. **Attachments:** None

B. **History:**

- a. Reviewer/Author: Albert Reeves, MD Date: 07-27-12
- b. Committee Review: UM on 08-16-12 & QA on 08-28-12
- c. Reviewed/No Updates by: Albert Reeves, MD on 01-28-13
- d. Committee Review: UM on 02-14-13 & QA on 02-26-13
- e. Reviewed/No Updates by: Catherine Sanders, MD
- f. Committee Review: UM: 2-13-14 & QA 2-25-14
- g. Reviewed/No Updates by: Faustine Dela Cruz, RN & Catherine Sanders, MD
- h. Committee Review: UM: February 11, 2016; QAC: February 23, 2016