ASD Treatment and Supports funded by Medicaid

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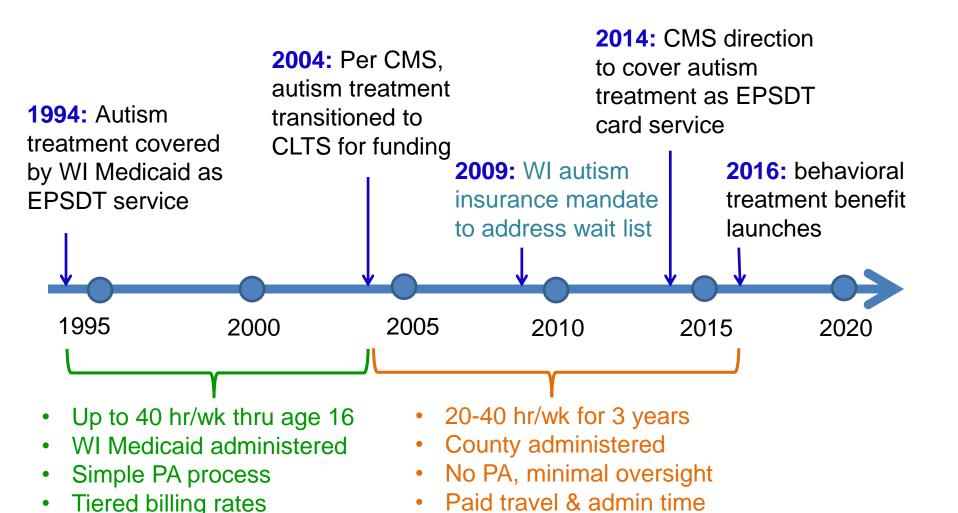
Behavioral Health Policy Section Bureau of Benefits Policy

Division of Medicaid Services Wisconsin Department of Health Services September 29, 2020



Brief History of Autism Treatment in Wisconsin

Autism Treatment in Wisconsin



Wisconsin Medicaid's Behavioral Treatment Benefit

Benefit Purpose

The primary goal of behavioral treatment is to prepare members and their families for successful participation in normative settings and activities at home, in school, and in the community.

Benefit Basics

- Coverage for behavioral treatment services began on January 1, 2016.
- Coverage includes two evidence-based treatments: Applied Behavior Analysis (ABA) and Early Start Denver Model (ESDM).
- There are no age limits.
- The benefit is not restricted to members with autism.

Benefit Coverage: Comprehensive Treatment

- Addresses multiple aspects of development and behavior in young children (early intervention)
- High number of hours per week and a long duration (> 1 year)

Benefit Coverage: Focused Treatment

- Addresses a limited scope of specific behaviors or developmental deficits
- Small number of hours per week and a short duration (< 1 year)

Benefit Coverage: Family Treatment Guidance

- Trains parents and caregivers to use treatment techniques for teaching the child new skills and reducing challenging behavior
- Prepares families to take over generalization and maintenance of skills acquired in treatment

Member Data

 Placeholder for data about the number of members using the benefit since launch

Benefit Utilization

 Placeholder for data about the number of hours of treatment billed for comprehensive & focused treatment since launch

Benefit Providers

- Licensed Supervisors: Licensed board certified behavior analysts (BCBAs) or licensed mental health clinicians
- Treatment Therapists: bachelor's degree with 2000 hours of experience
- Treatment Technicians: 18 years old, high school diploma or equivalent, 40 hours of training

Provider Enrollment

 Placeholder for data about number of providers enrolled at each level

Changes in Provider Capacity

Provider capacity has grown substantially since the benefit's launch in January 2016.

- The number of treatment supervisors has more than tripled since funding transitioned from the CLTS waiver (72 to 218+).
- There are new agencies in historically underserved parts of the state (Stevens Point, Wausau, Rice Lake, Eagle River, Superior).

Medicaid Regulations

- Medicaid coverage is subject to federal and state laws that do not apply to other payers.
- Wisconsin Medicaid can only reimburse for services outlined in our State Plan, which is authorized by CMS.
- State law allows Wisconsin Medicaid to reimburse only for medically necessary and appropriate health care services (DHS 107).

Medical Necessity

- The medical necessity of a requested service is determined by Wisconsin Medicaid's prior authorization (PA) process.
- Providers' documentation must substantiate that the requested service is appropriate, expected to be effective, and not excessive compared to alternate care that could produce similar outcomes.

Prior Authorization Documentation

- Wisconsin Medicaid originally requested substantial documentation to confirm the medical necessity of each request.
- Medicaid has significantly reduced required documentation and increased flexibility.
 - Simplified PA for children under age 6
 - 12-month authorizations
 - Coverage before diagnosis (EPSDT)

Responsive Policy Updates

- Update 2017-28: Simplified PA processes, added technicians for focused treatment
- Update 2018-29: Joint memo with DPI to enhance coordination of special education supports and behavioral treatment
- Update 2018-35: Increased direct treatment rates 33% (from \$28.64 to \$38.10 per hour)
- Update 2019-37: Removed required medical evaluation, simplified PA forms

Ongoing Needs

- Behavioral treatment is helpful for many individuals, but it is not intended as a longterm support.
- For members with ongoing, significant behavioral needs, treatment should prepare the member for the next system of care.

Programs for Children with Special Needs

The Bureau of Children's Services

Bureau of Children's Services

- The Bureau of Children's Services is dedicated to honoring and empowering inclusive community lives of children with disabilities and their families,
- in partnership with local communities, by providing leadership and financial support through long-term support programs throughout Wisconsin

Birth to Three

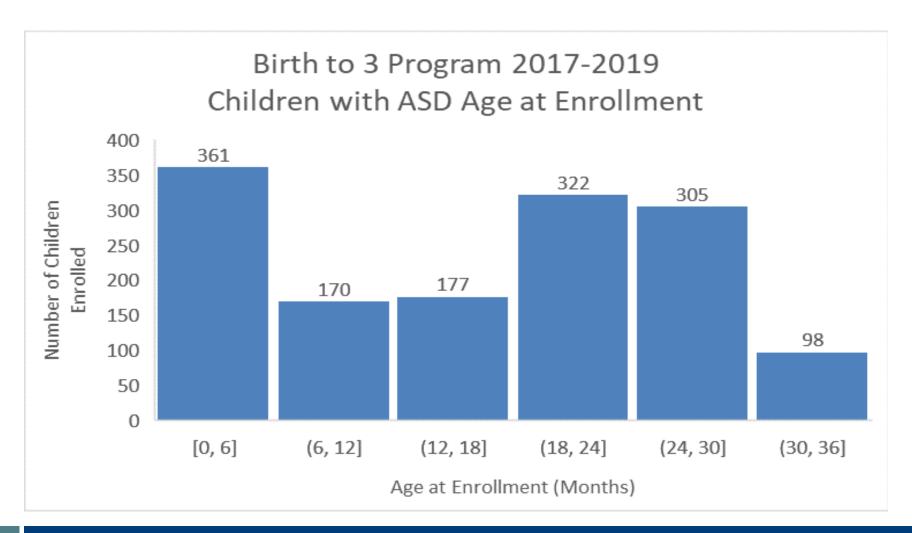
- The first three years are the most important building blocks of a child's future.
- The Birth to 3 Program is a federally-mandated Early Intervention program (Part C of the Individuals with Disabilities Education Act—IDEA(link is external)) to support families of children with developmental delays or disabilities under the age of three.

Birth to 3 Enrollment and ASD Diagnosis

Birth to 3 Program: Number of Children Enrolled at any time

Calendar Years	2017	2018	2019	Total Across 3 Years Unduplicated
With ASD	1,022	792	440	1,433
Without ASD	11,023	10,631	8,558	20,725
Total	12,045	11,423	8,998	22,158
% with ASD	9%	7%	5%	7%

Age at Enrollment



Katie Beckett

- The Katie Beckett Program is a special eligibility criteria that allows certain children with long-term disabilities, mental illness, or complex medical needs, living at home with their families, to obtain a ForwardHealth_card.
- Children who are not eligible for other Medicaid programs because the income or assets of their parents are too high may be eligible for Medicaid through the Katie Beckett Program.
- A child may be eligible for this source of Medicaid even if they are currently covered under a private health insurance policy.

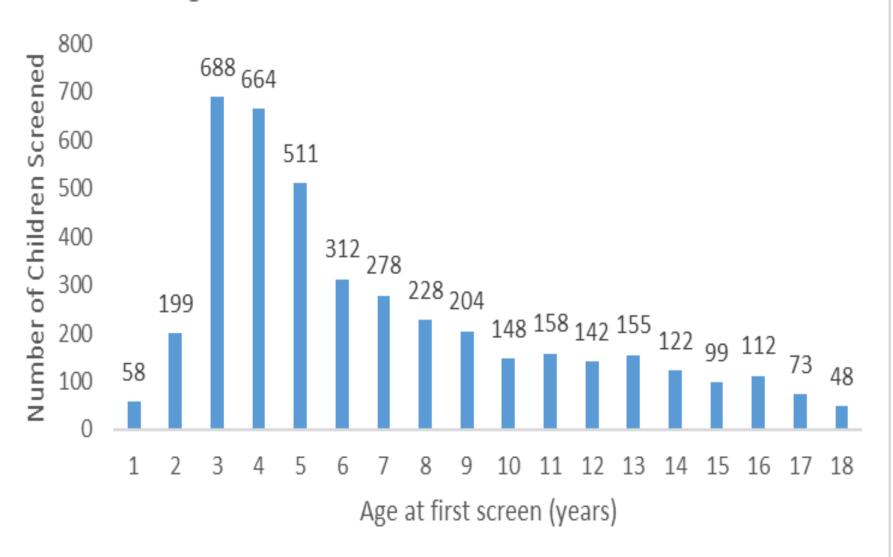
Children's Long Term Support Waiver

- Children's Long-Term Support (CLTS) Waiver
 Program is a <u>Home and Community-Based Service</u>
 (HCBS) Waiver that provides Medicaid funding for
 children who have substantial limitations in their daily
 activities and need support to remain in their home or
 community.
- Eligible children include those with developmental disabilities, severe emotional disturbances, and physical disabilities.
- Funding can be used to support a range of different services based on an assessment of the needs of the child and his or her family.

Functional Screen Data and Autism Spectrum Diagnosis

All Children Screened for first time 2017-2019						
Calendar Years	2017	2018	2019	Total		
With ASD	1,111	1,413	1,675	4,199		
Without ASD	1,780	2,278	2,689	6,747		
Total	2,891	3,691	4,364	10,946		
% with ASD	38%	38%	38%	38%		

Children with ASD
Age When Screened for First Time in 2017-2019



Where else can we go?

No Wrong Door

NWD is a framework for coordinated access to navigating disperse systems of care for individuals with special needs.

https://nwd.acl.gov/pdf/NWD-National-Elements.pdf
No Wrong Door in Wisconsin would support statewide standardized access to the range of programs.
NWD framework recognizes that how families find access is less important than that they find access.
Rather than a single point of entry, NWD builds up all the potential entry points so families get where they need to be through any door they find.

Social and Emotional Innovation Grants

- On July 1, the Wisconsin Department of Health Services (DHS) <u>awarded \$1.2 million in grants to 15 local county Birth</u> to 3 programs across the state that will pilot new and innovative efforts to improve outcomes for participating children.
- These grants will allow local areas to explore new and better ways to address the unique needs of children with developmental delays and disabilities. Some will aim to increase coordination between different partners trying to help the children. Some will offer new trainings for staff and families. Some will try out new tools to help identify children's issues early and trigger action. Some programs are trying combinations of these approaches.
- All are based on a common understanding: early interventions can change the trajectory of a child's future.

The Future

Beyond what we've imagined