

11.10 LEVEL OF CARE - STATE SPECIFIC

11.101 Applied Behavior Analysis (ABA) – Maryland Specific

Intensive Behavioral Intervention (IBI) (or Applied Behavioral Analysis [ABA]) for individuals diagnosed with Pervasive Developmental Disorder, Not Otherwise Specified (PDD, NOS), Autistic Disorder, Asperger's Disorder or Autism Spectrum Disorder, delivered in the home, or community office setting. ABA is defined as the design, implementation, and evaluation of environmental modifications, using behavioral stimuli and consequences, to produce socially significant improvement in behavior, including the use of direct observation, measurement, and functional analysis of the relationship between environment and behavior.

Criteria

<p>Admission Criteria</p>	<p><i>All of the following criteria must be met:</i></p> <ol style="list-style-type: none"> 1. Member has a <i>DSM-IV</i> diagnosis of PDD, NOS, Autistic Disorder or Asperger's Disorder (collectively referred to as Autism Spectrum Disorder [ASD]), or corresponding ICD codes. 2. Member has received: <ol style="list-style-type: none"> a. a comprehensive evaluation by the child's primary care provider or specialty physician identifying the need for habilitative services for the treatment of autism or autism spectrum disorder . b. a prescription from the child's primary care provider or specialty physician that includes specific treatment goals. 3. Provider and/or supervisor of the IBI/ABA and treatment plan development is licensed, certified, or otherwise authorized under the Health Occupations Article or similar licensing, certification or authorization requirements of another state or U.S. territory. 4. Member can be maintained adequately and safely in their home environment. Member does not require a more intensive level of care due to imminent risk to harm self or others or based on severe maladaptive behaviors. 5. Member's treatment/intervention plan includes clearly defined behavioral interventions with measurable behavioral goals that address the identified challenging behavior(s). Intervention(s) are appropriate for member's age and impairments. 6. Member currently receives no other in-home or office-based IBI/ABA services.
<p>Continued Stay Criteria</p>	<p><i>On annual review, all of the following criteria must be met:</i></p> <ol style="list-style-type: none"> 1. On an annual basis, coordination will include a review and consultation with the primary care provider or specialty physician, in consultation with the habilitative services provider that includes: <ol style="list-style-type: none"> a. Documentation of benefit to the child b. Identification of new or continuing treatment goals, and c. Development of a new or continuing treatment plan. 2. Member continues to meet admission criteria and does not meet criteria for another level of care (LOC), either more or less intensive.

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Page 1 of 2

This criterion is consistent with NCD and/or LCD.

	<ol style="list-style-type: none"> 3. Supervision of paraprofessionals working on member’s case required by a BCBA overseeing treatment. 4. Medication assessment has been completed when appropriate and medication trials have been initiated or ruled out. 5. Parent / guardian / caregiver are involved in training in behavioral interventions and continue to participate in and be present for at least 50% of treatment sessions. Progress of parent skill development in behavior management interventions is being monitored. 6. As member makes progress evidenced by reduction in rates, intensity and duration of maladaptive behaviors and increase in skill acquisition, service authorization will reflect new presentation. 7. Coordination of care and discharge planning are ongoing with the goal of transitioning member to less intensive behavioral intervention and a less intensive LOC.
<p>Discharge Criteria</p>	<p><i>At least one of the following criteria must be met:</i></p> <ol style="list-style-type: none"> 1. Discharge may occur, when on annual review, the prescribing provider: <ol style="list-style-type: none"> a. Does not document a benefit to the child b. Does not identify new or continuing treatment goals, and c. Does not develop a new or continuing treatment plan.