Ohio Autism Insurance Coalition Ohio Association for Behavior Analysis Autism Society of Ohio Autism Speaks

**Problem Statement:** Ohio Medicaid has no uniform medical or reimbursement policies for ABA therapy, which results in Members facing inequities in coverage approvals and little to no access to care. The strained and inadequate provider network is seeing long delays in claims processing and reimbursement, making the ABA coverage within Medicaid unstable.

Ohio Medicaid has seven different medical and reimbursement policies for ABA with inconsistent medical necessity criteria between the seven managed care plans (MCP). This, and an inadequate provider network, drive patient protection violations in the federal parity law (MHPAEA) and Medicaid's Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) mandate. An inadequate Medicaid provider network is a non-quantitative treatment limitation that violates both the federal mental health parity law and Medicaid's EPSDT mandate.

The Numbers: Access and Therapy Authorization Challenges

- Only 8% of Ohio's Medicaid-eligible children with Autism are getting access to the most prescribed treatment for Autism, ABA Therapy.
- ABA providers state over 50% of all ABA authorizations are forced to have a peer-to-peer medical review.
- Per ODM in 2023, 18% of 1,781 Autistic children had fully denied or partially denied authorizations.
- We estimate less than 350 or 24% of Ohio's 1,400 Behavior Analysts are credentialed in Medicaid.
- 52% of Medicaid providers have reduced the number of children served due to claim reimbursement delays and intensive and overburdensome scrutiny on each ABA authorization.
- Two MCPs recently decided to deny telehealth delivery of ABA despite being told by ODM that this is an approved delivery format. The February and March 2024 claims still have not been paid.
- 55% of Medicaid and non-Medicaid providers stated more children would be served if coverage were stable.
- 58% of Medicaid providers reported significant challenges in credentialing their group and practitioners.
- 69% of Medicaid providers experienced multiple episodes of continuing services in the past two years without confidence that reimbursement would be timely. Some providers are struggling to make payroll since ODM's system has denied many claims since the end of March. We have not yet seen evidence of successful claim submissions in the recent ODM temporary system fix.

<u>Solution & Our Request:</u> We are requesting an emergency hearing in the Joint Medicaid Oversight Committee (JMOC) to discuss the following five action items needed to stabilize ABA coverage in Ohio Medicaid.

- 1. ODM needs to announce uniform medical and reimbursement policies for ABA.
- 2. Behavior Analysts need a permanent and recognizable practitioner type in Medicaid.
- 3. All ABA CPT codes need a 15% reimbursement increase from 2016 suggested rates and without reductions.
- 4. Direct Treatment Staff, called Technicians, need to be billable after completing the national training requirement and deemed competent by the Behavior Analyst. The Technician can then sit for certification.
- 5. ODM's announced provider accreditation requirement needs to wait until coverage is stabilized.

Note: Once the five items above are completed, ODM could continue Medicaid's current stakeholder group and continue working with the actuarial firm to develop long-term, sustainable reimbursement rates.

## **Conclusion:**

An inadequate Ohio Medicaid provider network is a non-quantitative treatment limitation that violates both the federal mental health parity law and Medicaid's EPSDT mandate.

We request an emergency hearing in the Joint Medicaid Oversight Committee (JMOC) to discuss the five action items from page one that we believe will help stabilize ABA therapy coverage in Ohio.

The EPSDT Medicaid mandate states, "*Children's health problems should be addressed before they become advanced, and treatment is more difficult and costly.*" Unfortunately, Ohio's Medicaid-eligible children with Autism are not getting access to critical ABA services. Ohio still does not have codified ABA coverage in the administrative code or a state plan amendment, even though families have won lawsuits in 2008 and 2012. In 2014, the Centers for Medicaid and Medicare issued a <u>memo</u> telling Medicaid departments to cover ABA therapy.

We appreciate your time and request your help scheduling a hearing in the Joint Medicaid Oversight Committee. Please reach out to us with any questions you may have. Thank you.

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## Acronym Definitions

COBA/BCBA – Ohio Certified Behavior Analyst or Board Certified Behavior Analyst (main ABA practitioner)
ABA – Applied Behavior Analysis. Behavior Analysis is the science of behavior. ABA Therapy is the most prescribed treatment for ASD - Autism Spectrum Disorder.
MHPAEA - Federal Mental Health Parity Law (patient protection)
EPSDT - Early, Periodic Screening, Diagnostic, and Treatment Medicaid Mandate (patient protection)
CMS - Center for Medicaid and Medicare Services (federal government)
MCP – Managed Care Plans within Medicaid
ODM – Ohio Department of Medicaid
OHABA – Ohio Association for Behavior Analysis