Applied Behavior Analysis Services

DESCRIPTION OF APPLIED BEHAVIOR ANALYSIS

Intensive Behavioral Health Services (IBHS) can be delivered using applied behavior analysis (ABA) services. ABA includes the design, implementation and evaluation of environmental modifications, using behavioral stimuli and consequences, to produce socially significant improvement in human behavior or to prevent loss of attained skill or function, including the use of direct observation, measurement and functional analysis of the relations between environment and behavior. ABA services are used to develop needed skills (behavioral, social, communicative, and adaptive functioning) through the use of reinforcement, prompting, task analysis, or other appropriate interventions in order for a child, youth or young adult to master each step necessary to achieve a targeted behavior.

Intensive Behavioral Health Services (IBHS) can be delivered through ABA services, which can be delivered through Behavior Analytic (BA), Behavior Consultation–ABA (BC-ABA), Assistant Behavior Consultation–ABA (Asst. BC-ABA) or Behavioral Health Technician–ABA (BHT-ABA) services. BA and BC-ABA services consist of clinical direction of services to a child, youth or young adult; development and revision of the individual treatment plan (ITP); oversight of the implementation of the ITP and consultation with a child’s, youth’s or young adult’s treatment team regarding the ITP BA services also include functional analysis. Asst. BC-ABA services consist of assisting the individual who provides BA or BC–ABA services and providing face-to-face behavioral interventions. BHT-ABA services consist of implementing the ITP.

INITIATION REQUIREMENTS FOR ABA SERVICES

A written order that complies with 55 Pa. Code § 1155.33(a)(1) is required for BA, BC-ABA, Asst. BC-ABA or BHT-ABA services to be initiated. If services are to begin prior to completion of an assessment and ITP, a treatment plan is also required.

MEDICAL NECESSITY GUIDELINES FOR INITIATION OF ABA SERVICES

When evaluating whether the order contains clinical information to support the need for an assessment and ITP to be completed or the medical necessity of the BA, BC-ABA, Asst. BC-ABA or BHT-ABA services ordered, the following must be taken into account:

A. 1. The use BA, BC-ABA, Asst. BC-ABA or BHT-ABA services is reasonably expected to reduce or ameliorate the child’s, youth’s or young adult’s identified therapeutic needs and increase the child’s, youth’s or young adult’s coping strategies.

or

The use of BA, BC-ABA, Asst. BC-ABA or BHT-ABA services is necessary to support skill development to promote positive behaviors that will assist the child,
youth or young adult with achieving or maintaining maximum functional capacity.

2. The child’s, youth’s or young adult’s behaviors do not pose a risk to the safety of the child, youth or young adult or others that cannot be managed while in the community and the child, youth or young adult does not require a more restrictive level of care, such as inpatient treatment or a psychiatric residential treatment facility.

3. The number of hours of services prescribed are necessary for an assessment to be conducted and an ITP completed or are reasonably expected to reduce or ameliorate the behavioral or developmental effects of the child’s, youth’s or young adult’s behavioral health disorder diagnosis; enable the child, youth or young adult to achieve or maintain maximum functional capacity; or acquire the skills needed to maximize functioning within the child’s, youth’s or young adult’s home, school or community.

OR

B. If the written order does not support the above, BA, BC-ABA, Asst. BC-ABA or BHT-ABA services must be otherwise medically necessary to meet the behavioral health needs of the child, youth or young adult.

CONTINUED CARE REQUIREMENTS FOR ABA SERVICES

The following documentation is required for BA, BC-ABA, Asst. BC-ABA or BHT-ABA services to continue:


2. An updated assessment that complies with 55 Pa. Code § 5240.85(b)-(d)

3. An updated ITP that complies with 55 Pa. Code § 5240.86(b)-(e) and (g).

MEDICAL NECESSITY GUIDELINES FOR CONTINUATION OF ABA SERVICES

An evaluation of the medical necessity of continued BA, BC-ABA, Asst. BC-ABA or BHT-ABA services must take into account whether the required documentation indicates the following:

A. 1. The child, youth or young adult shows measured improvement and/or demonstrates alternative/replacement behaviors.

or

There is a reasonable expectation that continuation of BA, BC-ABA, Asst. BC-ABA, BHT-ABA services must be otherwise medically necessary to meet the behavioral health needs of the child, youth or young adult.
ABA or BHT-ABA services will reduce or ameliorate the child’s, youth’s or young adult’s identified therapeutic needs and increase the child’s, youth’s or young adult’s coping strategies.

or

There is a reasonable expectation that continuation of BA, BC-ABA, Asst. BC-ABA or BHT-ABA services is necessary to support skill development to promote positive behaviors that will assist the child, youth or young adult with achieving or maintaining maximum functional capacity.

2. The child’s, youth’s or young adult’s behaviors do not pose a risk to the safety of the child, youth or young adult or others that cannot be managed while in the community and the child, youth or young adult does not require a more restrictive level of care, such as inpatient treatment or a psychiatric residential treatment facility.

3. The BA, BC-ABA, Asst. BC-ABA, or BHT-ABA services are needed to maintain the child’s, youth’s or young adult’s maximum functional capacity and the benefit of continuing the BA, BC-ABA, Asst. BC-ABA, or BHT-ABA services is not outweighed by the risk that continuing the services will impede the child’s, youth’s or young adult’s progress toward achieving his or her highest functional level.

4. The number of hours of services prescribed are reasonably expected to reduce or ameliorate the behavioral or developmental effects of the child’s, youth’s or young adult’s behavioral health disorder diagnosis; enable the child, youth or young adult to achieve or maintain maximum functional capacity; or acquire the skills needed to maximize functioning within the child’s, youth’s or young adult’s home, school or community.

OR

B. If the required documentation does not support the above, continued BA, BC-ABA, Asst. BC-ABA or BHT-ABA services must be otherwise medically necessary to meet the behavioral health needs of the child, youth or young adult.

**DISCHARGE AND SERVICE TRANSITION**

A provider may discharge a child, youth or young adult who is receiving BA, BC-ABA, Asst. BC-ABA or BHT-ABA services for any of the following reasons:

1. The prescriber, with the participation of the treatment team, has determined that the child, youth or young adult has completed the goals and objectives identified in the ITP and no new goals or objectives have been identified and that BA, BC-
ABA, Asst. BC-ABA or BHT-ABA services are no longer necessary.

2. The prescriber, with the participation of the treatment team, has determined that the child, youth or young adult is not progressing towards the goals identified in the ITP within 180 days for the initiation of BA, BC-ABA, Asst. BC-ABA or BHT-ABA services and other clinical services are being provided.

3. The prescriber, with the participation of the treatment team, has determined that the child’s, youth’s or young adult’s needs are better served in a more restrictive setting and other clinical services are being provided.

4. The parent or legal guardian of a child or youth who provided consent for the child or youth to receive BA, BC-ABA, Asst. BC-ABA or BHT-ABA services agrees that services should be discontinued.

5. The youth or young adult agrees that BA, BC-ABA, Asst. BC-ABA or BHT-ABA services should be discontinued.

6. The child, youth or young adult failed to attend scheduled BA, BC-ABA, Asst. BC-ABA or BHT-ABA services for 45 consecutive days without any notification from the youth, young adult or the parent, legal guardian or caregiver of the child or youth. Prior to discharge, the IBHS agency made at least three attempts to contact the youth, young adult or the parent, legal guardian or caregiver to discuss past attendance, ways to facilitate attendance in the future and the potential discharge of the child, youth or young adult for lack of attendance.