

Michigan Innovations in Care Coordination ABA Treatment Guidance Document

A guide for families of children with Autism Spectrum Disorder

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Purpose of the Guide



Now that your child has been diagnosed with **Autism Spectrum Disorder (ASD)**, it is time to decide what services are best for your child and family. One treatment option often recommended for children with ASD is **Applied Behavior Analysis (ABA)**. ABA is an **evidence-based intervention** recommended by doctors and therapists to support your child in learning new skills and reducing some of the symptoms associated with ASD. Finding the right service provider for ABA can be time-consuming and emotional. This guide was created to help parents learn about the options that exist and what questions to ask about ABA therapy. Throughout this document there are words in **bold** that are defined in the glossary located at the end of the guide. Additionally, throughout this guide, we often refer to a "parent". Please note that this term is intended to be inclusive of any type of caregiver or guardian relationship.

Verify Insurance Coverage

In order to access ABA services for your child, first you need to know what type of health insurance coverage your child has. If you have **private insurance**, use the number on the back of your insurance card to contact your insurance plan for a list of approved ABA providers in your area. If your child does not have insurance or has **Medicaid**, contact your local **Community Mental Health Services Program (CMH)**. To find your Michigan County CMH, visit https://www.michigan.gov/mdhhs/0,5885,7-339-73970_5461---,00.html.

For more information about services covered under Medicaid, visit <u>https://www.michigan.gov/autism/0,4848,7-294-63682---,00.html</u>.

Where to Go for Help

If you need additional information regarding your insurance coverage or have any other ASD questions, contact the **Autism Alliance of Michigan (AAOM)**. The AAOM is a statewide organization that helps families navigate services. The AAOM works with all families, including children not yet diagnosed to those who have had an autism diagnosis for many years. You can find the AAOM on the web at https://autismallianceofmichigan.org/ or call 877-463-AAOM.

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Section 1: Getting Started with ABA

How to Get Started with ABA

ABA therapy is often recommended for children with autism. Research has shown that ABA can positively impact your child's development. The earlier treatment begins, the greater the improvements are likely to be. Once you have completed the diagnostic evaluation process and

have a recommendation for ABA services for your child, you can officially begin the process of finding an **ABA provider** that is a good fit for you and your child. Below is a short list of things you may have to do before getting started with ABA.

- Verify insurance coverage and begin reviewing ABA provider agencies.
- Ask to take a tour of the clinic or center where your child will receive services.
- Ask if there is a waiting list.
 - If so, ask how long you could remain on a waiting list?
 - Some families choose to be placed on the waiting list but continue searching for another provider.
- It is also important to ask about the timeline associated with completing the assessment process and starting services.

Getting your child into service in a timely manner is important to their success. Once you have decided on an ABA agency, you will be assigned to an ABA provider, and they will schedule further assessments, such as a **functional behavioral assessment**, to create treatment goals.

Initial and Ongoing Behavior Assessments

ABA services always begin with a variety of assessments. Some of these assessments give information about the skill levels of your child and help to decide your child's ABA treatment plan. There are assessments that focus on different ages and/or different skill levels.

Ask what assessments will be given to your child.

Things to consider:

- What will be assessed? And, how this will help develop goals for your child?
- It is important to note that not all areas of your child's functioning will be assessed. If you have concerns about areas not being assessed, please make sure to tell your child's ABA supervisor.
- Some other assessments your child may receive deal with behaviors and how people respond to behaviors. The ABA provider may ask you questions about your child's **behavior**, or they might ask to observe your child in a specific situation. You may need to collect information about interactions your child has at home.

Once the assessment is complete the ABA supervisor will provide you with an **ABA treatment plan** outlining goals as well as a recommendation for the number of hours for services.

- During this time, a schedule is discussed as well as the time it may take for authorizations to be approved.
- The average time you can expect for this part of the process is two to four weeks depending on insurance type and staffing needs. If it is taking longer than this then you should follow up with your ABA provider, **supports coordinator**, or contact your insurance provider.

Section 2: Types of Treatment Plans

Introduction to Treatment Plan Options

ABA teaches skills to children that might have difficulty communicating, playing and interacting with others, and completing daily activities. ABA can also help reduce challenging behaviors. Providers may use the terms **focused** or **comprehensive** to describe how ABA services are delivered. Your child's treatment team will help determine which approach is best for your child.

Focused Treatment Plan

An ABA treatment plan directed at one area of development, or one challenging **behavior** is a **Focused Treatment Plan**. Typically, a focused plan is used because a child is unable to, or will not benefit from, more intensive treatment. Sessions are offered for a limited number of hours per week. They focus on one or two treatment goals.

Comprehensive Treatment Plan

An ABA treatment plan that focuses on many areas of development and behavior at the same time is referred to as a **Comprehensive Treatment Plan**. Comprehensive treatment plans are typically provided for 20 hours or more per week. They involve many different goals and treatment strategies.

For both a comprehensive and focused treatment plan, it is important to choose the ABA therapy that is the best fit for you and your child. ABA therapy may involve many hours of therapy for your child each week. A child could be in ABA therapy for several years. Treatment may occur in both your home and community settings. The next sections were created to help your family consider different aspects of ABA therapy in your search for a good match.

Section 3: Logistics of an ABA Provider Organization

Scheduling

Once your child has completed their assessments, a recommendation for a certain number of hours will be made. ABA providers offer therapy at different hours or days. Each provider may handle scheduling services differently. Some providers require a minimum or a maximum number of hours of therapy each week. Times for treatment each day usually remain unchanged from week to week. Some providers want vacations to be scheduled in advance. If your child is ill, he/she may need to make up a missed session. Check the provider's policies on absences, illness, and makeup hours. It is helpful to determine if their scheduling policies and procedures work well for your family.

Center- or Home-Based Therapy

ABA therapy can be provided in your home, in a center, and/or in the community. Consider where it is best for your child's therapy to take place and ask potential ABA providers about this. The following information may help you make this decision.

Home-based therapy:

In home-based therapy, a **behavior technician** or team of technicians will come to your home to work with your child at scheduled times. Many agencies require a caregiver over the age of 18 to be home during treatment. Parents are often encouraged to observe some of the therapy each week so they can learn and practice the skills the behavior technician uses. If you are considering home-based ABA, it is important to discuss with the provider how they handle parent involvement. Some questions you may want to ask are: how should parents expect to participate? Are there times when parents are expected to not be present during therapy? How does the provider handle issues with space if other family members are home during therapy hours? These are important considerations when thinking about home-based therapy for your child.

Center-based therapy:

At center-based programs, parents typically drop their children off as if they were dropping them off at school or daycare. Some providers may include transportation to and from an ABA center as part of the service, or they may reimburse you for gas. It is important to ask about drop off and pick up routines and if supports are available to assist with transportation. If your child qualifies for Medicaid, you can speak with your child's supports coordinator about accessing transportation services as part of your child's plan.

Some agencies require a parent to stay at the center during treatment. It is important to ask about time requirements for your participation to avoid conflicts with your schedule. Ask if it is possible to schedule these meetings outside of your child's treatment time if that works better for you.

When choosing a center-based program, consider how far it is from your home or where your child is coming from. You might also think about traffic and the time of day you are commuting. If your child will be going to or coming from school, consider how far the center is from your child's school. Learning materials are often provided however, extra supplies may have to be brought from home. This may include diapers, wipes, or food and drinks. Some questions you may want to ask include: Are you able to bring your child's favorite toys to use during the day? What about expensive items like an iPad or a cell phone? How are items stored and what happens if they get lost or broken? Do you need to send your child with food, diapers, or other supplies?

School and ABA

Your child's ABA providers are usually not allowed to provide ABA services in a school setting. It is important to note that ABA services and educational services operate as two different systems. ABA therapy is usually provided as a medical service. If a child is evaluated by the

school district and qualifies for special education services, the child is legally entitled to a Free and Appropriate Public Education (FAPE) under the Individuals with Disabilities Education Act (IDEA) and should have an Individualized Education Plan (IEP).

Visit the MDE Family Matters webpage (<u>https://www.michigan.gov/mde/0,4615,7-140-6598_88187_81739---,00.html</u>) for more information about IDEA, IEPs, FAPE, and special education services.

If you or your child's teacher feels that he/she needs extra support, you can ask your child's ABA supervisor or **Board-Certified Behavior Analyst (BCBA)** to meet with your child's teacher to discuss **coordination of care**. If your child is attending school, but is not yet six years of age, you can decide the best way for your child to spend their time. It may be in ABA therapy, or a combination of school and ABA. If your child is over the age of six, they are required to be in school. However, sometimes children with autism need more intensive therapy because of learning or behavior issues. You and your ABA provider may determine that ABA would be a better placement than the school for a period while certain goals are worked on. You will need to involve the school and your child's doctor in this decision. You should consult with your ABA provider to determine the correct process for having your child attend reduced school hours.

ABA in the Community

Some agencies can arrange for services to be delivered in a community setting. Community outings for children with autism can be beneficial for several reasons. A behavior technician or an ABA supervisor can meet a parent and child at a park, play group, library, store, restaurant, or other areas where they can work on specific goals. It is important that the goals and community-based strategies are written into your child's treatment plan.

Additional Services and Coordination of Care

ABA providers can offer other services such as occupational therapy, speech therapy, physical therapy, etc. The center may also have a nurse and be able to give your child medications. If medication is needed, be sure to ask about agency procedures and policies around this. It might be convenient for your child to receive these additional services (if needed) in one place. It could also be good for your ABA team to work directly with the other professionals working with your child.

Even if your child gets additional services elsewhere, it is likely your ABA provider will want to coordinate care with other providers. When choosing an agency be sure to ask about how providers work together and how to help facilitate communication. It may help to share information about each provider, their phone and email, and any reports that you have received. It will be necessary for you to sign a **release of information** form for the providers to be able to talk with one another. Communication between providers is called **care coordination**. Care coordination is an important part of treatment that can improve your child's progress and save you time.

Culture and Background

Using a provider who understands the specific needs of your family is important. The skills and behaviors targeted in ABA are to help your child be successful within your family and community. Because of this, it is important to consider your cultural needs. You want a provider who recognizes the values and beliefs of your family. This will help them develop goals that are relevant. This can be even more important if English is your second language or if other family members do not speak English. Be sure to ask if an agency has providers who speak your native language. If they do not, ask about interpreter services. Interpreter services are often covered by insurance.

Although there may be positive aspects to using a provider who shares your background, it is not the only consideration. The provider's experience and wait list times are also important to consider when searching for a provider that meets the needs of your child and family.

Section 4: Clinical Aspects of Service

Clinical Staff Information

The individuals involved in providing ABA services have various levels of expertise and require different levels of supervision. Private insurance and Community Mental Health Service programs may have different requirements for who works directly with your child, provides oversight, and oversees your child's plan. There are often many acronyms used for certain types of providers and it can be confusing for parents. This section is meant to help clarify those who will be involved in providing ABA services for your child. It is important to ask about the structure to understand the different roles. It is also helpful to find out how long a provider has been in the field and to ask what support they have, especially if they are new to the field. Below is some information about who may provide services to your child:

Supports Coordinator (also known as a Case Manager)

- This person will coordinate all the services your child receives through Medicaid, including ABA. Some agencies refer to this person as a supports coordinator and others as a case manager.
- You must schedule an appointment with a supports coordinator to initiate an
 Individualized Plan of Service (IPOS). The IPOS will identify all services your child is
 eligible for and will track progress. The supports coordinator will also help you navigate
 the Medicaid system and will help to work through any access issues that arise.

ABA Supervisor (can be any type of these below):

 BCBA: A BCBA is a behavior analyst with a full certification from the Behavior Analyst Certification Board (BACB) and should have a license in behavior analysis in the State of Michigan. This professional is not required to have supervision to practice and is typically considered a fully independent practitioner.

- Qualified Behavioral Health Professional (QBHP): Medicaid requires that a QBHP oversees ABA treatment. The minimum requirement for this certification is that the provider has a master's degree and at least three courses completed in ABA and oneyears' experience working with people with ASD.
- BCaBA: A BCaBA is a behavior analyst with limited certification from the Behavior Analytic Certification Board (BACB) and should have a license in behavior analysis in the State of Michigan. This professional requires supervision from a fully credentialled BCBA to practice. They can supervise Registered Behavior Technicians and often assist with parent and staff training. They may also assist the BCBA with most parts of the development and implementation of a child's individualized treatment plan. BCaBA's remain under the direction and supervision of a Board-Certified Behavior Analysts (BCBA) even after passing their exam.

Behavior Technicians (typically who will doing the most therapy with your child):

- Behavior technicians are the people who will spend the most time working with your child. Training requirements differ depending on the agency and insurance provider requirements. This person will typically have a high school diploma or some college and additional training in ABA to provide the services as directed by the ABA supervisor. Some more experienced behavior technicians might also provide training and support to less experienced behavior technicians and caregivers on a child's plan.
- Registered Behavior Technicians (RBT). An RBT is a Behavior Technician that has had a specific 40-hour training curriculum based on requirements outlined by the BACB. They are closely supervised and monitored by a BCBA and must pass an exam to get the RBT certification.

Please note: Different ABA agencies have different expectations for training. Some agencies require less than 40 hours of training. Others require nothing past the 40 hours needed to obtain an RBT credential. Some require a variety of different trainings that are continuous. And some require that all their behavior technicians are certified RBTs.

Individual or Group Instruction

Your child's ABA treatment will vary depending on their specific needs. As described above, therapy can be carried out in many settings, including home-based, center-based, and community. Therapy may also be done one-on-one, in a small-group, or both. Small group instruction may not be appropriate for all children and not all ABA centers provide it. It is important to discuss these options to determine the best plan. The method of instruction depends on your child's abilities and needs. Oftentimes, services start with one-on-one time. As your child gains more skills, they might begin participating in more group activities. Regardless of which type of instruction method your child participates in, their progress will be continuously assessed. Your child's treatment plan should be updated regularly to make sure that their services meet their needs.

Individual Instruction

Individual instruction takes place solely between your child, and a skilled behavior technician. Individual instruction can be ideal for children who are working on basic skill development and are not ready to participate in a group setting. **Discrete Trial Training (DTT)** is one method used in individual instruction. This type of intervention is very intensive and allows for more learning opportunities (or **learning trials**) and can result in meeting goals faster. DTT uses structured learning trials with specific procedures to assist a child when they make an error and other specific procedures used when they complete tasks correctly. DTT is based on **positive reinforcement.** DTT is often administered by a behavior technician. Sometimes ABA providers refer to this as table time, learning time, or one-on-one.

The specialized nature of individual instruction allows for your child's environment to be adapted to work on specific goals. **Natural Environment Teaching (NET)** is used to mimic settings at home with individualized attention. Examples of this include eating at the dinner table, brushing teeth, or playing with a sibling. NET training is not as structured as DTT, but the goal is to increase learning through one-on-one activities. Ask your child's treatment provider for a full list of interventions offered.

Benefits:

- Individual instruction can occur either in a home or center-based settings.
- Child receives more direct attention from the behavior technician.
- More learning opportunities are available, and skills are usually acquired faster.
- Controlled environment and one-on-one attention help to minimize distractions during instruction.
- Does not require that the child have any specific skills to participate.

Limitations:

- Individual instruction settings are highly controlled with intensive supports from providers during the entire session.
- There is often the need for a **generalization** plan. This is where the child is taught how to use these skills with different people, places, and things.
- There may not be opportunities to teach peer-to peer social interaction such as turn taking and learning by observing other children.

Group Instruction

Group instruction is teaching that takes place in a group setting with peers. This is an ideal environment for children who are working on strengthening social skills. Group instruction often mimics other environments like school settings. This can be a good opportunity for children who are ready to work on learning routines to help them transition to school. Some ABA agencies provide time to work with peers or be in group settings while they are at the ABA clinic. An example of this might be "circle time" or "morning meeting" type activities. This might be a space to practice sitting in the group and demonstrating appropriate behaviors, for example greeting peers or problem solving. Some agencies provide specific group times that might be outside of their regular ABA session times. This might involve a group of children getting together to practice skills in a more structured way like a **social-skills group**.

Group opportunities are often different for children who are receiving home-based ABA services. If there are siblings, family members, friends, or neighbors that your child interacts with, then the ABA therapy could include them. If your child attends a day care or other group activity outside of school, sometimes arrangements can be made to have ABA provided in that setting. Speak with your ABA provider to learn if these options are available.

Benefits:

- May prepare your child for classroom settings.
- Allows child to develop skills that are important for social interactions and those less likely to be learned from one-on-one instruction.
- Children can often learn by observing their peers and receiving encouragement from peers when they are successful.
- Is often ideal for children who have mastered a basic level of social skills that will allow them to interact with others.

Limitations:

- Settings that are less controlled than one-on-one instruction.
- Need to have some basic skills to get the full benefit.
- For children who have not yet developed these skills, individual instruction may be a better option.

Parent Training

It is expected that parents will be part of ABA therapy. This is sometimes called by different names such as parent training, family skills training, parent consultation. It usually consists of meetings between parents and the ABA supervisor. As a parent, you are your child's first teacher and an important part of your child's treatment team. However, there may be many new concepts for you to learn when your child starts ABA. You might learn basic behavior change techniques or parenting strategies to use with your child. You might also learn the strategies being used in the ABA therapy session. This includes techniques to teach communication skills, social skills, or toileting skills that you can practice at home. Some providers offer parent training through individual or group sessions. Providers are required to offer this training to parents. Be sure you ask for these services and to be prepared to practice activities and work as part of the team.

Toileting

Many children with autism experience challenges with toilet training. Some behavior analysts specialize in toilet training and can work on this with your child. If this is a concern, you may want to ask if this is something the provider will include. Be sure to ask about policies around toilet training, such as toileting children of a different or same gender. Ask where the child will be using the bathroom to determine if it is an individual toilet or stalls. It is also important to

share if you have any religious or cultural expectations regarding toilet training. The ABA provider should include the parent in toilet training process.

Telemedicine

Ongoing concerns about COVID-19 have prompted many agencies to start providing **telemedicine** services. Telemedicine is healthcare that is provided remotely, usually through a computer, tablet, or mobile device. Ask your ABA provider if telemedicine is available at their agency and if they think your child would benefit from it. It is important to ask if your insurance covers telemedicine services.

Benefits:

- Convenient access to care from the safety of home.
- Avoiding traffic and commute time.
- Limiting the number of people that you and your family encounter.

Things to consider:

- Limited ABA services available through telemedicine.
- Therapy may look different from what your child would receive in person.
- Parents/caregivers may encounter technical problems with internet connectivity or devices during therapy.
- It may be difficult to find a quiet, distraction-free space while at home with other family members.
- It is also important to note that the provider may not be able to see and hear all **verbal** and **non-verbal** communication during telehealth sessions. This could reduce the effectiveness of the therapy.



Glossary

ABA Provider: An ABA provider is an organization/clinician that provided ABA therapy services. It is important that a Board-Certified Behavior Analyst (BCBA) be on staff.

ABA Supervisor: A person with specialized training in ABA. Their role is to create and monitor the treatment plan. They will do this by spending time with the behavior technician(s) working one-on-one with your child, caretakers, and other treatment team members. They will review data, complete observations, and provide ongoing support throughout treatment. This person may hold a *BCBA*, *BCaBA*, or *QBHP* credential (see definitions below). An ABA supervisor should spend at least 10% of the total weekly therapy time conducting supervision sessions with the treatment team.

ABA Treatment Plan: A treatment plan is a written document that is created by an ABA supervisor specifically for the child receiving ABA services. This document is individualized for your child and contains information gathered by the ABA supervisor. The document may include background and history of the client, diagnosis, medical history, assessment results, treatment goals, treatment intensity or hours per week recommended, and service delivery.

Applied Behavior Analysis (ABA): Applied Behavior Analysis is an evidence-based therapy that can improve social skills, communication, teach daily living skills, and decrease significant problem behaviors. It is effective for children and adults and can be used in a variety of settings (schools, homes, clinics). ABA aims to improve an individual's overall functioning and skills to reduce symptoms and problem behaviors.

Approved Autism Evaluation Centers (AAEC): Approved Autism Evaluation Centers are typically used by private insurance companies. They are sites or centers that have been pre-approved and identified by your insurance provider to make or confirm an ASD diagnosis. Your insurance provider may require you receive an evaluation from their list of AAECs to have your ABA service covered by the insurance.

Autism Alliance of Michigan (AAOM): The AAOM is a statewide organization that helps families navigate services. The AAOM works with all families, including children not yet diagnosed to those who have had an autism diagnosis for many years. AAOM focuses on improving the quality of life for individuals with autism through education, access to comprehensive services, community awareness, inclusion efforts, and coordinated advocacy.

Autism Spectrum Disorder (ASD): ASD is a developmental disorder that involves challenges in a child's behaviors, communication, social skills, and restricted or repetitive behaviors that affect their daily functioning. It is typically diagnosed in childhood. ASD affects each person differently

and symptoms vary from person to person. ASD can only be diagnosed by a Developmental Pediatrician, Pediatric Neurologist, Child Psychologist, or Child Psychiatrist.

Behavior Technician: A behavior technician is a person who assists in delivering the behavior analysis services and is under the direction and supervision of a Board-Certified Behavior Analyst (BCBA) or a Qualified Behavioral Health Professional (QBHP). They work one-on-one with the child receiving services by delivering the direct behavior analytic services, implementing the treatment plans created by the BCBA or QBHP, and collecting data. One or more behavior technicians may work with your child.

Board-Certified Behavior Analyst (BCBA): A BCBA is a person with a graduate-level certification in Applied Behavior Analysis. A BCBA receives a nationally recognized certification after completing graduate-level course work, supervised field work, and passing a board exam. A BCBA is responsible for many aspects of your child's ABA treatment including but not limited to conducting assessments, developing treatment plans, training and supervising staff, meeting and training parents, and analyzing data.

Board Certified assistant Behavior Analyst (BCaBA): A BCaBA is an undergraduate level certification in behavior analysis. A BCaBA receives a nationally recognized certification after completing undergraduate-level course work, supervised field work, and passes a board exam.

Community Mental Health Services Program (CMH): CMHs are state funded organizations that provide a comprehensive range of services and supports to children, adolescents and adults with mental illnesses, developmental disabilities, and substance use disorders in all 83 Michigan counties. They provide 24-hour emergency/crisis response services, screen admissions to state facilities, act as the single point of entry into the public mental health system and manage mental health benefits for persons enrolled in the Medicaid, MIChild and Medicaid Waiver programs.

Qualified Behavioral Health Professional (QBHP): A QBHP is a person who is working toward becoming a BCBA. They may be in a graduate program completing their course work and fieldwork hours, or they may have completed their work but have not taken their board exam yet. They must have a master's degree, but not necessarily in ABA. They must have completed at least three courses in ABA and have at least one year's experience working with people with autism. Their work is overseen by a BCBA.

Behavior: A behavior is any observable action done by an individual. The term "behavior" is used frequently in ABA. It does not only mean problem behaviors such as screaming, hitting, kicking, biting, or throwing items. Behaviors also include talking, walking, eating, spinning, rocking, etc.

Behavior Analyst Certification Board (BACB): A BACB is a nonprofit corporation established in 1998 to meet professional certification needs identified by behavior analysts, governments, and people who receive ABA services. The BACB's mission is to protect people who receive ABA

services by systematically establishing, promoting, and disseminating professional standards of practice.

Behavior Health Professional: Behavior health professionals are specialists, such as psychologist, psychiatrists, mental health counselors, behavior therapist, and social workers, who provide counseling and direction to people dealing with challenges like addiction, physical limitations, and mental illness.

Comprehensive Treatment Plan: A comprehensive treatment plan is a plan that targets multiple skills across all the developmental domains (such as cognitive, social, language, social-emotional, physical) that are affected by a child's ASD. These programs tend to range from 26-40 hours of direct treatment plus supervision per week.

Coordination of Care/Care Coordination: Coordination of care occurs when all the participants involved in a child's care or treatment work together. This collaboration is done to ensure that a child receives safe and effective treatment. Information is usually shared among those working with a child to help improve care. This coordination of care can include the client, parent/guardian, BCBA or QBHP, Supports Coordinator, social workers, therapists (Occupational, Speech, Physical), physicians, teachers, and anyone else who can contribute to the child's treatment success.

Diagnostic Assessment or Evaluation/Medical Autism Evaluation: This is a diagnostic test conducted by qualified professionals such as a psychologist, psychiatrist, pediatric neurologist, developmental pediatrician to diagnose if an individual has autism spectrum disorder. It is necessary to use a specific evaluation tool called the **Autism Diagnostic Observation Schedule (ADOS).** It involves an observation of the individual by the clinician. It can also include an interview called the **ADI-R (Autism Diagnostic Interview- Revised)** and may include other evaluations such as those that measure cognitive and day-to-day functioning.

Discrete Trial Training (DTT): DTT is a technique used in ABA therapy to help teach a child new skills by breaking down skills into smaller, easier to teach parts and using specific actions, such as rewards and prompts, to help a child learn these skills quickly. It is most often conducted in one-on-one treatment sessions designed specifically to meet a child's needs based on their treatment plan.

Evidence-based Treatment (EBT): Treatments that have been proven effective to some degree through evaluating the outcomes are referred to as EBT. If something is considered evidence based, it means it combines the best research evidence with clinical expertise and patient values to achieve the most favorable medical outcomes for the patient. For ABA, it means that the therapy is likely to be effective in changing target behavior if it used as designed in the research.

Free and Appropriate Public Education (FAPE): The Individuals with Disabilities Education Act (IDEA) guarantees the right to a free and appropriate public education (FAPE), in the least

restrictive environment, at no cost to the child's parents. It is defined as an educational program that is individualized to fit the specific needs of a child having a disability or qualifying for special education. The program must meet the child's unique needs, provide access to the general education curriculum, and meet state grade level standards.

Focused Treatment Plan: An ABA treatment plan that is focused on one area of development or challenging behavior is a focused treatment plan. Typically, a focused intervention is given for less than 20 hours per week and will focus on just one or two treatment goals at a time.

Functional Behavior Assessment (FBA)/Behavioral Assessment: A Functional Behavior Assessment or Behavioral Assessment is a type of test that helps the ABA supervisor obtain information about when, where, and why a challenging behavior occurs. This evaluation helps make an individual's treatment more effective in changing behavior. It is only conducted with consent from a parent/guardian. It may be conducted in the child's home or in the center where services are provided. It includes a review of records, interviews with the child or parents, collection and analysis of data, observations in different settings or situations and sometimes probing behavior in different conditions. An FBA assessment is different than and done separately from both a diagnostic and skills assessments.

Generalization: Generalization is the ability of a person to take the skills learned in ABA therapy and apply them in different settings, with different people, and with different items or stimuli. Generalization is a very important concept in ABA and is improved when parents and other caregivers are involved in treatment and use the ABA strategies in other places like the home and the school. Generalization is an important goal for a child, because this means they can demonstrate the skill successfully in different ways. For example, when a child sees a picture of a red apple in ABA therapy, the child is taught to call it an "apple". Generalization will occur when the child is able to use that skill in other ways, such as when the child is in the kitchen and sees a red or green apple and calls it an "apple".

Grievance: A grievance is a formal complaint, concern or problem that expresses dissatisfaction with any aspect of the operations, activities, or behavior of any person involved in your child's treatment. Depending on what the grievance is and what type of insurance you have, these processes might look different. If you have a concern, speak to your child's therapist or supports coordinator about the concern. If you have private insurance and you have a concern about your benefits or payment for services, you will need to file a grievance complaint with them. You should need to contact your insurance company to learn more about the process. For more information on how to initiate a grievance process visit https://www.michigan.gov/documents/mdhhs/RR Book English 635711 7.pdf.

Health Insurance Portability and Accountability Act (HIPAA): The HIPAA Act of 1996 is a federal law that required the creation of national standards to protect sensitive patient health information from being disclosed without the patient's consent or knowledge. HIPAA requires standards of how all medical information should be disclosed and protects a patient in case

their information is being disclosed without their consent. For more information about your rights under HIPPA visit <u>https://www.hhs.gov/hipaa/index.html</u>.

Individualized Education Plan (IEP): Every public-school child who receives special education and related services has an IEP. It describes the special education instruction, supports, and services a student needs to succeed in school. The IEP is developed by a team that includes key school staff and the child's parents. The team meets, reviews assessment information available about the child, and designs an educational program to address the child's educational needs that result from his or her disability.

Individualized Plan of Service (IPOS): An IPOS is a document that outlines a plan for individuals who have Medicaid services. It is person-centered and includes goals, strategies and services that are needed to help the individual improve their quality of life.

Individuals with Disabilities Education Act (IDEA): The Individuals with Disabilities Education Act (IDEA) is a law that makes available a free appropriate public education (FAPE) to eligible children with disabilities throughout the nation and ensures special education and related services to those children. For more information about the IDEA visit <u>https://sites.ed.gov/idea/</u>.

Learning Trial: A learning trial occurs when a particular skill is being taught and includes the instruction, the response, and the consequence to the response. Learning trials are very important in ABA. They are presented in a way that helps children get more opportunities to practice skills then they would have in their normal setting. For example, if a child was learning to identify their body parts, one learning trial would consist of an instruction such as "touch your nose". The response of the child should be to touch their nose and the consequence would be a reward (toy, praise, etc.) or a correction. Learning trials are separated by a short period of time and then tasks are repeated to improve learning.

Medicaid: Medicaid is a government funded program that provides health coverage for eligible low-income adults, children, pregnant women, elderly adults and people with disabilities. The program is funded jointly by states and the federal government.

Medical Health Professional: Professionals such as physicians, surgeons, physician assistants, pharmacists, medical assistants, nurses, physical therapists, occupational therapists, dentists, psychologists, psychiatrists or who perform services in a health profession are considered medical health professionals.

Michigan Autism Benefit: The Michigan Autism Benefit provides coverage of Applied Behavior Analysis (ABA) services provided for Medicaid eligible children under 21 years of age who are diagnosed with Autism Spectrum Disorder (ASD) and who meet medical necessity criteria. ABA is a Medicaid covered service under the Behavioral Health Treatment "umbrella" within the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) benefit. For more information visit <u>https://www.michigan.gov/autism/0,4848,7-294-63682---,00.html</u>. **Multidisciplinary team:** The multidisciplinary team is a team of professionals involved in the treatment of your child's care. It includes all the different therapists, such as speech, occupational, physical, or other professionals who work together to create a comprehensive treatment plan for your child. The team can share information and expertise from their area of knowledge to help overcome barriers or challenges within a child's care. The team works together to make sure a child receives the best possible treatment.

Natural Environment Teaching (NET): NET is a method of teaching in ABA where the learner is taught in natural real-life settings and situations, rather than in a therapy room or clinical setting. This method helps teach generalization of skills in different settings. For example, when learning about different foods, a child would be taken into a kitchen to see and learn about these items where they are typically found.

Non-Verbal: An individual who is non-verbal shows deficits in the area of communication. A child who is non-verbal may not use their voice to speak or have very limited speech but may be hard to understand and has difficulty expressing their needs and wants effectively.

Positive Reinforcement: Positive reinforcement is a consequence that follows a behavior with the expectation that it will result in an increase in that behavior in the future. It may be a reward given immediately following a desired behavior. Positive reinforcement can be a very important part of your child's therapy session.

Private Insurance: Any health insurance plan not run by the federal or state government is private insurance. Private insurance can be purchased from a variety of sources: your employer, a state or federal marketplace, or a private marketplace.

Registered Behavior Technician (RBT): A Registered Behavior Technician (RBT) is a person who has received at least 40 hours of training in ABA and shown competency in various areas of an ABA. They have also passed a certification exam by the Behavior Analysis Certification Board. Like a behavior technician, this is a person who assists in delivering the behavior analysis services and are under the direction and supervision of a Board-Certified Behavior Analyst (BCBA) or a Qualified Behavioral Health Professional (QBHP). They work one-on-one with the child to deliver direct services, implement the treatment plans created by the BCBA or QBHP, and collect data.

Release of information: There are many laws that protect a person's private health information. For one provider to speak with another, the patient or their parent/guardian must sign a release of information form. This document allows providers to share protected health information. The release of information form should clearly state who, when, and what information is to be shared, and for how long. The parent has the right to revoke a release of information if they choose.

Skills Assessment: An ABA skills assessment is an evaluation of a child's current skills and abilities. An ABA supervisor may use different tools to assess a child's abilities. This assessment

is different and separate from a functional behavioral assessment/behavioral assessment. The skills assessment may test your child's verbal abilities including how they ask for something, as well as their ability to follow directions. They will assess your child's problem-solving skills, social skills, imitation skills or other things. These assessments are chosen by the BCBA and are used to help develop individualized treatment goals for your child. A skills assessment is usually administered before ABA therapy has started and then repeated every 6 months.

Social Validity: Social validity is a term used to describe the importance, satisfaction, and acceptability of the treatment developed for your child and the outcomes of that treatment. Skills and behaviors targeting in your child's treatment plan should affect their overall wellbeing in the real world and their quality of life in a meaningful and positive way.

Social-Skill Groups: Social skill groups are a small group of children or adolescents grouped together by age or functioning level, who meet regularly to work on social skills. The group is run or overseen by an ABA supervisor. Children in the group may work on skills using role-playing, field trips, and other group activities that help children learn how to interact with others in various situations and environments.

Support Coordinator (Also known as a Case Manager): A support coordinator is an individual who is responsible for assisting individuals with disabilities and their families in accessing services and resources in the community based on the child's individual needs. This is a provider who families will most often encounter when receiving services from a Community Mental Health Service Program. This provider works to ensure that all services are coordinated, and the needs of the individual are being met through the services.

Telemedicine: refers to the practice of caring for patients remotely when the provider and patient are not physically present with each other. It is the delivery of health-related services using technology such as video conferencing or mobile health apps. Many service providers are using telehealth to help deliver services remotely.

Verbal: Verbal behavior is any form of vocal or other communication a child uses to get their needs met. This includes gesturing, pointing, sign language or writing. This is an area that is often targeted in ABA treatment plans.