



Procedural changes related to autism spectrum disorder

To ensure members receive the appropriate quality and level of care for autism spectrum disorders (ASD) and autism early intensive behavioral interventions (EIBI), Blue Cross and Blue Shield of Minnesota and Blue Plus will be publishing an updated medical policy relating to assessment of autism spectrum disorder and has developed a new medical policy regarding the steps to follow when providing early intensive behavioral interventions.

- **Autism spectrum disorder: Assessment**
- **Autism spectrum disorder: Early intensive behavioral interventions (EIBI)**

The updated assessment policy will replace the pervasive developmental disorders policy. A summary of the medical policies will be available on providers.bluecrossmn.com by May 15, 2009, under the *upcoming policies* tab of the Medical and Behavioral Health Policy Manual. These policies will become effective on August 17, 2009.

Along with the policies, Blue Cross is making some procedural changes related to diagnostic assessment requirements and the initiation and continued services review for EIBI. These changes apply to all Blue Cross and Blue Plus members enrolled in fully insured plans or Minnesota Health Care Programs, with the exception of members enrolled in SecureBlue or CareBlue.

ASD assessment requirements

To ensure appropriate care and use of benefits, Blue Cross requires the following to be done prior to the initiation of health services for EIBI:

- A comprehensive diagnostic assessment must have been completed within the past 12 months.
- The assessment must be on file in the provider's office as part of each patient's medical record.

In addition, effective August 17, 2009, providers are expected to follow the diagnostic assessment standards as described in the assessment section of the Blue Cross behavioral health medical policy, autism spectrum disorder.

EIBI authorization and concurrent review process

Effective August 17, 2009, a prior authorization (PA) will be recommended for all EIBI. In addition, a concurrent review will be performed at 180 days of service with a medical necessity review based on criteria detailed in the Blue Cross autism EIBI medical policy. These changes only apply to Blue Cross and Blue Plus members enrolled in fully insured plans or Minnesota Health Care Programs, with the exception of members enrolled in SecureBlue or CareBlue.

Failure to comply with the PA and concurrent review recommendation will result in a retrospective review, which could mean provider liability for denied services.

Please see the attached FAQ sheet for additional detail.

Questions?

If you have questions, please contact provider service at **(651) 662-5200 or 1-800-262-0820**.

Frequently Asked Questions for ASD/EIBI procedure changes bulletin

1. **What services does Blue Cross and Blue Shield of Minnesota and Blue Plus currently cover for children with Autism Spectrum Disorders (ASD)?** Blue Cross fully insured products cover assessments and treatments for ASD such as ST/PT/OT, individual/family therapy, and intensive behavioral therapies. Early Intensive Behavioral Interventions (EIBI) include Applied Behavioral Analysis (ABA), Intensive Early Intervention Behavioral Therapy (IEIBT), Lovaas, and Discrete Clinical Trial Training (DCTT).
2. **When does this change become effective?** The medical policies and the business process changes become effective 90 days after the release of the provider notification bulletin.
3. **How will this change with the new policy?** Coverage and benefits will not change as a result of this new policy. Coverage benefits for self-insured accounts vary by employer group and are not affected by this change.
4. **How does this compare to the approach of other health carriers?** Our review approach will be similar to other carriers who have authorization requirements for treatment. Our review standards are regulated by Minnesota state law and by the National Committee for Quality Assurance (NCQA).
5. **Why does Blue Cross coverage differ from other health carriers?** Our mission is to improve the health of our members and our community. In the case of ASD, even though significant controversy remains about the effectiveness of specific treatments, it is our belief that patients afflicted by this serious developmental condition deserve every opportunity to lead a more productive and meaningful life. We cannot speak to the policies of other carriers.
6. **Why are you implementing this change now?** Blue Cross is continually striving to improve the value of all medical and behavioral services delivered to our members. We are enhancing our ASD policies to better evaluate and ensure the effectiveness of EIBI therapies on an individual case-by-case basis. We believe the EIBI policy and the individualized treatment plan (ITP) progress evaluation tool will help us determine the most effective treatments for our members.
7. **What is the purpose of these individual case reviews?** Our goal is to ensure our members are receiving the most appropriate and clinically sound treatment for their condition in order to meet their treatment goals.
8. **What exactly will be included in an Individualized Treatment Plan (ITP)?** Each ITP will include treatment goals, strategies, progress notes, etc., and will include a list of the professionals who are providing their care. The goal of this process will be to have a documented record of the member's diagnosis and treatment. The ITP will be reviewed in six-month intervals to ensure sufficient progress is being achieved toward their ITP treatment goals. Because the ITPs are unique to each patient, the determination of progress will be a joint decision between Blue Cross and the provider responsible for supervision of the ITP.

9. **Who will be conducting these reviews?** A Blue Cross licensed behavioral health clinician will be conducting the reviews in conjunction with the member's provider responsible for supervision of the ITP. Additional reviews, when needed, are completed by our internal Ph.D. psychologists and M.D. psychiatrists. Only an M.D. psychiatrist can deny a request for authorization.
10. **How do I appeal if I don't agree with Blue Cross' interpretation of progress?** Blue Cross members and providers continue to have the same rights of appeal that exist through today's processes. Additional reviews and responses to appeals are performed by our internal Ph.D. psychologists and M.D. psychiatrists. External reviews and appeals are performed by M.D. psychiatrists. Our appeal standards are regulated by Minnesota state law and by the National Committee for Quality Assurance (NCQA).
11. **Exactly how will this impact Blue Cross members currently receiving EIBI therapies?** If a member is currently receiving treatment, their provider will be asked to submit written documentation of an ITP in which they agree to participate. EIBI services will continue as long as the member is continuing to show sufficient progress towards their individualized treatment goals. If a member is not demonstrating clinically significant progress towards their treatment goals, we will refer the member to our Behavioral Health Dedicated Clinical Specialist team to seek alternative treatments/services to meet their and their family's specific needs.
12. **What do members who wish to initiate EIBI therapies need to do?** If a member is just beginning to seek EIBI therapy, they won't need to do anything. Their provider will be asked to submit the required paperwork documenting an appropriate assessment and diagnosis of ASD and an initial ITP will be developed. From there, regular assessments will be performed as in the case of existing members outlined above.
13. **What will providers need to do?**
 - New authorization for EIBI services. If providers are seeking to start a new patient in EIBI therapies/programming, they must submit a prior authorization request to Blue Cross using the **Early Intensive Behavior Intervention Service Request** form, available at **providers.bluecrossmn.com**. If the authorization is granted, the provider responsible for supervision of the ITP will submit an updated progress report on the same form documenting the member's progress towards the treatment goals identified on their ITP at six-month intervals.
 - Reauthorization for EIBI services for members already receiving EIBI as of 8/17/09. If providers have been seeing a patient in EIBI therapies/programming for more than six months as of August 17, 2009, a Blue Cross behavioral health clinician reviewer will contact them beginning August 17 to submit the **Early Intensive Behavior Intervention Service Request** form for review. If the authorization is granted, we will consider this the equivalent of an initial authorization and the provider responsible for supervision of the ITP will submit an updated progress report on the same form documenting the member's progress towards the treatment goals identified on their ITP at six month intervals. If the authorization is not granted, we will refer the member to our Behavioral Health Dedicated Clinical Specialist team to seek alternative treatments/services to meet their and their family's specific needs.

- Reauthorization for EIBI services for members already receiving EIBI as of 1/1/10. If providers have been seeing a patient in EIBI therapies/programming, for more than six months as of January 1, 2010, a Blue Cross behavioral health clinician reviewer will contact them beginning January 1 to submit the **Early Intensive Behavior Intervention Service Request** form for review. If the authorization is granted, we will consider this the equivalent of an initial authorization and will expect the provider responsible for supervision of the ITP will submit an updated progress report on the same form documenting the member's progress towards the treatment goals identified on their ITP at six month intervals. If the authorization is not granted, we will refer the member to our Behavioral Health Dedicated Clinical Specialist team to seek alternative treatments/services to meet their and their family's specific needs.
- 14. **Will we still be able to see the same providers?** As long as providers remain within the Blue Cross network of providers, there will be no changes in the availability of specific providers or clinics.
- 15. **What if a member is unable to get a multidisciplinary assessment within the next six months, and they wish to begin an EIBI treatment program?** A multidisciplinary assessment must have been done in the preceding 12 months prior to receiving EIBI services. However, it is not our intent to delay treatments. As such, a member may seek the input of several approved providers to fulfill the assessment requirements rather than waiting for their evaluation and testing through a single provider group or clinic.
- 16. **Will an assessment done through a child's school qualify?** No. Assessments done through the school system address the educational needs of the child. However, educational assessments are usually an important component in the multidisciplinary assessment of a child suspected of having ASD, so very likely they would be reviewed, but they are not the same as the required medical assessment.
- 17. **Is Blue Cross conducting a research project related to these changes?** No, but we will continue to evaluate the effectiveness of this policy to guarantee the services provided to our members are enhancing the quality of their care and improving their health outcomes.