# MORE IS MORE NOT EITHER OR

UNDERSTANDING AND COLLABORATING ACROSS SERVICE ENTITLEMENTS FOR STUDENTS WITH ASD



# GOALS / OUTCOMES

- ·Clarify what is meant by ABA
- Increase understanding of school entitlements and ABA insurance benefits
- · Identify similarities and differences in development and implementation of an IEP and ABA treatment plan
- Outline ways to maximize the combined intensity and efficacy of IDEA services and insurance-based services

## WHAT DO YOU MEAN BY "ABA"?

- ·ABA as a SCIENCE?
- ·ABA as a SERVICE?
- •ABA as a PRACTICE?
- ·ABA as an INTERVENTION?

#### DHHS DEFINITION — ABA AS A SERVICE

HTTPS://WWW.MICHIGAN.GOV/DOCUMENTS/MDHHS/ABA\_POLICY\_PROVIDER\_FAQS\_514113\_7.PDF

- ABA is the science of analyzing socially significant behavior and producing behavior change by modifying related environmental variables.
- ABA services may be used to address issues relevant to those with ASD including, but not limited to, language acquisition, peer interactions and social skills, following routines, self-help and daily living skills, and reducing challenging behaviors.
- ABA services means services provided to clients that are included in the practice of applied behavior analysis in Michigan.



# ABA AS A PRACTICE

- "Practice" of ABA:
- Design, implementation, & evaluation of instructional & environmental modifications to produce socially significant improvements in human behavior (PA 403)
- Practice of ABA includes:
  - The empirical identification of functional relations between behavior and environmental factors (FBA)
  - The utilization of contextual factors, motivating operations, antecedent stimuli, or positive reinforcement
  - The utilization of other strategies to help individuals develop new behaviors, increase or decrease existing behaviors, and emit behaviors under specific environmental conditions
  - Use of ABA INTERVENTIONS that are based on scientific research and the direct observation and measurement of behavior and the environment.

#### **ABA AS INTERVENTIONS**

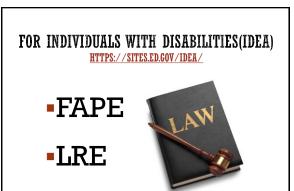
- Prompting
- Reinforcement
- Chaining
- Task Analysis
- Time Delay
- FBA
- Naturalistic Interventions
- DTT
- Pivotal Response Training
- PECS





#### THE CHILD'S RIGHT TO AN EDUCATION

- All States provide that resident students receive an education based on a curriculum of study intended to support career/college readiness.
- Compulsory Education at age 6 in MI
- Parents have a number of options to provide this education:
  - enrollment in public schools
    - district of residence / school of choice
  - charter school, including cyber schools
  - enrollment in non-public schools
  - parent instruction via
    - registered home school (functionally a private school)
    - home education program
  - shared time with core instruction in non-public school (including home school) and non-core instruction in public school



## FAPE IS AN EQUITABLE EDUCATION



#### WHAT IS FAPE?

https://sites.ed.gov/idea/

Special Education & Related Services = Specially Designed Instruction

Adapting the content, methodology or delivery of instruction

- To address unique needs resulting from the disability
- To ensures access to the general curriculum to meet the educational standards that apply to all children in the state

#### IEP is the offer of FAPE

#### **U.S. Supreme Court Interpretations:**

- Board of Education of Hendrick-Hudson Central School District v. Rowley, 458 U.S. 176 (1982): "Reasonably calculated to achieve EDUCATIONAL BENEFITS."
- Endrew F. v. Douglas County School District Re-1, 137 S. Ct. 988 (2017):
   "Reasonably calculated to make progress appropriate in light of circumstances.... to meet challenging objectives." Appropriately Ambitious
- Larger Implications of ADA
- USDOE: 11-16-15 Dear Colleague Letter 12-7-17 Q&A on Endrew

#### LEAST RESTRICTIVE ENVIRONMENT

"To the maximum extent appropriate, children with disabilities.... are educated in the general education classroom with children who are not disabled..."

....and that special classes, separate schooling, or other removal of children with disabilities from regular education environment occurs only if the nature or severity of the disability is such that education in regular classes with the use of supplementary aides and services cannot be achieved satisfactorily."

34 C.F.R. §300.114

## SCHOOL REQUIRED PRACTICES

#### **ESSA**

Evidence-based Interventions

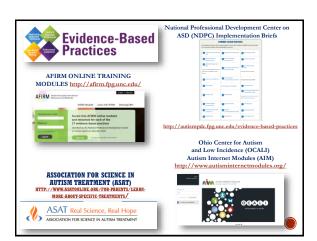


#### IDEA

- References to Research-based Interventions and Scientifically-based Instructional Practices
- Required to include services based on peerreviewed research to the extent practicable
- -FBA









#### **AUTISM INSURANCE BENEFITS**

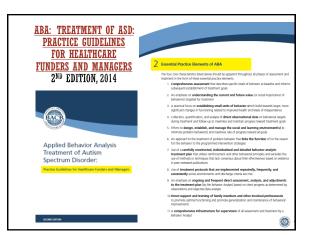
HTTP://WWW.MICHIGAN.GOV/AUTISM/0,4848,7-294-63681---,00.HTML HTTPS://AUTISMALLIANCEOFMICHIGAN.ORG/INSURANCE-FACTS/

- Michigan's Autism Insurance Reform legislation went into effect October 15, 2012.
- <u>Public insurance</u> (under 21) and private companies regulated by the state (through 18) are mandated to cover services (including Behavioral Health Treatment (ABA)) related to the diagnosis and treatment of ASD.
- Self-funded insurance plans are not mandated to provide coverage, but if they do, they may submit reimbursement requests.
- An evaluation and eligibility process is established.

## AUTISM INSURANCE BENEFITS PLANS BEHAVIORAL HEALTH TREATMENT

- Private Insurance: "Treatment plan"
- Public Insurance
- "Individual Plan of Service (IPOS)" that includes a Behavioral Plan of Care (e.g., ABA treatment plan)





# COMPONENTS OF BEHAVIORAL HEALTH TREATMENT PLAN

- Differences across providers
- In General:
- Biographical Information
- Team (people who contributed to the plan)
- Assessment of Need
  - Direct Observations
  - Functional Relations
- Treatment Goals (small units)
- Treatment Plan (use of reinforcement, contextual factors, antecedents, other behavioral principles and interventions)
- Hours of Service
- Progress Monitoring

## PRIVATE INSURANCE — BCBS OF MI NEW DIRECTIONS

 ${\tt HTTPS://WWW.BCBSM.COM/CONTENT/DAM/PUBLIC/COMMON/DOCUMENTS/BCBSM-ND-ABA-MEDICAL-NECESSITY-CRITERIA.PDF}$ 



# ENTIRES: / WWW.MICHIGAN.GOV / DOCUMENTS / MORHS / ARRA POLICY PROVIDER FAGS 514113 T.PDF Section / Apparents. Section / Apparents.

DEVELOPMENT	S AND DIFFERENCES IN T AND IMPLEMENTATION D ABA TREATMENT PLAN

# SCOPE OF PRACTICE

The IEP and IPOS incorporate many of the same principles of behavior and evidence based interventions, but differ in scope, environments, and service providers.

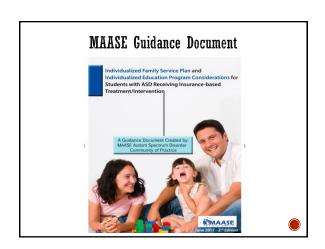
	IEP	IPOS
Scope	FAPE Special Education	ABA Service
Environment	School / LRE	Home, Clinic, Community
Service Providers	General Ed Teachers Special Ed Teachers Related Service Providers Paraprofessionals	BCBA or otherwise licensed

PRIMARY DIFFERENCES BETWEEN INSURANCE COVERED ABA TREATMENT PLAN AND IEP

- Scope and Focus
- **•ONLY Behavioral Treatment**
- •Goals & Benchmarks/Objectives written for shorter time frame (2 weeks vs. 1 year / 9 week reporting)

ITTP://MAASE.PBWORKS.COM/W/FILE/FE	RAL HEALTH TREATMENT PLAN TCH/123664998/ATTACHMENTF COLOR.PI ABA-Interfaces
ABA as Science, Practice, and Service/Techniques	IEP Development & Implementation Practice Elements
Legensii Unigrishijned led in this column taken from ABA Treatment of ASC: Practice Guidelines for Unigrishijned led in this column taken from ABA Treatment of ASC: Practice Guidelines for riesabhorer Funders and Monagers (BACS Guidelines for Monagers (BACS Guidelines for Monagers for Monag	
<ul> <li>Collecting information systematically regarding behaviors, environments and task demands</li> <li>Comprehensive assessment that describes specific levels of behavior at baseline and informs subsequent establishment of treatment goals</li> </ul>	<ul> <li>Present level of Academic Achievement and Functional Performance (PLAAFP) outlines current (trassine) stats (compared to peems) describing an and propries in the general edistation currentation, including readiness to postsecondary life (future education/training, future employment, community participation, nederechedre level.</li> </ul>
<ul> <li>An emphasis on understanding the current and future value (or social importance) of behavior(s) targeted for treatment</li> </ul>	<ul> <li>An emphasis on needs related to the disability that impact access and progress in general education curriculum and functional performance (activities of daily living independence, engagement) as well as future education, employment, community participation, independent living</li> </ul>
<ul> <li>A practical focus on establishing small units of behavior which build towards larger, more significant changes in functioning related to improved health and levels of independence</li> </ul>	<ul> <li>Identification of year-long goals accompanied by benchmarks / objectives calculated to build to achievement of the goals, which in turn advances the student in the general education curriculum that is designed to prepare all students for next steps at the postsecondary level</li> </ul>
<ul> <li>Collection, quantification, and analysis of direct observational data on behavioral targets during treatment and follow-up to maximize and maintain progress foward treatment goals</li> </ul>	<ul> <li>Each benchmark/objective is accompanied by evaluation procedures (including direct observation) and evaluation schedules to monitor progress toward the identified annual goals and the benchmarks / objective</li> </ul>
<ul> <li>Adapting environments to promote postere behaviors</li> <li>Efforts to design, establish, and manage the social and learning environment(s) to minimize problem behavior(s) and maximize rate of progress toward all goals</li> </ul>	<ul> <li>Each IEP has a prompt inquiring whether the student in question engages behavior that interferes with learning of sell or others, and if so, what steps should be baken. Identification of the need for positive behavioral interventions, strategies and supports, including positive behavioral support plans undoir environmental adaptations and other artecoders support plans and/or environmental adaptations and other artecoders services."</li> </ul>
<ul> <li>The empirical identification of functional relations between behavior and environmental factors, known as functional assessment and analysis.</li> <li>An approach to the treatment of problem behavior that links the function of (or the reason for) the behavior to the programmed intervention strategies.</li> </ul>	<ul> <li>Although IDEA only references Functional Behavioral Assessment as a reactive strategy in the discipline context, case law strongly supports the conclusion and practice that an FBA should be conducted prior to the development of any Positive Behavior Support Plan</li> </ul>

	ABA as Science, Practice, and Service/Techniques	IEP Development & Implementation Practice Elements
	Applying prefectionment is provide positive behaviors provide learning, four of contentual retails, evoluting operations, seterated status, of public instructions of public instructions of contentual contentual positives, and extentual develop new influences contentual contentual positives, and extentual positives secretarily contentual positives, and extended positives analytic treatments plan facility, individualistics and establish pelhaviors analytic treatments plan facility, individualists and establish pelhaviors principles and establish the use of methods or fectingues that lock principles and establish the use of methods or fectingues that lock principles and establish the use of methods or fectingues that lock conference and establish the use of methods or fectingues that lock principles and establish the use of methods or fectingues that lock conference and conference and conference and principles principles.	<ul> <li>IECA requires that the EEP decreases on special education, related services, and suppresentation and services, and suppression to be based on per enviewed research to the extent practicating (i.e., available* per USCOE)</li> </ul>
:	Teaching lechniques to promote possible behaviors, e.g., discrete that framing, moderni, possible silvantime, profession, procession, proc	<ul> <li>White methodology is not always sterified in the IEP in order to preserve flexibility for instructional staff, is not numated one references to modering, social staffs instruction, PECIS, social stories, self-inarragement, posts, ("Colem, the student will") and in the Supplementary Aids and Services.</li> <li>If needed for a free appropriate public education, methodology would be written into an IEP.</li> </ul>
•	An emphasis on ongoing and frequent direct assessment, analysis, and adjustments to the treatment plan (by the Behavior Analyst) based on citent progress as determined by observations and objective data analysis	<ul> <li>IDEA requires the IEP to identify what progress monitoring data will be collected and with what frequency. While there is no IDEA mandate on the frequency of reporting progress to parents, it is considered best practice to report progress data on IEP goals to families as least as often as progress is recorded on students without an IEP.</li> </ul>
	Teaching parentisquardians to provide individualized interventions for their child child Direct support and training of family members and other involved professionals to promote optimal functioning and promote generalization and maintenance of behavioral improvements.	<ul> <li>IDEA requires the IEPT to solicit meaningful input of the family including their concerns for the declarition of their cold. With respect to interventions, IDEA identifies "purent counseling and training" as a possible related service. IDEA offenders "purent counseling and training" as resisting parents in understanding the special needs of their child, providing parents with information about child development, and helping parents to acquire the necessary skills that will allow them to support the implementation of their child's IEPC or IEPS.</li> </ul>
•	A comprehensive infrastructure for supervision of all assessment and treatment by a Behavior Analyst	<ul> <li>Administrative supervision of the implementation of the IEP and due process rights for families if the parents disagree with the content of the IEP or the IEP is not implemented as written</li> </ul>



		tion Program Considerations for eceiving Insurance-based	MAASE ASD CoP  2 <sup>nd</sup> Edition 2017		
		Considerations and	Implications		
8.	What are the considerations when requests are made to include autism insurance-based ABA treatment/intervention as a service in the IEP?	The IEP is created to accessing and progress curriculum. When deve education programs, reservices that are reaso ABA treatment/interven.	ism insurance-based ABA treatment/intervention. iddress disability-related needs relative to the child sing in age appropriate activities and the general loping the IEP, the IEP Team considers special elated services, and supplementary aids and nabby calculated to achieve educational benefit. tion is a methodology, and as such is neither of (from a flexibility perspective) to be included as		
10.	What should be taken into consideration when a 3 <sup>rd</sup> party therapist or parent requests to observe the child in the school setting?	school visitation policie other factors such as let Observers/visitors muc children and conduct the educational process for Observers are non-parti	icipants in classroom activities.  urpose of teacher evaluation are the sole purview		

<u>IE</u>				ONS FOR S				
				ASD Intervent	ion: Service Provision	on		
	ASD listery	ASD Interve						
				Early On <sup>®</sup> (Part C Only) (Dirth - 2) <sup>e</sup>	Michigan Mandatory Special Education Act (Birth - 26)	Medicaid (School Based Services)	Private Insurance	Medicaid (Sehavioral Health
Definition	Members of Team	Types of Service Defined - (Continued from page) page)	Plan Formal	Sign to child's 3 <sup>et </sup> birthday * relevaluation Family Torror Plan	IDEA (0-21)	• 67 to 1959*	Transment Play  I system, organisms, and exhibitation frequenties, and exhibitation frequenties play exhibitation frequenties play for any organisms, and exhibitation of play for any organisms of the designation and that a deversage in by a board and that a deversage in by a board and the a opportune orderina, and the angeline or orderina or a preparation of a makes a preparation or orderina and orderina a	Stating gaids, based in ago; Veterests, prehierones  - Establishment of meaning A gai  is advise silverified underset  - Amount scope, and duration of violating A common and
Service Plan Type	Types of Service Defined	Qualified	Plan Reviews	Annual meeting to evaluate IFSP and revise as appropriate	IEP mat be reviewed percelophy, but not less than amougly	Grand Core     Grand Core     Grand Core	<ul> <li>Per BID, 500 Milliosi, Insure may 6x 8 or any of the following as consider of previous coverage if an insuredimental or teaming the astronomic ALD - region review of treatment, plan</li> </ul>	Nate PGG contains treatment plan.     PGG contains treatment plan.     PGG mexicum triggers     Industry pareds, man shangin     Periodic review by supports coordinate minimally every 3 coordinate minimally every 3 coordinate minimally every 3 coordinate minimally every 3 coordinate minimally seed.     Permit IPGG severe monthly seed.     Permit IPGG severe monthlys.     Permit IPGG severe monthlys.     Industry pared services and publications.
Plan Development	Description MEASURE	Piersonnel	Periodic Revolutioni Assessment	the child's unique strengths and needs and EtS under Part C • Transition from Part C	At least once every 37 months unless school or parent reposit more frequently		Per BICL 500 S40b(2), insurer may request.     ACCG con't be performed man than once meny 3 years amount of once meny 3 years exclusion.	<ul> <li>BCDA and other qualified provision available child's response to treatment and skill acquisition resincisely every 0 months self-the use of reliable a void miturerarts in 10 MAPP, ALLLER, AVCS, and other appropriate documentation of analysis is g. graphs, assessme reports, records of service, property, records of service, property.</li> </ul>

# INSURANCE-BASED ABA IS INTENDED TO SUPPLEMENT NOT SUPPLANT OTHER ENTITLEMENTS

- Definition has two components
- Timewise = cumulative; not overlapping or "borrowing" from other entitlements (ex. IDEA)
- Content = not duplicative
- Assures that eligible child receives both
  - the IDEA entitlement to FAPE which focuses on progress in educational performance, AND
  - · AIB of behavioral health treatment plan

# MORE IS MORE NOT EITHER OR

Morgan VanDenBerg



## SUPPLEMENT/NON-SUPPLANT

#### • Medicaid Provider Manual language

• "[BHT services] may serve to reinforce skills or lessons taught in school, therapy, or other settings, but are not intended to supplant services provided in schools or other settings, or to be provided when the child would typically be in school but for the parent's/guardian's choice to home-school their child. Each child's Individual Plan of Service (IPOS) must document that these services do not include special education and related services defined in the Individuals with Disabilities Education Improvement Act of 2004 (IDEA) that are available to the child through a local education agency."

#### DHHS FAQ

HTTPS://WWW.MICHIGAN.GOV/DOCUMENTS/MDHHS/ABA\_POLICY\_PROVIDER\_FAQS\_514113\_7.PDF

Be mindful that the IPOS may only support, not supplant, IEP services.

Identify providers with flexible hours to ensure a variety of scheduling options for services before and after school, on weekends, and over school breaks to ensure children have access to their full entitlements under both IDEA and Medicaid.



PRIV <i>i</i>	TTE	INSUR	ANCE		BCB	0 8	ľ	MI
NEW	DIR	ECTION	IS CR	ITE	RIA	F01	?	SERVICE



HTTPS://WWW.BCBSM.COM/CONTENT/DAM/PUBLIC/COMMON/DOCUMENTS/BCBSM-ND-ABA-MEDICAL-NECESSITY-CRITERIA.PDF

- ABA services recommended do not duplicate or replicate services received in the primary academic educational setting, are available within an IEP, or are available by other medical or behavioral health professionals.
- Requested ABA services are focused on / designed to
- Reduce the gap between chronological and developmental ages to develop or restore function to the maximum extent practical
- Reduce the burden of targeted symptoms on the individual, family and other significant people in the environment, and to target increases in appropriate alternative behaviors
- Treatment intensity does not exceed the member's functional ability to participate

## SUPPLEMENT/NON-SUPPLANT

- The Behavior Analyst Certification Board (BACB) document, "ABA Treatment of ASD Practice Guidelines for Healthcare Funders and Managers" includes the following statement:
- •"[C]overage of ABA treatment for ASD healthcare funders and managers should not supplant responsibilities of educational and governmental entities."

# USE OF THE TERM "MEDICAL NECESSITY" MEDICAID ABA SERVICES

- Coverage of ABA services is provided for Medicaid eligible children under 21 with ASD who meet medical necessity criteria.
- Medical necessity and recommendation for ABA services is determined by a physician or other licensed practitioner working within their scope of practice under state law.
- The child must demonstrate substantial functional impairment in social communication and social interaction across multiple contexts, and must demonstrate substantial restricted, repetitive and stereotyped patterns of behavior, interests, and activities as outlined in DSM-5.

http://www.michigan.gov/autism/0,4848,7-294-63682---,00.html



## MICHIGAN PUPIL ACCOUNTING MANUAL

HTTPS://WWW.MICHIGAN.GOV/DOCUMENTS/MDE/2018-19 PUPIL ACCOUNTING MANUAL 628112 7.P.

- Special education pupils are to attend the same number of days and hours as is required of any pupil to be counted for a full FTE.
- The IEP team may shorten the school day on an individual basis for medical / emotional reasons with documentation by a licensed physician (individual licensed to practice medicine) to still be counted for a full FTE).
- Prior to placing a pupil on a reduced day, the district must consider it's obligations under FAPE including the use of positive behavioral interventions and supports, as well as other strategies when developing the IEP when behavioral issues impede learning or that of others.

#### **Doctor's statement is NECESSARY but not SUFFICIENT**

 Pupils who are being disciplined for behavior (suspended / expelled) do NOT qualify for an IEP reduced schedule (FTE must be prorated)

#### WHY IS A REDUCED SCHEDULE RISKY BUSINESS?

HTTPS://WWW.MICHIGAN.GOV/DOCUMENTS/MDE/SHORTENEDSCHOOLDAY 655459 7.PDF

- Compulsory Education (age 6+)
- •FAPE Requirements: Is a reduced day an equitable education?
- IEP teams make FAPE / LRE decisions not the prescription pad

**COLLABORATION** 



# **COLLABORATION GOALS**

·Seamless Process for Family / Student



- ·More is More
- ·Access to all eligible services
- Maximize combined intensity & efficacy of IDEA and Insurance-based Services
- Honor the contribution of each
- Improve student outcomes

# MEDICAID PROVIDER MANUAL COLLABORATION REQUIREMENTS

- Coordination with school and/or early intervention program critical to
  - coordinate treatment
  - prevent duplication of services
- Coordination examples include phone calls, written communication logs, participation in team meetings (IEP/IFSP and IPOS meetings)

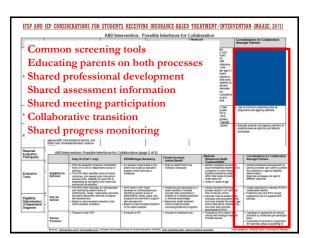
# **EDUCATE YOURSELF & OTHERS**

- Terminology
- Requirements
- Protocols
- Practices




## TACKLE DISCIPLINARY CHAUVINISM

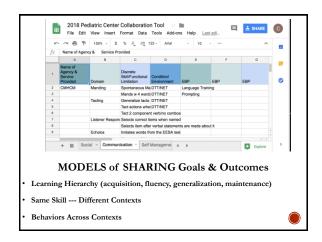
- Be aware of one's own biases and stereotypes of other professions
- Gain knowledge of colleagues' field specialties and culture
- Ask colleague to recommend articles from their journals to help explain efficacy of their treatments / interventions
- Attend trainings from other specialties and attend trainings together



#### DHHS FAQ

HTTPS://WWW.MICHIGAN.GOV/DOCUMENTS/MDHHS/ABA POLICY PROVIDER FAQS 514113 7.PDF

- Establish regional collaboratives to get to know the service providers and school district administrators in your community. Share resources and training opportunities for professional learning.
- Encourage opportunities for schools and providers to share, with parent consent, child-based information (e.g. progress notes, goals, instructional strategies) to aid with IPOS development.
- Encourage communication regarding all services the child is receiving in the IPOS with the school and family.
- Create opportunities to develop the IPOS in complementary alignment with the IEP/IFSP (e.g. request a copy of the plans and review services the child receives in school).
- Promote intra/inter-agency participation at meetings using a variety of meeting modalities (e.g. in-person, phone, Skype) to discuss progress (e.g. IEP, IFSP, IPOS meetings, periodic review meetings, team meetings).



EXAMPL	E DAILY SERV	ICE MATRIX:	3RD GRADE
Activity	Challenges Goals	Service Provider Service Environment	Plan of Intervention
Home Morning Routine	Independence     Aggression	ABA Service (lhr) Home	Service Plan ABA
School Arrival R, M, &W	Independence     Engagement     Social Responsive	School: Teacher / EA SLP	IEP Peer to Peer Support
Science / SS	<ul> <li>Aggression</li> </ul>	ssw	Visual Schedule
Recess / Lunch / Bathroom	Reading / Math     Functional Comm     Self Management	Recess / Lunch Aids	Visual Supports Task Analysis FCS
Specials (Art, Music, Tech)		Teacher / EA SLP	Content Differentiation
Assemblies		SSW	Use of Sr & Prompting
Dismissal			FBA / BIP
Homework	Engagement		
Dinner / Outings	Refusals     Tantrums	ABA Service (4 hrs) Clinic & Home	Service Plan ABA
Bedtime	Aggression     Safety		

