

ACCESS ANALYSIS

SPA TN: 17-0016

TITLE: Applied Behavior Analysts Rate Realignment

EFFECTIVE DATE: January 1, 2017

SUBMISSION DATE: March 30, 2017

Purpose of the SPA

This State Plan Amendment proposes to amend the provisions governing other licensed practitioners to realign the reimbursement rates paid to licensed practitioners for applied behavior analysis (ABA) services covered under the Louisiana Medicaid State Plan.

Purpose of Addendum #1

Louisiana Medicaid has determined that the impact of SPA TN 17-0016 may result in a reduction in payments to providers for ABA services; therefore, in compliance with the provisions of 42 CFR 447.203-204, the State is providing the following analysis of continued access to these services for covered Medicaid recipients.

DATA ANALYSIS

Pertinent Data Analysis

The new rates are set at the same level as the largest commercial insurer in the state. Enrollment of licensed providers has continued in spite of the realignment of the rates. Louisiana Medicaid currently has 132 individual practitioners and 26 group practices enrolled to provide Applied Behavioral Analysis (ABA) services. Eight new providers have enrolled to provide services since the rate realignment was announced in December 2016. This data is evidenced in a weekly report of ABA provider enrollment activity. The report has been received from the State's fiscal intermediary since Louisiana Medicaid began reimbursing licensed providers for the provision of ABA services, which was in February of 2014.

In addition to continued provider enrollment, requests for prior authorization have not decreased, nor have claims paid, since the changes went into effect.

Characteristics of the Beneficiary Population

All of the population that receives ABA services participates in managed care for their behavioral health services. Only about 10 percent of the population are excluded from managed care for their physical health care services.

Estimated Levels of Provider Payment from Other Sources

Louisiana Medicaid's rates are set at 100 percent of the rates of Blue Cross Blue Shield of Louisiana (BCBS) for ABA services, the largest commercial (private) insurer in the state. When analyzing the proposed rate changes, the State also looked at Tricare's rates, but ultimately decided to align with the BCBS rates since our original rate structure was aligned with that of BCBS at 100 percent of the 2013 rate.

PUBLIC INPUT ANALYSIS

Effect the Change Has on Access and Concerns of Beneficiaries, Providers & Stakeholders

The potential effect on access may be that some providers elect to take on fewer Medicaid ABA clients. However, the data analyzed since the change was announced does not show a decline in prior authorization or claims.

Notice of the change was first sent to ABA providers via email on November 26, 2016. In addition, two webinars were held mid-December 2016 to inform providers about the change and adjustments in prior authorization. Public notification was provided through the publication of an Emergency Rule and Notice of Intent in the State's official journal, the *Louisiana Register* (<http://www.doa.la.gov/osr/REG/1612/1612.pdf>) on December 20, 2016 with an effective date of January 1, 2017.

A meeting was held with a provider group on December 2, 2017 to discuss the billing codes and rate changes. Further reform workgroups and meetings have been held on a bi-weekly basis since January 20, 2017. Providers have concerns that they will not be able to provide as much training to technicians delivering therapy as they did under the previous codes and rates.

State Response to Input and Concerns

The state has given consideration to any concerns providers have voiced and is working with them to build quality, utilization management improvements and other mechanisms relative to ABA services.

Mechanisms to Address Ongoing Beneficiary and Provider Input

All providers always have an open line of communication via telephone and email to the program manager responsible for the oversight of ABA services. The program manager has heard from providers about ideas to simplify prior authorization and added a modifier for technicians with bachelor's degrees. Additional, simplifications were made to the prior authorization process to no longer require modifiers be prior authorized for several groups of codes.

There are several different mechanisms that the State has in place for beneficiaries, providers and stakeholders to share their concerns, offer recommendations for service changes and inquire about issues relative to their Medicaid coverage. These mechanisms include, but are not limited to, a toll-free publicized hotline, global dedicated email addresses for electronic submissions to Louisiana Medicaid, publicized fax lines, direct contact through periodic meetings, etc.

The State also continues its review of concerns voiced through the analyzing of grievance and appeals data and complaints received.

BENEFICIARY IMPACT

Beneficiary Needs

With the proposed payment changes, beneficiaries have the same access to care and ABA services as all persons who have insurance through BCBS of Louisiana. Therefore, the State is assured that beneficiary needs will continue to be fully met with the proposed payment changes.

Availability of Care

ABA is a new and emerging field, as such, there are rural areas of the state that are underserved; however, this is true for the majority of populations served in the Medicaid program. The coverage of these services under the Other Licensed Practitioners section of the Louisiana Medicaid State Plan only occurred three years ago, and providers are continuing to enroll and open clinics throughout the state. Louisiana continues to encourage and assist interested providers to enroll and provide the service. Our primary mission is to ensure a robust provider community for the delivery of quality ABA services to Medicaid recipients who are in need of the service, so we will continue to work with the provider community to accomplish this mission.

Utilization Changes

The data analyzed to date has not shown, nor do we anticipate, any major reductions in the utilization of these covered services. Hourly units per week have held steady over the last two years at approximately 17 hours per week. Almost 20k beneficiaries were currently approved to receive ABA services, as of February 28, 2017.

MONITORING PROCEDURES

Three-Year Monitoring Procedures

The state keeps a very close eye on the utilization and claims paid monthly for ABA services. Baseline data shows that the average hours per week is 17, and the average payment per beneficiary is about \$10,000. The program manager responsible for the daily operations to manage these services will continue to review all of the periodic reporting for the services and immediately address any extraordinary issues that are noted in the data received.

Analysis of monthly data will be made over the next three years and the State will take action on any recognizable trends which show access deficiency or a notable decline in service availability or provider enrollment.

Remediation Process for Inadequate Access

The state will continue to work with providers to develop the program and encourage participation. The licensing board sends information out on behalf of Louisiana Department of Health which explains the enrollment process to participate in the Medicaid program. The State is also working with the community to encourage education programs that foster more BCBA's throughout the state. Again, this is a new field and a new program, and there are challenges which come with developing a robust provider community, but LDH is committed to work with the provider community to build the program.