

ASD 11/3/15 – Building Network Capacity

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Multiple states researched

Questions surrounding what may be the prior authorization process in order to control costs

Reimbursement currently includes \$11 for thirty minutes

Point in time reached that recommendations need to be generated in order to provide the Governor's office.

Reimbursement, workforce development, value based contracting, and others have been discussed at prior meetings.

Important question is what will it take to build network capacity?

From tribal perspective, travel is a key component in adequately serving members and families – providers may need to drive upwards of three hours one way.

Accounting for the rural versus urban providers needs to be a point of consideration in rate development

The assessment process and who is legally able to provide the assessment is a major challenge to overcome. There may not even be enough providers to administer the assessments if able to.

The fee schedule does not adequately incentivize provider participation.

Pediatric neurologists have the training to diagnose autism, but historically have not been doing it because of the lack of reimbursement.

A recommendation would be to study what professionals are able and trained to diagnose autism in order to provide an expanded entry point into the system.

A factual understanding, or study or database, of what needs currently exist and what services can best address those needs would go a long way in building network capacity and addressing those needs from top to bottom.

Where does the delay exist between needing an assessment and getting a diagnosis in order to enter the system? There appears to be at least a 6 month wait in order to get the process started.

Members and families have been told that they are restricted to only developmental pediatricians in order to get a diagnosis, which may be a reason for the long waits.

A recommendation would be to contact RBHAs to acquire a non-adversarial survey of their providers who are comfortable with providing an autism diagnosis, and in order to provide these services, what AHCCCS and the RBHAs will need to do in order to make it happen.

Generational information may be commonplace, which has caused further problems. Information and education is a key aspect that must be considered.

Child psychologists are a key provider demographic that needs to be a part of the system.

A recommendation would be to determine what is included in a comprehensive evaluation, including a clarification of what are the diagnoses appropriate for children to receive ongoing services through the system.

A recommendation would be to clarify that the current diagnosis is not “Autistic Disorder”, but is in fact “Autistic Spectrum Disorder.”

A recommendation would be to continue efforts to maximize workforce development – Governor, President Crow of ASU, Grand Canyon University and AHCCCS should create some form of committee or consortium that is tasked with monitoring and developing a proper workforce. This should include veterans and veterans’ organizations which may be a great resource pool due to high rates of unemployment. Veterans’ participation would be especially useful in early intervention programs.

The industry needs to lobby the legislature on the need for a substantial increase in capitation and clearly distinguishing the ASD community from the general AHCCCS population will be key in pleading the case.

The Governor’s office, and the legislature need to adequately understand the population and the needs of the population. Recognizing that the ask for increased funding is not simply to restore funding, or to simply provide increased pay for providers and organizations, but because the need is there with rising numbers of individuals entering the system and needing services. Education is going to be vitally important.

Medicaid is the payor of last resort, but if there is a primary insurance plan, and the billing service codes don’t match (which they have never matched), then Medicaid is on the hook for payment. AHCCCS has been saying repeatedly that we are ready to flip the switch so the codes match, but it has not yet happened.

Workforce development should include online training

The major takeaway is that Arizona should be the leader, especially considering Governor Ducey’s participation.