

ASD Advisory Committee Report Addendum

March 2021

Background

On April 14, 2015, the Governor's Office established the statewide ASD Advisory Committee (the Committee) representing a broad range of stakeholders to address and provide recommendations to strengthen services for the treatment of Autism Spectrum Disorder (ASD). The Committee was charged with developing recommendations to the State for strengthening the health care system's ability to respond to the needs of members of the Arizona Health Care Cost Containment System (AHCCCS) with or at risk for ASD, including those with comorbid diagnoses.

On February 9, 2016, the Committee finalized its recommendations in the [ASD Advisory Committee Report](#). The recommendations included both long-term, systems-level changes and short-term activities that could more quickly enhance an understanding of the current system by a full range of stakeholders and improve access to care. This addendum describes how AHCCCS, in partnership with the Committee membership, has worked to address the Committee's recommendations and to augment and improve the system of care for members with and at risk of ASD.

Early Identification and Referrals

Within the Committee's recommendations, it was identified that AHCCCS should encourage the development and expansion of efficacious services, programs, and products that expand statewide capacity to accelerate early identification and diagnosis of ASD. The ASD Advisory Committee's membership has engaged in several key projects to expand network capacity, and to improve early identification, diagnosis, and referrals. Some of these projects include:

- Phoenix Children's Hospital (PCH) continued efforts through their Early Access to Care – Arizona (EAC-AZ) program to train pediatricians on ASD and comorbid conditions. The program was established as an innovative, community-based identification, screening, and treatment model for children with ASD. The primary goal of the EAC-AZ program is to decrease the time between a parent's concern and the time of a diagnosis by training primary care practitioners to provide diagnosis and comprehensive care to children with ASD. To date, three cohorts of pediatricians have successfully completed the program.
- Arizona Complete Health and Children's Clinics, a clinic for children with special needs, partnered with the University of Arizona (UA)-College of Nursing to develop the three semester post-graduate ASD Specialty Program for Nurse Practitioners on differential diagnosis, treatment, and care coordination of children and adolescents. The three semester ASD Program includes 3.0 credit didactic courses, and 90 associated clinical

practicum hours per semester, supervised by preceptors at approved clinical sites. As the UA ASD Program focuses on expanding clinical resources throughout Arizona to identify autism and other developmental and co-occurring disorders, it is receiving considerable interest from other states who recognize the priority for early diagnosis, treatment, and care coordination within this population. As of February 2021, there have been four graduates of the program and there are four Nurse Practitioners presently enrolled. There are plans to enroll six additional participants in the fall of 2021.

- The Southwest Autism Research and Resource Center developed an Easy Access Autism Screening Program in which an early childhood (one to three year olds) screening is performed telephonically with the use of a tool called the Communication and Symbolic Behavior Scales: Infant-Toddler Checklist. The service is free to consumers and is funded with a grant from the Community Foundation for Southern Arizona.
- AHCCCS engaged in many activities to ensure that early identification and diagnosis is prioritized for all Managed Care Organizations (MCOs) and their providers. In addition to contractual requirements already in place for MCOs and providers to implement evidence-based screenings, AHCCCS is in the process of formalizing the former Behavioral Health Practice Guides into policy, including the [Psychiatric and Psychotherapeutic Best Practices for Children: Birth Through Five Years of Age](#). This guideline includes multiple screening tools for medical and psychiatric comorbidities, including the use of tools such as the Modified Checklist for Autism in Toddlers (MCHAT) and the Parents' Evaluation of Developmental Status (PEDS). AHCCCS has also updated policy requirements and provided MCOs guidance on developmental screenings and referral processes, including in the [AMPM 430](#) (Early Periodic Screening, Diagnostic and Treatment (EPSDT) Services), and on the [ASD resources page](#).

Reducing System Complexity

Throughout the 2016 ASD Advisory Committee's report are recommendations that pertain to ways in which the system of care could be simplified and streamlined to increase the accessibility of diagnostic and treatment services. Challenges around basic navigation within the system of care were identified within both DDD and AHCCCS, which has resulted in several key projects to reduce system complexity, some of which include:

- On October 1, 2019, DDD/ALTCS eligible members began receiving physical and behavioral health services, limited long-term services and supports (LTSS), plus Children's Rehabilitation Services, if eligible, through two subcontracted MCOs (Mercy Care and UnitedHealthcare Community Plan). Members enrolled with DDD continue to have Support Coordinators, to assist in this transition.

- Care Management is also available to all Medicaid eligible members in Arizona, through AHCCCS MCOs. The Health Home Model is also utilized by many of the contracted provider agencies throughout Arizona to offer care coordination services for all AHCCCS members.
- In 2015, the Centers for Medicare and Medicaid Services (CMS) approved Arizona's request to begin a Targeted Investments Program that made available nearly \$300 million to Arizona providers who assisted the State in promoting the integration of physical and behavioral health care, increasing efficiencies in care delivery, and improving health outcomes. One of the strategic areas of focus over the five year period of the TI Program has been on improving treatment and care of children with or at risk for ASD. The MCOs provided financial incentives to eligible Medicaid providers who met certain benchmarks for integrating and coordinating physical and behavioral health care for AHCCCS members. The aims of the TI Program were to facilitate whole person care through an integrated care plan, utilizing bidirectional exchanges of information, and the use of care management to include warm handoffs to behavioral health consultants within the primary care practice. This model allows for timely coordination and consistent communication across all engaged agencies and providers. The TI Program also focused on enhancing and expanding the integrated care model for adults, including those with ASD.
- Prior to the convening of the Committee, there were no standardized methods to identify qualified healthcare professionals who specialize in the diagnosis and treatment of individuals with ASD. AHCCCS and its MCOs have committed to improving access to timely diagnosis and treatment through improving the ability of professionals to expand upon their scope of practice by acquiring the skills and knowledge to successfully work with individuals with ASD. AHCCCS also requires MCOs to continually work to expand their network of available diagnosticians to include professionals from various backgrounds, who, within their scope of practice, can provide diagnostic and treatment services to Medicaid members.

AHCCCS now requires contracted MCOs to identify qualified professionals who are trained in the diagnosis of autism within their network and to post this listing on their website. AHCCCS compiles these listings and posts them publicly on the [AHCCCS website](#). All contracted MCOs are also required to maintain a provider listing on their website, indicating providers of specialty services, such as treatment for ASD. AHCCCS has compiled these provider listings and developed a [searchable database](#) with the ability to filter results by specialty.

- AHCCCS engages in ongoing facilitation of the ASD Advisory Committee, and participates in several community and contractor forums, such as the Community Quality Forum, State Medicaid Advisory Committee, and the Arizona Council of Human

Service Providers to convey information about ASD screening, diagnosis, treatment, and support services.

Additionally, AHCCCS conducts multiple reviews through a variety of Quality Improvement/Quality Management activities, Operational Reviews, and provider audits designed to identify gaps, insufficiencies, and other metrics. Ongoing monitoring is further conducted through analysis of multiple deliverables submitted by the MCOs.

- The original Committee report acknowledged a disparity in the recognized professionals who can provide a diagnosis of ASD (i.e., what DDD and AHCCCS respectively allows). Currently, for DDD eligibility, diagnosis of Autism Spectrum Disorder is accepted from an Arizona licensed psychiatrist, psychologist, neurologist, developmental pediatrician, or a DDD-approved pediatrician who has completed specialized training on the diagnosis of ASD. In cooperation with AHCCCS and community partners, DDD is considering accepting comprehensive evaluations from doctoral level nurse practitioners who have completed specialized training approved by DDD in the diagnosis of ASD. Additionally, DDD has centralized the eligibility determination process in each district to streamline and reduce the time involved and to ensure that families are notified promptly when additional information is needed.

Evidence Based Treatment

Within the Committee's recommendations, it was identified that AHCCCS should foster a reliance upon evidence-based treatment strategies and ways in which AHCCCS could support and encourage evidence-based practice at the contractor (MCOs) and provider levels. To accomplish this, AHCCCS provided guidelines designed to bring the most up-to-date data and information to the system of care and took the following actions:

- AHCCCS partnered with members of the ASD Advisory Committee to develop an [Evidenced-Based Practice Tool](#) specific to ASD, which was created to allow the user to assess the level of evidence available on a wide range of ASD interventions and ongoing screenings for comorbidities (e.g., ASD & depression or bipolar disorder). Dr. Terry Mateo updated the ASD Evidence-Based Practice Tool which incorporates and references four studies and their respective descriptions. The AHCCCS webpage for Resources for Members with ASD has been updated with this listing.
- AHCCCS established a distinct provider type for Behavior Analysts on October 1, 2016 and consulted with an independent board certified Behavior Analyst to update [AMPM 310-B](#) (Behavioral Health Services Benefit) to include focused and comprehensive behavioral interventions. Additionally, AHCCCS published [AMPM 320-S](#) (Behavior Analysis Services) in the Fall of 2019. AHCCCS has also adopted the ABA billing codes, and published these codes in the [Billing Resources](#) and [Behavioral Health Matrix](#).

AHCCCS also implemented a monthly deliverable to track the receipt of Applied Behavior Analysis (ABA) services, including but not limited to, the number of new members approved for services within the reporting period, number of members receiving comprehensive versus focused intervention, and the number of hours, on average, of direct therapy and supervision members receive per week. This allows AHCCCS to track and trend ABA service utilization and associated metrics.

Building Network Capacity

The Committee's recommendations and feedback from members and other key stakeholders have consistently identified the need to increase the number and availability of providers across the statewide system of care. To address this area of improvement, AHCCCS partnered with subject matter experts, Committee members, and contracted MCOs in numerous activities designed to expand network capacity which include:

- Representatives from each of the seven AHCCCS Complete Care (ACC) plans partnered to develop standardized criteria for ASD Centers of Excellence (COEs). This process included obtaining input from a wide range of stakeholders, including the Arizona Council of Human Service Providers, member and family member focus groups, online surveys, and community forums to specify what services a COE should provide and how they would define success. The Southwest Autism COE and Touchstone Autism COE are currently operational and both have capacity for rendering a diagnosis and providing the full array of necessary physical and behavioral health services to individuals with ASD. The establishment of these COEs marks an important and progressive step towards expanding provider practice in an integrated and specialized manner.
- While all dentists receive some level of training on how to treat children with special healthcare needs as part of their education in dental school, AHCCCS has engaged in efforts to obtain a current listing of dental providers who specialize in the treatment of children and/or adults with ASD. This listing has been added to the [AHCCCS website](#). Southwest Autism Research & Resource Center (SARRC) also provides dental care information on their [website](#).
- The Arizona Department of Education developed the [Arizona Statewide Autism Project for 2019-2020](#) in partnership with STAR Autism Support. The goal of this project is to increase the prevalence and utilization of the STAR Program (Strategies for Teaching based on Autism Research - Arick, Loos, Falco, Krug, 2004). Training sessions occur throughout at all levels of educators (including principals and directors to support implementation) and include training on conducting assessments, discrete trial training, pivotal response training, functional routines, and reinforcement. All participants also receive five coaching visits per year with the option to become a coach themselves through additional training. To date, this program has been completed through 127

distinct school districts with 1,250 participants. Subsequently, this has resulted in 32 repeat participants being trained as coaches and the development of 41 sites with ASD model classrooms.

- AHCCCS required its MCOs to increase their website content on ASD topics including the use of screening and other assessment tools. AHCCCS actively engages them in an ongoing dialogue about training opportunities that are held both in-person and virtually.
- To increase the accessibility to become and remain an AHCCCS provider, AHCCCS has implemented the [AHCCCS Provider Enrollment Portal \(APEP\)](#), which is a secure web-based enrollment platform. APEP is designed to ease the provider enrollment process by decreasing processing time and allowing the provider to submit a new enrollment or modification to an existing provider ID at any time of the day.
- As of October 1, 2019, coverage for telehealth services was greatly expanded and restrictions were removed on the distant site (site at which the provider is located at the time service is provided via telehealth) for providers licensed in Arizona. The originating site was broadened to include the location of “home” for many codes, and coverage for telemedicine, remote patient monitoring, and asynchronous services. In 2020, AHCCCS added more than 140 codes to the telehealth code set, created a temporary telephonic code set, and requires the MCOs to cover contracted services via telehealth modalities at the same rate as in-person services.
- To improve provider coordination of care, AHCCCS partnered with [Health Current](#) and established a public-private partnership seeking to advance the secure and private sharing of electronic health information. Health Current serves as Data Trustee and Data Manager for the Arizona health care community and manages/operates Arizona’s Health Information Exchange (HIE). As of January 11, 2019, Health Current participation included 87 ASD provider organizations, 340 ASD practice locations, and 293 ASD providers. There are 57 ASD provider organizations participating in the HIE; of the 57 providers, 38 are currently submitting data.
- AHCCCS contracts require MCOs to establish [Value-Based Purchasing \(VBP\)](#) arrangements and to develop methodology to assign members to those providers participating in value-based purchasing initiatives who have demonstrated high value services or improved outcomes. The VBP model dovetails with the two established ASD Centers of Excellence, which align physicians and other providers to achieve higher value through greater focus on appropriateness of care, clinical excellence, and patient satisfaction; this drives quality management and improvements within the provider network. AHCCCS has also made available additional funding incentives through establishing a differential adjusted payment for provider agencies who are recognized as an Autism Center of Excellence by an MCO.

- In the interest of building capacity within other systems not directly linked to the system of care/provider network, the [Autism Society of Greater Phoenix](#) provides training throughout Arizona called [BE SAFE](#), which brings local police officers and young people with autism together to learn from one another. Officers from different local police departments are paired with teens/adults with autism to mentor and learn from them. After watching each BE SAFE movie scene, police officers help the young people learn and practice four life-saving skills:
 1. Stay where you are when you meet the police;
 2. Do what the police tell you to do;
 3. Show your empty hands to the police;
 4. Don't touch an officer or his/her equipment.
- On May 5, 2017, the Flagstaff Medical Center and Health Choice Integrated Care (the Regional Behavioral Health Authority (RBHA) in the northern geographic service area at the time) co-sponsored "Elevate Autism: Systems of Care for Arizona," a statewide autism conference; and in March 2017, Mercy Maricopa Integrated Care (the RBHA in the central geographic service area at the time) offered a series of three trainings for families, the community, and providers about children on the autism spectrum.

Adults with ASD

The Committee surveyed members with ASD and their families to examine the aspects of the system of care and found that adults with ASD experience challenges around education, employment, and overall community engagement. The Committee identified that AHCCCS should encourage and support the ability of Arizona families to stay strong while they work to advance the quality of life for their adult children with ASD. To address these issues, AHCCCS worked collaboratively with multiple stakeholders in the following ways:

- AHCCCS held public meetings with members, families, providers, and advocates related to Home and Community Based Settings (HCBS). These meetings resulted in recommendations on ways to develop, utilize and recognize how person-centered thinking, planning and practices could support adults, including those with ASD. In order to ensure best practices for compliance and implementation of the [HCBS Rules](#), an analysis of current practices in planning and functional assessments was completed with DDD, Tribal Contractors, and AHCCCS' MCOs. This provided the opportunity to identify the steps necessary to comply with primary care provider requirements.
- The Sonoran University Center of Excellence for Developmental Disabilities (UCEDD) was awarded a contract to collaborate with AHCCCS on the development of best practice training on Person Centered Service Planning (PCSP) that includes a Train-the-Trainer model. Competency-based training on PCSP for case managers, support coordinators, and others affords the opportunity to develop a cadre of trained facilitators within communities to assist members needing enhanced PCSP, as well as the ability to train members (including those with an ASD diagnosis) to lead the development of their own

plans. Additionally, in May 2020, [AMPM 1610](#) (Guiding Principles and Components of ALTCS Case Management) was approved and established required elements of PCSP.

- AHCCCS awarded a contract for a statewide housing administrator as a step toward improving the ability to track and trend housing resources and identify areas of housing service needs for AHCCCS members across the state, including members with ASD.

Conclusion

From its inception, AHCCCS has been committed to innovation. This began with its approach to managed care, the collaboration with other state agencies, and collaboration with other stakeholders such as the Arizona Department of Health Services, the Arizona Department of Economic Security (DDD), the Arizona Department of Education, and Arizona's state universities. The creation of the ASD Advisory Committee was an important step towards continued innovation and positive change within the system of care.

AHCCCS recognizes that the projects and initiatives mentioned herein are critical first steps towards the development of accessible and family-friendly resources, stakeholder collaboration, communication and advocacy, and improved engagement with members and families affected by ASD. It is acknowledged across all stakeholders that there remains more work to be done. AHCCCS remains dedicated to the continued exploration of ways to improve and expand the array of services throughout the state for individuals and families impacted by ASD.