

CalOptima Guidance for Behavioral Health Treatment (BHT) in Response to COVID-19 Pandemic (Updated July 8, 2020)

During this period of “stay at home” issued by the California governor, some families may choose to cancel ABA sessions to limit the risk of contracting COVID-19. For families who wish to continue Applied Behavior Analysis (ABA) services, ABA providers should review their members’ needs and determine which may be able to pause services without experiencing detrimental effects.

CalOptima recommends ABA providers follow the ethics guidance published by the Behavior Analyst Certification Board (BACB) which can be found here:

<https://www.bacb.com/bacb-covid-19-updates/>

Telehealth Option

Many ABA providers have inquired about a telehealth option during COVID-19. While CalOptima already reimburses Qualified Autism Services (QAS) providers and Board Certified Behavioral Analysts (BCBAs) for parent skill training and supervision via telehealth, we are making the following temporary revisions to telehealth requirements during the national health emergency to ensure ABA services can continue with minimal disruption.

- All ABA services can be delivered via telehealth, as clinically appropriate, taking into consideration the member’s functioning level and attending skills.
- Paraprofessionals and Behavioral Management Assistants (BMAs) can provide ABA services via telehealth.
- ABA services provided via telehealth MUST be consistent with the current treatment plan.
- Providers MUST maintain necessary records and documentation for all ABA services.
- ABA providers MUST document in writing any barriers to service provision and steps taken for each member.

Authorization Request

CalOptima understands some of the limitations and difficulties in providing services and obtaining the necessary data/information required to request a new authorization. The following options are available if the current authorization is within 30 days of expiration:

Option 1: Provider can request extension for additional three months if unable to have sessions or unable to gather necessary elements missing from the treatment plan (e.g., vineland, coordination of care)

- Provider would need to submit a BH-ARF along with a summary (less than one page) explaining why an extension is needed.
- This option will extend the duration of the authorization but will not add additional units to the current authorization.

Option 2: Provider can submit BH-ARF to request a new 6-month authorization with completed information and data that reflects the billing that took place during the reporting period.

The above changes are effective immediately until further notice.