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State/Territory Name: MI

State Plan Amendment (SPA) #: 15-0010

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Chicago Regional Office
233 N. Michigan
Suite 600
Chicago, Illinois 60601



December 23, 2015

Chris Priest
Medical Services Administration
Michigan Department of Health and Human Services
400 South Pine Street, P.O. Box 30479
Lansing, Michigan 48909-7979

ATTN: Erin Black

Dear Mr. Priest:

Enclosed for your records is an approved copy of the following State Plan Amendment:

- Transmittal #: 15-0010: Behavioral Health Services
- Effective: January 1, 2016

If you have any questions, please contact Leslie Campbell at (312) 353-1557 or Leslie.Campbell@cms.hhs.gov.

Sincerely,

/s/

Todd McMillion
Acting Associate Regional Administrator
Division of Medicaid & Children's Health Operations

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: HEALTH CARE FINANCING ADMINISTRATION**

1. TRANSMITTAL NUMBER: <u>15 - 0010</u>	2. STATE: Michigan
3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID) TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
4. PROPOSED EFFECTIVE DATE January 1, 2016	

TO: REGIONAL ADMINISTRATOR
HEALTH FINANCING ADMINISTRATION
DEPARTMENT OF HUMAN SERVICES

5. TYPE OF PLAN MATERIAL (*Check One*):

☐ NEW STATE PLAN ☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN ☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (*Separate Transmittal for each amendment*)

6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR 440.225	7. FEDERAL BUDGET IMPACT: a. FFY 2015 \$0 b. FFY 2016 \$6,642,000
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Supplement to Attachment 3.1-A, Pages 13a – 13a continued (p.7) Attachment 4.19-B, Page 9 NEW	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (<i>If Applicable</i>): Supplement to Attachment 3.1-A, Page 13a Delete Attachment 3.1.i, Pages 1-41; Attachment 4.19B, Page 23

10. SUBJECT OF AMENDMENT:
Inclusion of Behavioral Health Treatment within EPSDT

11. GOVERNOR'S REVIEW (*Check One*):

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

☒ OTHER, AS SPECIFIED:
Kathleen Stiffler, Acting Director
Medical Services Administration

12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:
13. TYPED NAME: Kathleen Stiffler	Medical Services Administration Actuarial Division - Federal Liaison Capitol Commons Center - 7 th Floor 400 South Pine Lansing, Michigan 48933
14. TITLE: Acting Director, Medical Services Administration	
15. DATE SUBMITTED: August 19, 2015	Attn: Erin Black

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: August 19, 2015	18. DATE APPROVED: December 23, 2015
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PLAN APPROVED – ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: January 1, 2016	20. SIGNATURE OF REGIONAL OFFICIAL: /s/
21. TYPE NAME: Todd McMillon	22. TITLE: Acting Associate Regional Administrator

23. REMARKS:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of Michigan

***Amount, Duration and Scope of Medical and Remedial Care
Services Provided to the Categorically and Medically Needy***

4b. EPSDT (continued)

In addition, the EPSDT program covers medically necessary screening and preventive support services for children, including nutritional and at-risk assessments as well as resulting health education and mental health services. These services are provided to all Medicaid-eligible children for the purpose of screening and identifying children that may be at risk for, but not limited to, drug or alcohol abuse, child abuse or neglect, failure to thrive, low birth weight, low functioning/impaired parent, or homeless or dangerous living situations. The screening and preventive support services are provided by Medicaid enrolled providers.

Behavioral Health Treatment (BHT) - 1905 (a)(13)(c) Preventative Services

Behavioral Health Treatment (BHT) services, including applied behavior analysis (ABA), prevent the progression of autism spectrum disorder (ASD), prolong life, and promote the physical and mental health and efficiency of the beneficiary. The recommendation for BHT services is made by a physician, or other licensed practitioners in the state of Michigan. Direct patient care services that treat or address ASD under the state plan are available to children under 21 years of age as required by the early and periodic screening, diagnosis and treatment (EPSDT) benefit.

Evaluations Prior to Receiving Behavioral Health Treatment (BHT)

These evaluations are covered under the Physician Services or Other Licensed Practitioner benefit category, as applicable. These evaluations must be performed before the individual receives treatment services.

- a) Medical / Physical Evaluation: This evaluation is a review of the individual's overall medical health, hearing, speech, and vision, including relevant information and should include a validated ASD screening tool. The evaluation is also designed to rule out medical or behavioral conditions other than ASD, including those that may have behavioral implications and/or may co-occur with ASD. These evaluations are provided by a physician, advanced practice registered nurse (APRN) / nurse practitioner, or physician assistant.
- b) Comprehensive Diagnostic Evaluation: This evaluation is a neurodevelopmental review of cognitive, behavioral, emotional, adaptive, and social functioning, and should use validated evaluation tools. Based on the evaluation, the practitioner determines the individual's diagnosis, recommends general ASD treatment interventions, and refers the individual for a behavior assessment. The practitioner who conducts the behavior assessment recommends more specific ASD treatment interventions. These evaluations are performed by a qualified licensed practitioner (physician with a specialty in psychiatry or neurology; physician with a sub-specialty in developmental pediatrics, developmental-behavioral pediatrics or a related discipline; physician with a specialty in pediatrics or other appropriate specialty with training, experience or expertise in ASD and/or behavioral health;

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4b. EPSDT (continued)

Behavioral Health Treatment (BHT) – (continued)

psychologist; advanced practice registered nurse with training, experience, or expertise in ASD and/or behavioral health; physician assistant with training, experience, or expertise in ASD and/or behavioral health; or clinical social worker) working within their scope of practice and who is qualified and experienced in diagnosing ASD.

Prior Authorization or Other Requirements

BHT services are authorized for a time period not to exceed 365 days. The 365 day authorization period for services may be re-authorized annually based on recommendation of medical necessity by a licensed professional.

Behavioral Assessment

Behavior assessments must use a validated assessment instrument and can include direct observational assessment, observation, record review, data collection and analysis. Examples of behavior assessments include function analysis and functional behavior assessments. The behavior assessment must include the current level of functioning of the individual using a validated data collection method. Behavioral assessments and ongoing measurements of improvement must include behavioral outcome tools. Examples of behavioral outcome tools include Verbal Behavior Milestones Assessment and Placement Program (VB-MAPP), Assessment of Basic Language and Learning Skills revised (ABLLS-R), and Assessment of Functional Living Skills (AFLS).

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4b. EPSDT (continued)

Behavioral Health Treatment (BHT) – (continued)

Behavioral Intervention

- ASD treatment services include a variety of behavioral interventions, which have been identified as evidence-based by nationally recognized research reviews and/or other nationally recognized substantial scientific and clinical evidence. These services are designed to be delivered primarily in the home and in other community settings. These services include, but are not limited to, the following categories of evidence-based interventions:
 - Collecting information systematically regarding behaviors, environments, and task demands (e.g., shaping, demand fading, task analysis);
 - Adapting environments to promote positive behaviors and learning while reducing negative behaviors (e.g., naturalistic intervention, antecedent based intervention, visual supports);
 - Applying reinforcement to change behaviors and promote learning (e.g., reinforcement, differential reinforcement of alternative behaviors, extinction);
 - Teaching techniques to increase positive behaviors, build motivation, and develop social, communication, and adaptive skills (e.g., discrete trial teaching, modeling, social skills instruction, picture exchange communication systems, pivotal response training, social narratives, self-management, prompting);
 - Teaching parents to provide individualized interventions for their child, for the benefit of the child (e.g., parent implemented intervention);
 - Using typically developing peers (e.g., individuals who do not have ASD) to teach and interact with children with ASD (e.g., peer mediated instruction, structured play groups); and
 - Applying technological tools to change behaviors and teach skills (e.g., video modeling, tablet-based learning software).
- In addition to the categories of interventions listed immediately above, covered ASD treatment services not specifically listed above also include any other intervention supported by credible scientific and/or clinical evidence, as appropriate to each individual.
- Based on the behavioral plan of care, which is adjusted over time based on data collected by the provider to maximize the effectiveness of ASD treatment services, the provider selects and adapts one or more of these services, as appropriate for each individual.

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4b. EPSDT (continued)

Behavioral Health Treatment (BHT) – (continued)

Behavioral Observation and Direction

Behavioral observation and direction is the clinical direction and oversight by a qualified provider to a lower level provider based on the required provider standards and qualifications regarding the provision of services to a child. The qualified provider delivers face-to-face observation and direction to a lower level provider regarding developmental and behavioral techniques, progress measurement, data collection, function of behaviors, and generalization of acquired skills for each child. This service is for the direct benefit of the child and provides a real time response to the intervention to maximize the benefit for the child. It also informs any modifications needed to the methods to be implemented to support the accomplishment of outcomes in the Individual Treatment Plan.

Behavioral Health Treatment (BHT) Provider Qualifications

Board Certified Behavior Analyst (BCBA, BCBA-D)

- Services Provided: Behavioral assessment, behavioral treatment, and behavioral observation and direction.
- License / Certification: Current certification as a BCBA through the Behavior Analyst Certification Board (BACB). The BACB is the national entity accredited by the National Commission of Certifying Agencies.
- Education and Training: Minimum of a master's degree from an accredited institution conferred in a degree program in which the candidate completed a BACB approved course sequence.

Board Certified Assistant Behavior Analyst (BCaBA)

- Services Provided: Behavioral assessment, behavioral treatment, and behavioral observation and direction.
- License / Certification: Current certification as a BCaBA through the BACB. The BACB is the national entity accredited by the National Commission of Certifying Agencies.
- Education and Training: Minimum of a bachelor's degree from an accredited institution conferred in a degree program in which the candidate completed a BACB approved course sequence.

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4b. EPSDT (continued)

Behavioral Health Treatment (BHT) – (continued)

- Other Standard: Work is overseen by a BCBA.

Qualified Behavioral Health Professional (QBHP)

- Services Provided: Behavioral assessment, behavioral treatment, and behavioral observation and direction.
- License / Certification: A license or certification is not required, but is optional as explained below.
- Education and Training: QBHP must meet one of the following state requirements:
 - must be a physician or licensed practitioner with specialized training and one year of experience in the examination, evaluation, and treatment of children with ASD, or;
 - hold a minimum of a master's degree in a mental health-related field or a BACB approved degree category from an accredited institution who is trained and has one year of experience in the examination, evaluation, and treatment of children with ASD. Works within their scope of practice, works under the supervision of a BCBA, and have extensive knowledge and training in behavior analysis. Extensive knowledge is defined as having taken documented course work at the graduate level at an accredited university in at least three of the six following areas:
 1. Ethical considerations
 2. Definitions & characteristics and principles, processes & concepts of behavior
 3. Behavioral assessment and selecting interventions outcomes and strategies
 4. Experimental evaluation of interventions
 5. Measurement of behavior and developing and interpreting behavioral data
 6. Behavioral change procedures and systems supports

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***Amount, Duration and Scope of Medical and Remedial Care
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4b. EPSDT (continued)

Behavioral Health Treatment (BHT) – (continued)

Licensed Psychologist (LP)

- Services Provided: Behavioral assessment, behavioral treatment, and behavioral observation and direction.
- License / Certification: Licensed psychologist means a doctoral level psychologist licensed by the State of Michigan. Must complete all coursework and experience requirements.
- Education and Training: Minimum doctorate degree from an accredited institution. Works within their scope of practice and have extensive knowledge and training in behavior analysis. Extensive knowledge is defined as having taken documented course work at the graduate level at an accredited university in at least three of the six following areas:
 1. Ethical considerations
 2. Definitions & characteristics and principles, processes & concepts of behavior
 3. Behavioral assessment and selecting interventions outcomes and strategies
 4. Experimental evaluation of interventions
 5. Measurement of behavior and developing and interpreting behavioral data
 6. Behavioral change procedures and systems supports

A minimum of one year experience in treating children with ASD based on the principles of behavior analysis. Works in consultation with the BCBA to discuss the caseload, progress, and treatment of the child with ASD.

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***Amount, Duration and Scope of Medical and Remedial Care
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4b. EPSDT (continued)

Behavioral Health Treatment (BHT) – (continued)

Limited Licensed Psychologist (LLP)

- Services Provided: Behavioral assessment, behavioral treatment, and behavioral observation and direction.
- License / Certification: Limited licensed psychologist means a doctoral or master level psychologist licensed by the State of Michigan. Limited psychologist master's limited license is good for one two year period. Must complete all coursework and experience requirements.
- Education and Training: Minimum of a master's or doctorate degree from an accredited institution. Works within their scope of practice and have extensive knowledge and training in behavior analysis. Extensive knowledge is defined as having taken documented course work at the graduate level at an accredited university in at least three of the six following areas:
 1. Ethical considerations
 2. Definitions & characteristics and principles, processes & concepts of behavior
 3. Behavioral assessment and selecting interventions outcomes and strategies
 4. Experimental evaluation of interventions
 5. Measurement of behavior and developing and interpreting behavioral data
 6. Behavioral change procedures and systems supports

A minimum of one year experience in treating children with ASD based on the principles of behavior analysis. Works in consultation with the BCBA to discuss the progress and treatment of the child with ASD.

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***Amount, Duration and Scope of Medical and Remedial Care
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4b. EPSDT (continued)

Behavioral Health Treatment (BHT) – (continued)

Behavior Technician

- Services Provided: Behavioral treatment.
- License / Certification: A license or certification is not required.
- Education and Training: Will receive BACB-registered behavioral technician (RBT) training conducted by a professional experienced in BHT services (BCBA, BCaBA, LP, QBHP, and/or LLP), but is not required to register with the BACB upon completion to furnish services. Work under the supervision of the BCBA or other professional overseeing the BHT services (QBHP, LLP, LP, or BCaBA).

Must be at least 18 years of age, be able to practice universal precautions to protect against the transmission of communicable disease, be able to communicate expressively and receptively in order to follow individual plan requirements and beneficiary-specific emergency procedures, be able to report on activities performed, and be in good standing with the law (i.e. not a fugitive from justice, a convicted felon who is either under jurisdiction or whose felony relates to the kind of duty to be performed or an illegal alien). Must be able to perform and be certified in basic first aid procedures, and is trained in the individual plan of service utilizing the person centered planning process.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

***Policy and Methods for Establishing Payment Rates
(Other than Inpatient Hospital and Long-Term Care Facilities)***

17 (Continued).

Behavioral Health Treatment services are covered when prior authorized by the single state agency:

Except as otherwise noted in the plan, Michigan's Medicaid payment rates are uniform for both private and governmental providers of Behavioral Health Treatment. The Michigan Medicaid fee schedule rates were set as of January 1, 2016, and are effective for dates of service on or after that date. The fee schedule may be found at www.michigan.gov/medicaidproviders.

Reimbursement is made in accordance with Medicaid's maximum fee screens associated with direct Behavioral Health Treatment or the usual and customary charge for these types of services, whichever amount is less.

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