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State/Territory Name: Minnesota

State Plan Amendment (SPA) #: 17-0006

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
233 North Michigan Avenue, Suite 600
Chicago, Illinois 60601-5519



December 11, 2017

Marie Zimmerman, State Medicaid Director
Minnesota Department of Human Services
P.O. Box 64983
St. Paul, MN 55164-0983

Dear Ms. Zimmerman:

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

Transmittal #17-0006	-- Revises provider standards and service descriptions for EIDBI services and makes multiple technical/conforming revisions.
	-- Effective Date: July 1, 2017
	-- Approval Date: December 11, 2017

If you have any additional questions, please have a member of your staff contact Sandra Porter at (312) 353-8310 or via e-mail at Sandra.Porter@cms.hhs.gov.

Sincerely,

/s/

Ruth A. Hughes
Associate Regional Administrator
Division of Medicaid and Children's Health Operations

Enclosures

cc: Ann Berg, MDHS
Sean Barrett, MDHS

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTER FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER:

17-06

2. STATE

Minnesota

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE
SOCIAL SECURITY ACT (MEDICAID)

4. PROPOSED EFFECTIVE DATE

July 1, 2017

TO: REGIONAL ADMINISTRATOR
CENTER FOR MEDICARE & MEDICAID SERVICES
DEPARTMENT OF HEALTH AND 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:

Section 1905(a) of the Act

7. FEDERAL BUDGET IMPACT (in thousands):

a. FFY '18 \$0

b. FFY '19 \$0

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Attachment 3.1-A, pages 17xx-1 through 17xx-10, 19
Attachment 3.1-B, pages 16xx-1 through 16 xx-10, 18
Attachment 4.19-B, page 8g

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (*If Applicable*):

Same

10. SUBJECT OF AMENDMENT:

Early Intensive Developmental and Behavioral Intervention (EIDBI) Services

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

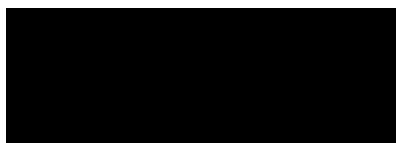
☒ GOVERNOR'S OFFICE REPORTED NO COMMENT

☐ OTHER, AS SPECIFIED:

☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL:



16. RETURN TO:

Sean Barrett
Minnesota Department of Human Services
Federal Relations Unit
PO Box 64983
St. Paul, MN 55164-0983

13. TYPED NAME:

Ann Berg

14. TITLE:

Deputy Medicaid Director

15. DATE SUBMITTED: (state authorized CMS pen/ink edit on date: from Sept.

September 14, 2017 12, 2017 to Sept. 14, 2017-SPorter, CMS)

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:

September 14, 2017

18. DATE APPROVED:

December 11, 2017

PLAN APPROVED – ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

July 1, 2017

20. SIGNATURE OF REGIONAL OFFICIAL:

/s/

21. TYPED NAME:

Ruth A. Hughes

22. TITLE:

Associate Regional Administrator

23. REMARKS:

STATE: MINNESOTA
Effective: 07/01/2017
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Approved: 12/11/17
Supersedes: 14-08

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Page 17xx-1

4.b. Early and periodic screening, diagnosis, and Treatment services.
(continued)

10. Early Intensive Developmental and Behavioral Intervention (EIDBI).

EIDBI services are medically necessary intensive treatment provided to promote the child's optimal independence and participation in family, school and community life; EIDBI services educate and support families, reduce stress, and improve long-term outcomes and quality of life for children and their families.

EIDBI provides a range of individualized, medically necessary intensive developmental and behavioral interventions to address or treat, in a comprehensive manner, the functional skills and core deficits of autism spectrum disorder (ASD) and other related conditions that cause persistent, clinically significant impairment in social communication and behavioral interaction and other areas of functional development for which this service is medically appropriate. Skill development focuses on the following domains: self-regulation, self-care, behavioral challenges, expressive communication, receptive communication, cognitive functioning, and safety. ~~social/interpersonal interactions, verbal and non verbal communication, cognition, learning and play, adaptive, self help skills, and behavioral self-regulation.~~

Services must be provided directly to the child, ~~or on behalf of the child, by~~ Family/caregiver training may be provided to the child's parents/caregivers for the benefit of the child.

A **comprehensive multi-disciplinary evaluation (CMDE)** must be completed to determine medical necessity of EIDBI services. The CMDE must include:

- Assessment of the child's degree of severity of core features of ASD and related conditions, as well as other areas of functional development including, self-regulation, self-care, behavioral challenges, expressive communication, receptive communication, cognitive functioning, and safety ~~cognition, learning and play, social/personal interaction, verbal and non verbal communication, adaptive, self help, behavioral self-regulation, and motor development;~~
- Review and incorporation of the diagnosis and other related assessment information from other qualified professionals, including information gathered from family members, child care providers, as well as any medical or assessment information from other licensed professionals working with the child such as the child's rehabilitation therapists, licensed school personnel, or other mental health professionals;

4.b. Early and periodic screening, diagnosis, and Treatment services.
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- ~~Identification of current services the child is receiving and integration into the CMDE recommendations;~~
- ~~Identification of and referral to other needed services;~~
- Identification of parent/caregiver preferences and family culture, language, goals and values; and
- Assessment of the type and level of parent/caregiver training and involvement preferred.
- ~~Recommendation of EIDBI treatment including intensity, frequency and duration, and treatment modality options;~~
- ~~Coordination of summary care conferences including: the initial CMDE medical necessity summary conference and re evaluation conference;~~
- ~~Determination of how frequently to monitor the child's progress if monitoring is required more frequently than every 6 months; and~~
- ~~Must include medical information from a licensed physician or advanced practice nurse.~~

Qualified CMDE Provider: A licensed mental health professional, as described in item 6.d.A of Attachments 3.1-A and 3.1-B, a mental health practitioner working as a clinical trainee and under the supervision of a psychiatrist or mental health professional, or a psychiatrist-physician is qualified to provide the CMDE. Providers must:

- A. Have at least 2,000 hours of clinical experience in the evaluation and treatment of children with ASD or a related condition, or equivalent documented course-work at the graduate level by an accredited university in the following content areas: ASD diagnosis, ASD and treatment strategies related to ASD and related conditions, and child development;
- B. Be able to diagnose and/or provide treatment; and
- C. Work within their scope of practice and professional license. +
and
- D. ~~Not be the same professional who delivers or supervises the child's direct treatment. In geographic areas with a provider shortage, as determined by the Department, the same professional may perform the CMDE and deliver or supervise the child's direct treatment.~~

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Approved: 12/11/17
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Page 17xx-3

4.b. Early and periodic screening, diagnosis, and Treatment services.
(continued)

Provider Qualifications and Training.

Qualified Supervising Professional: All EIDBI services must be billed by, and either provided by or under the clinical supervision of a qualified supervising professional who assumes full professional responsibility for the services provided by Level I, II and III ~~ABA or DBI Developmental/Behavioral EIDBI~~ providers. A qualified supervising professional is a mental health professional, as described in item 6.d.A.

Qualified supervising professionals must work within their licensed scope of practice, and have at least 2,000 hours of supervised, clinical experience and/or training in the examination and/or treatment of children with ASD or a related condition, or equivalent documented coursework at the graduate level by an accredited university in the areas of ASD diagnostics, ASD developmental and behavioral treatment strategies and typical child development.

The following non-licensed practitioners are qualified to provide EIDBI treatment when services are provided for the direct benefit of the child, supervised directly and within the scope of practice of the qualified supervising professional who assumes full professional responsibility for these activities, and they are billed by a qualified supervising professional as described below:

A. ~~ABA and DBI Developmental/Behavioral Professional~~(Level I EIDBI provider):

All Level I ~~ABA and DBI~~ providers must have at least 2,000 hours of supervised, clinical experience and/or training in the examination and/or treatment of children with ASD or a related condition, or equivalent documented coursework at the graduate level by an accredited university in the areas of ASD diagnostics, ASD developmental and behavioral treatment strategies, and typical child development, or an equivalent combination of documented coursework and hours of experience.

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(continued)

Additionally, all Level I ~~ABA treatment~~ providers must ~~have a~~:

- Have a Master's degree in one of the behavioral health, child development or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university; ~~and~~
- Have a Bachelor's degree in one of the behavioral health, child development or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university and advanced certification in one of the DHS recognized treatment modalities; ~~or~~
- Be a Board Certified Behavior Analyst (BCBA); ~~or Board Certified Behavior Analyst - Doctoral (BCBA-D) certification from the National Behavior Analyst Certification Board.~~
- Be a board certified assistant behavior analyst (BCaBA) and 4,000 hours of supervised, clinical experience that meets all registration, supervision, and continuing education requirements of the certification.

~~Additionally, all Level I DBI treatment providers must have a:~~

- ~~Master's degree in one of the behavioral health, child development or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university, or~~

~~B. ABA and DBI Developmental/Behavioral Practitioner (Level II EIDBI provider):~~

~~All Level II ABA and DBI providers must~~ meet one of the following standards:

1. Have a bachelor's degree in one of the behavioral or child development sciences or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university; and meet one of the following requirements:
 - have at least 21,000 hours of supervised, clinical experience and/or training in the examination and/or treatment of children with ASD or a related condition, or equivalent documented coursework at the graduate level by an accredited university in the areas of ASD diagnostics, ASD developmental and behavioral treatment strategies and typical child development, or an equivalent combination of documented coursework and hours of experience;
 - a board-certified assistant behavior analyst (BCaBA);
 - a registered behavior technician (RBT); or
 - certified in one of the other treatment modalities recognized by the Department.

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2. Be currently enrolled in a bachelor's degree program in one of the behavioral or child development sciences or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university, and receive observation and direction from a qualified supervising professional or Level I treatment provider at least twice per month until meetings 1,000 hours of supervised clinical experience.
3. Have an associate's degree in one of the behavioral or child development sciences or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university, and at least 2,000 hours of supervised, clinical experience in delivering treatment to children with ASD or a related condition. Hours worked as a mental health behavioral aide or Level III provider may be included in the required hours of experience.
4. Have at least 4,000 hours of supervised, clinical experience in delivering treatment to children with ASD or a related condition. Hours worked as a mental health behavioral aide or Level III EIDBI provider may be included in the required hours of experience.
5. Be a graduate student in a behavioral science, child development science, or related field, who is receiving clinical supervision from a qualified supervising professional to meet the clinical training requirements.
6. Be at least 18 years of age, Be-fluent in athe language in addition to ~~non-~~ English language, complete the Department's training requirements for a Level III provider, and ~~of the ethnic group to which at least 50 percent of the practitioner's clients belong, and meet the Department's ASD specific training requirements. The practitioner must also receive observation and direction from a qualified supervising professional or qualified Level I ABA or DBI Developmental/Behavioral Professional provider at least once a week until the requirement of reaching 21,000 hours of supervised experience is met. Additionally, all Level II ABA treatment providers must have a~~
- ~~Board Certified Assistant Behavior Analyst (BCaBA) certification from the National Behavior Analyst Certification Board;~~

4.b. Early and periodic screening, diagnosis, and Treatment services.
(continued)

~~Additionally, all Level II DBI treatment providers must have a:~~

- ~~• Bachelor's degree in one of the behavioral or child development sciences or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university; or~~
- ~~• Associate degree in one of the behavioral or child development sciences or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university and at least 4,000 hours of supervised clinical experience in the delivery of treatment to children with ASD. Hours worked as a Behavioral Aide or Developmental/Behavioral Support Specialist may be included in the required hours of experience; or~~
- ~~• At least 6,000 hours of supervised clinical experience in the delivery of treatment to children with ASD. Hours worked as a Behavioral Aide or Developmental/Behavioral Support Specialist may be included in the required hours of experience; or~~

~~Is a graduate student in one of the behavioral sciences, child development sciences, or allied fields and is formally assigned by an accredited college or university to an agency or facility for clinical training with children with ASD.~~

C. ABA and DBI Developmental/Behavioral Support Specialist (Level III EIDBI provider):

All Level III ~~ABA and DBI~~ providers must have the following experience and or training:

- a. Be at least 18 years old;
- b. Meet the Department's ~~ASD~~ specific training requirements for a Level III provider; and one of the following:
 - i. Have a high school diploma or general equivalency diploma (GED) or:
 - ii. Be fluent in a language in addition to the ~~non-English language of the ethnic group to which at least 50 percent of the practitioner's clients belong~~; or
 - iii. Have ~~two~~one years of experience as a primary personal care assistant, community health worker, waiver service provider, or special education assistant ~~primary caregiver~~ to a child with autism spectrum disorder or a related condition within the previous five years; ~~or~~
 - iv. ~~Be a Registered Behavior Technician (RBT) as defined by the Behavior Analyst Certification Board~~

4.b. Early and periodic screening, diagnosis, and Treatment services.
(continued)

Components of EIDBI services:

1. ~~Applied Behavior Analysis (ABA)~~EIDBI Interventions. Interventions are individualized treatments based in behavioral and developmental sciences that address the child's medically necessary treatment goals. Interventions must be targeted to develop, enhance, or maintain the individual developmental skills of a child with ASD or a related condition to improve self-regulation, self-care, behavioral challenges, expressive communication, receptive communication, cognitive functioning, and safety ~~functional communication, social or interpersonal interaction, behavioral challenges and self regulation, cognition, learning and play, self-care and safety.~~

Qualified ~~ABA~~ providers: Qualified Supervising Professional ~~who is certified as a BCBA or BCBA-D, ABA Developmental/Behavioral Professional (Level I Provider), ABA Developmental/Behavioral Practitioner (Level II Provider), and ABA Developmental/Behavioral Support Specialist (Level III Provider).~~

2. ~~Developmental and Behavioral Interventions (DBI)~~are a range of individualized treatments based in developmental theory as well as behavioral sciences which are socially directed, highly engaging, and capitalize on natural motivators to strengthen primary relationships and support child development. DBI interventions focus on joint attention, social engagement and reciprocity, social and non-verbal communication, behavioral and self-regulation, cognition and play to promote development and address core functional deficits. DBI are provided as part of Department recognized single or multi-modality treatment programs.

Qualified ~~providers:~~ Qualified Supervising Professional, ABA or DBI Developmental/Behavioral Professional (Level I Provider), ABA or DBI Developmental/Behavioral Practitioner (Level II Provider), and ABA or DBI Developmental/Behavioral Support Specialist (Level III Provider).

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Effective: 07/01/2017
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2. **Observation and Direction** is the clinical direction and oversight by a qualified EIDBI provider to a lower level provider based on the required provider standards and qualifications regarding provision of EIDBI 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 EIDBI 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.

Qualified providers: Qualified Supervising Professional, ~~ABA and DBI Developmental/Behavioral Professional (Level I Provider)~~, and ~~ABA and DBI Developmental/Behavioral Practitioner (Level II Provider)~~.

3. **Family/Caregiver Training and Counseling** is specialized training and education provided, for the benefit of the child, to a family/caregiver to assist with the child's needs and development. The provider will observe, instruct and train the family/caregivers on the child's development status, and techniques and strategies to promote the child's development.

Qualified providers: Qualified Supervising Professional, ~~ABA and DBI Developmental/Behavioral Professional (Level I Provider)~~, and ~~ABA and DBI Developmental/Behavioral Practitioner (Level II Provider)~~.

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4. **Coordinated Care Conference** brings together the team of professionals that work with the child and family to develop and coordinate the implementation of the individual treatment plan (ITP) to assure that services are coordinated and integrated across providers and service delivery systems. Participants in the conference will perform some, or all, of the following:
- Coordinate and integrate information from the CMDE process
 - Describe intensive treatment options and expectations across service settings;
 - Document intensive treatment scope, modality, intensity, frequency and duration based on the CMDE recommendations and family choice;
 - Review the child's progress toward goals with the child's family;
 - Coordinate services provided to the child and family;
 - Identify the level and type of parent involvement in the child's intensive treatment;
 - Coordinate program transition; and
 - Integrate care and services across service providers to ensure access to appropriate and necessary care including medically necessary speech therapy, occupational therapy, mental health, human services or special education;

Qualified providers: Must be completed by the Qualified Supervising Professional, and may include the CMDE Provider, ~~ABA or DBI~~ Developmental/Behavioral Professional (Level I Provider), and ~~ABA or DBI~~ Developmental/Behavioral Practitioner (Level II Provider).

5. **Individual Treatment Plan (ITP)** is a person-centered, written plan of care for a child receiving EIDBI services. This includes development, ongoing monitoring, and updating of the ITP. The ITP must be based on the CMDE, be culturally and linguistically appropriate, and include input from the child's family and legal representative. The ITP specifies the:
- child's functional goals, including baseline measures and projected dates of accomplishment, which are developmentally appropriate, and work toward generalization across people and environments;
 - treatment modality or modalities;
 - treatment intensity, frequency and duration;
 - setting and any specialized equipment needed;
 - discharge criteria;
 - treatment outcomes and the methods to be implemented to support the accomplishment of outcomes, including the amount of time needed for each Level of provider to deliver child treatment and parent training; and

STATE: MINNESOTA
Effective: 07/01/2017
TN: 17-06
Approved: 12/11/17
Supersedes: 16-02, 14-08

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- Reflect the values, goals, preferences, culture and language of the child's family.

Qualified providers: Must be completed by the Qualified Supervising Professional, ABA and DBI Developmental/Behavioral Professional (Level I Provider), ABA and DBI Developmental/Behavioral Practitioner (Level II Provider).

The child and family's primary spoken language, culture and values must be considered throughout EIDBI services, including the diagnosis, CMDE, individual treatment plan development, progress monitoring, parent education and support services and coordination of care. A language interpreter must be provided when needed.

EIDBI is not intended to replace services provided in school or other settings. Each child's individualized treatment plan CMDE summary and recommendations must document that EIDBI services coordinate with, but do not include or replace special education and related services defined in the child's individualized educational plan (IEP), or individualized family service plan (IFSP), when the service is available under the Individuals with Disabilities Education Improvement Act of 2004 (IDEA) through a local education agency. This provision does not preclude EIDBI treatment during school hours.

EIDBI is provided in the most integrated and inclusive setting possible that supports, promotes, and allows:

- inclusion and participation in the child's home and community life to the fullest extent possible as desired by and determined medically appropriate to the age, condition, and needs of the child by their legal representative in collaboration with a QSP qualified supervising professional and through the CMDE process;
- opportunities for self-sufficiency, developing and maintaining social relationships and natural supports, and generalization of targeted skills across people and environments; and
- a balance between risk and opportunity, meaning the least restrictive supports or interventions necessary are provided in the most integrated settings in the most inclusive manner possible.

EIDBI does not include services provided by a parent, legal guardian or legally responsible person.

Approved: 12/11/17

Supersedes: 16-02 (15-14,14-08,13-17,13-07,11-04,09-04,08-16,07-08,06-02,03-35,01-21)

5.a. Physicians' services:

- **Psychiatric services** may require prior authorization as specified in the Minnesota Health Care Program Provider Manual and on the agency's website. Coverage includes: diagnostic assessment, psychological testing, neuropsychological services, individual psychotherapy, family psychotherapy, multiple family group psychotherapy, group psychotherapy, medication management, electroconvulsive therapy single seizure, explanation of findings, unlisted psychiatric service or procedure, and biofeedback training.
- **Sterilization procedures:** Physicians must comply with all requirements of 42 CFR Part 441, Subpart F concerning informed consent for voluntary sterilization procedures.
- **Abortion services:** These services are covered when due to a physical condition, the abortion is medically necessary to prevent death of a pregnant woman, and in cases where the pregnancy is the result of rape or incest. Cases of rape and incest must be reported to legal authorities unless the treating physician documents that the woman was physically or psychologically unable to report.
- **Psychiatric consultations:** Consultations with psychiatrists, psychologists, licensed independent clinical social workers, licensed marriage and family therapists, and advanced practice registered nurses certified in psychiatric mental health by primary care physicians and other providers authorized to bill for physician services are covered services. If the recipient consents, consultation may occur without the recipient present. Payment for the consultation is made pursuant to Attachment 4.19-B, item 5.a.
- **Optometry services:** Physician services include services of the type which an optometrist is also legally authorized to perform and such services are reimbursed whether furnished by a physician or an optometrist.
- **Early Intensive Developmental and Behavioral Intervention (EIDBI) services:** A physician with a specialty in developmental or behavioral pediatrics and with at least 2,000 hours of experience and/or training in the examination and/or treatment of children with autism spectrum disorder (ASD) or a related condition, or equivalent documented coursework at the graduate level by an accredited university in the areas of ASD diagnostics, ASD developmental and behavioral treatment strategies and typical child development may act as the qualified supervising professional and provide EIDBI services as described in item 4.b.

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Supersedes: 14-08

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4.b. Early and periodic screening, diagnosis, and Treatment services.
(continued)

10. Early Intensive Developmental and Behavioral Intervention (EIDBI).

EIDBI services are medically necessary, intensive treatment provided to promote the child's optimal independence and participation in family, school and community life; EIDBI services educate and support families, reduce stress, and improve long-term outcomes and quality of life for children and their families.

EIDBI provides a range of individualized, medically necessary intensive developmental and behavioral interventions to address or treat, in a comprehensive manner, the functional skills and core deficits of autism spectrum disorder (ASD) and other related conditions that cause persistent, clinically significant impairment in social communication and behavioral interaction and other areas of functional development for which this service is medically appropriate. Skill development focuses on the following domains: self-regulation, self-care, behavioral challenges, expressive communication, receptive communication, cognitive functioning, and safety. ~~social/interpersonal interactions, verbal and non verbal communication, cognition, learning and play, adaptive, self help skills, and behavioral self-regulation.~~

Services must be provided directly to the child, ~~or on behalf of the child, by~~ Family/caregiver training may be provided to the child's parents/caregivers for the benefit of the child.

A **comprehensive multi-disciplinary evaluation (CMDE)** must be completed to determine medical necessity of EIDBI services. The CMDE must include:

- Assessment of the child's degree of severity of core features of ASD and related conditions, as well as other areas of functional development including, self-regulation, self-care, behavioral challenges, expressive communication, receptive communication, cognitive functioning, and safety ~~cognition, learning and play, social/personal interaction, verbal and non verbal communication, adaptive, self help, behavioral self-regulation, and motor development;~~
- Review and incorporation of the diagnosis and other related assessment information from other qualified professionals, including information gathered from family members, child care providers, as well as any medical or assessment information from other licensed professionals working with the child such as the child's rehabilitation therapists, licensed school personnel, or other mental health professionals;

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(continued)

- ~~Identification of current services the child is receiving and integration into the CMDE recommendations;~~
- ~~Identification of and referral to other needed services;~~
- Identification of parent/caregiver preferences and family culture, language, goals and values; and
- Assessment of the type and level of parent/caregiver training and involvement preferred.
- ~~Recommendation of EIDBI treatment including intensity, frequency and duration, and treatment modality options;~~
- ~~Coordination of summary care conferences including: the initial CMDE medical necessity summary conference and re evaluation conference;~~
- ~~Determination of how frequently to monitor the child's progress if monitoring is required more frequently than every 6 months; and~~
- ~~Must include medical information from a licensed physician or advanced practice nurse.~~

Qualified CMDE Provider: A licensed mental health professional, as described in item 6.d.A of Attachments 3.1-A and 3.1-B, a mental health practitioner working as a clinical trainee and under the supervision of a psychiatrist or mental health professional, or a psychiatrist-physician is qualified to provide the CMDE. Providers must:

- A. Have at least 2,000 hours of clinical experience in the evaluation and treatment of children with ASD or a related condition, or equivalent documented course-work at the graduate level by an accredited university in the following content areas: ASD diagnosis, ASD and treatment strategies related to ASD and related conditions, and child development;
- B. Be able to diagnose and/or provide treatment; and
- C. Work within their scope of practice and professional license. +
and
- D. ~~Not be the same professional who delivers or supervises the child's direct treatment. In geographic areas with a provider shortage, as determined by the Department, the same professional may perform the CMDE and deliver or supervise the child's direct treatment.~~

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Effective: 07/01/2017
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4.b. Early and periodic screening, diagnosis, and Treatment services.
(continued)

Provider Qualifications and Training.

Qualified Supervising Professional: All EIDBI services must be billed by, and either provided by or under the clinical supervision of a qualified supervising professional who assumes full professional responsibility for the services provided by Level I, II and III ~~ABA or DBI Developmental/Behavioral EIDBI~~ providers. A qualified supervising professional is a mental health professional, as described in item 6.d.A.

Qualified supervising professionals must work within their licensed scope of practice, and have at least 2,000 hours of supervised, clinical experience and/or training in the examination and/or treatment of children with ASD or a related condition, or equivalent documented coursework at the graduate level by an accredited university in the areas of ASD diagnostics, ASD developmental and behavioral treatment strategies and typical child development.

The following non-licensed practitioners are qualified to provide EIDBI treatment when services are provided for the direct benefit of the child, supervised directly and within the scope of practice of the qualified supervising professional who assumes full professional responsibility for these activities, and they are billed by a qualified supervising professional as described below:

A. ~~ABA and DBI Developmental/Behavioral Professional~~(Level I EIDBI provider):

All Level I ~~ABA and DBI~~ providers must have at least 2,000 hours of supervised, clinical experience and/or training in the examination and/or treatment of children with ASD or a related condition, or equivalent documented coursework at the graduate level by an accredited university in the areas of ASD diagnostics, ASD developmental and behavioral treatment strategies, and typical child development, or an equivalent combination of documented coursework and hours of experience.

4.b. Early and periodic screening, diagnosis, and Treatment services.
(continued)

Additionally, all Level I ~~ABA treatment~~ providers must ~~have a~~:

- Have a Master's degree in one of the behavioral health, child development or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university; ~~and~~
- Have a Bachelor's degree in one of the behavioral health, child development or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university and advanced certification in one of the DHS recognized treatment modalities; ~~and~~
- Be a Board Certified Behavior Analyst (BCBA); ~~or Board Certified Behavior Analyst - Doctoral (BCBA-D) certification from the National Behavior Analyst Certification Board.~~
- Be a board certified assistant behavior analyst (BCaBA) and 4,000 hours of supervised, clinical experience that meets all registration, supervision, and continuing education requirements of the certification.

~~Additionally, all Level I DBI treatment providers must have a:~~

- ~~• Master's degree in one of the behavioral health, child development or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university, or~~

~~B. ABA and DBI Developmental/Behavioral Practitioner (Level II EIDBI provider):~~

All Level II ~~ABA and DBI~~ providers must meet one of the following standards:

1. Have a bachelor's degree in one of the behavioral or child development sciences or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university; and meet one of the following requirements:
 - have at least 21,000 hours of supervised, clinical experience and/or training in the examination and/or treatment of children with ASD or a related condition, or equivalent documented coursework at the graduate level by an accredited university in the areas of ASD diagnostics, ASD developmental and behavioral treatment strategies and typical child development, or an equivalent combination of documented coursework and hours of experience;
 - a board-certified assistant behavior analyst (BCaBA);
 - a registered behavior technician (RBT); or
 - certified in one of the other treatment modalities recognized by the Department.

STATE: MINNESOTA
Effective: 07/01/2017
TN: 17-06
Approved: 12/11/17
Supersedes: 14-08

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(continued)

2. Be currently enrolled in a bachelor's degree program in one of the behavioral or child development sciences or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university, and receive observation and direction from a qualified supervising professional or Level I treatment provider at least twice per month until meetings 1,000 hours of supervised clinical experience.
3. Have an associate's degree in one of the behavioral or child development sciences or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university, and at least 2,000 hours of supervised, clinical experience in delivering treatment to children with ASD or a related condition. Hours worked as a mental health behavioral aide or Level III provider may be included in the required hours of experience.
4. Have at least 4,000 hours of supervised, clinical experience in delivering treatment to children with ASD or a related condition. Hours worked as a mental health behavioral aide or Level III EIDBI provider may be included in the required hours of experience.
5. Be a graduate student in a behavioral science, child development science, or related field, who is receiving clinical supervision from a qualified supervising professional to meet the clinical training requirements.
6. Be at least 18 years of age, Be-fluent in athe language in addition to ~~non-~~ English language, complete the Department's training requirements for a Level III provider, and ~~of the ethnic group to which at least 50 percent of the practitioner's clients belong, and meet the Department's ASD specific training requirements. The practitioner must also receive observation and direction from a qualified supervising professional or qualified Level I ABA or DBI Developmental/Behavioral Professional provider at least once a week until the requirement of reaching 21,000 hours of supervised experience is met. Additionally, all Level II ABA treatment providers must have a~~
- ~~Board Certified Assistant Behavior Analyst (BCaBA) certification from the National Behavior Analyst Certification Board;~~

4.b. Early and periodic screening, diagnosis, and Treatment services.
(continued)

~~Additionally, all Level II DBI treatment providers must have a:~~

- ~~• Bachelor's degree in one of the behavioral or child development sciences or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university; or~~
- ~~• Associate degree in one of the behavioral or child development sciences or allied fields (such as, but not limited to, mental health, special education, social work, psychology, speech pathology, or occupational therapy) from an accredited college or university and at least 4,000 hours of supervised clinical experience in the delivery of treatment to children with ASD. Hours worked as a Behavioral Aide or Developmental/Behavioral Support Specialist may be included in the required hours of experience; or~~
- ~~• At least 6,000 hours of supervised clinical experience in the delivery of treatment to children with ASD. Hours worked as a Behavioral Aide or Developmental/Behavioral Support Specialist may be included in the required hours of experience; or~~

~~Is a graduate student in one of the behavioral sciences, child development sciences, or allied fields and is formally assigned by an accredited college or university to an agency or facility for clinical training with children with ASD.~~

C. ~~ABA and DBI Developmental/Behavioral Support Specialist (Level III EIDBI provider):~~

All Level III ~~ABA and DBI~~ providers must have the following experience and or training:

- a. Be at least 18 years old;
- b. Meet the Department's ~~ASD~~ specific training requirements for a Level III provider; and one of the following:
 - i. Have a high school diploma or general equivalency diploma (GED) or:
 - ii. Be fluent in a language in addition to the ~~non-English language of the ethnic group to which at least 50 percent of the practitioner's clients belong~~; or
 - iii. Have ~~two~~one years of experience as a primary personal care assistant, community health worker, waiver service provider, or special education assistant ~~primary caregiver~~ to a child with autism spectrum disorder or a related condition within the previous five years; ~~or~~
 - iv. ~~Be a Registered Behavior Technician (RBT) as defined by the Behavior Analyst Certification Board~~

4.b. Early and periodic screening, diagnosis, and Treatment services.
(continued)

Components of EIDBI services:

1. ~~Applied Behavior Analysis (ABA)~~EIDBI Interventions. Interventions are individualized treatments based in behavioral and developmental sciences that address the child's medically necessary treatment goals. Interventions must be targeted to develop, enhance, or maintain the individual developmental skills of a child with ASD or a related condition to improve self-regulation, self-care, behavioral challenges, expressive communication, receptive communication, cognitive functioning, and safety ~~functional communication, social or interpersonal interaction, behavioral challenges and self regulation, cognition, learning and play, self-care and safety.~~

Qualified ~~ABA~~ providers: Qualified Supervising Professional ~~who is certified as a BCBA or BCBA-D, ABA Developmental/Behavioral Professional (Level I Provider), ABA Developmental/Behavioral Practitioner (Level II Provider), and ABA Developmental/Behavioral Support Specialist (Level III Provider).~~

2. ~~Developmental and Behavioral Interventions (DBI)~~are a range of individualized treatments based in developmental theory as well as behavioral sciences which are socially directed, highly engaging, and capitalize on natural motivators to strengthen primary relationships and support child development. DBI interventions focus on joint attention, social engagement and reciprocity, social and non-verbal communication, behavioral and self-regulation, cognition and play to promote development and address core functional deficits. DBI are provided as part of Department recognized single or multi-modality treatment programs.

Qualified ~~providers:~~ Qualified Supervising Professional, ABA or DBI Developmental/Behavioral Professional (Level I Provider), ABA or DBI Developmental/Behavioral Practitioner (Level II Provider), and ABA or DBI Developmental/Behavioral Support Specialist (Level III Provider).

STATE: MINNESOTA
Effective: 07/01/2017
TN: 17-06
Approved: 12/11/17
Supersedes: 14-08

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4.b. Early and periodic screening, diagnosis, and Treatment services.
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2. **Observation and Direction** is the clinical direction and oversight by a qualified EIDBI provider to a lower level provider based on the required provider standards and qualifications regarding provision of EIDBI 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 EIDBI 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.

Qualified providers: Qualified Supervising Professional, ~~ABA and DBI Developmental/Behavioral Professional (Level I Provider)~~, and ~~ABA and DBI Developmental/Behavioral Practitioner (Level II Provider)~~.

3. **Family/Caregiver Training and Counseling** is specialized training and education provided, for the benefit of the child, to a family/caregiver to assist with the child's needs and development. The provider will observe, instruct and train the family/caregivers on the child's development status, and techniques and strategies to promote the child's development.

Qualified providers: Qualified Supervising Professional, ~~ABA and DBI Developmental/Behavioral Professional (Level I Provider)~~, and ~~ABA and DBI Developmental/Behavioral Practitioner (Level II Provider)~~.

4.b. Early and periodic screening, diagnosis, and Treatment services.
(continued)

4. **Coordinated Care Conference** brings together the team of professionals that work with the child and family to develop and coordinate the implementation of the individual treatment plan (ITP) to assure that services are coordinated and integrated across providers and service delivery systems. Participants in the conference will perform some, or all, of the following:
- a. Coordinate and integrate information from the CMDE process
 - b. Describe intensive treatment options and expectations across service settings;
 - c. Document intensive treatment scope, modality, intensity, frequency and duration based on the CMDE recommendations and family choice;
 - d. Review the child's progress toward goals with the child's family;
 - e. Coordinate services provided to the child and family;
 - f. Identify the level and type of parent involvement in the child's intensive treatment;
 - g. Coordinate program transition; and
 - h. Integrate care and services across service providers to ensure access to appropriate and necessary care including medically necessary speech therapy, occupational therapy, mental health, human services or special education;

Qualified providers: Must be completed by the Qualified Supervising Professional, and may include the CMDE Provider, ~~ABA or DBI~~ Developmental/Behavioral Professional (Level I Provider), and ~~ABA or DBI~~ Developmental/Behavioral Practitioner (Level II Provider).

5. **Individual Treatment Plan (ITP)** is a person-centered, written plan of care for a child receiving EIDBI services. This includes development, ongoing monitoring, and updating of the ITP. The ITP must be based on the CMDE, be culturally and linguistically appropriate, and include input from the child's family and legal representative. The ITP specifies the:
- child's functional goals, including baseline measures and projected dates of accomplishment, which are developmentally appropriate, and work toward generalization across people and environments;
 - treatment modality or modalities;
 - treatment intensity, frequency and duration;
 - setting and any specialized equipment needed;
 - discharge criteria;
 - treatment outcomes and the methods to be implemented to support the accomplishment of outcomes, including the amount of time needed for each Level of provider to deliver child treatment and parent training; and

STATE: MINNESOTA
Effective: 07/01/2017
TN: 17-06
Approved: 12/11/17
Supersedes: 16-02, 14-08

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4.b. Early and periodic screening, diagnosis, and Treatment services.
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- Reflect the values, goals, preferences, culture and language of the child's family.

Qualified providers: Must be completed by the Qualified Supervising Professional, ABA and DBI Developmental/Behavioral Professional (Level I Provider), ABA and DBI Developmental/Behavioral Practitioner (Level II Provider).

The child and family's primary spoken language, culture and values must be considered throughout EIDBI services, including the diagnosis, CMDE, individual treatment plan development, progress monitoring, parent education and support services and coordination of care. A language interpreter must be provided when needed.

EIDBI is not intended to replace services provided in school or other settings. Each child's individualized treatment plan ~~CMDE summary and recommendations~~ must document that EIDBI services coordinate with, but do not include or replace special education and related services defined in the child's individualized educational plan (IEP), or individualized family service plan (IFSP), when the service is available under the Individuals with Disabilities Education Improvement Act of 2004 (IDEA) through a local education agency. This provision does not preclude EIDBI treatment during school hours.

EIDBI is provided in the most integrated and inclusive setting possible that supports, promotes, and allows:

- inclusion and participation in the child's home and community life to the fullest extent possible as desired by and determined medically appropriate to the age, condition, and needs of the child by their legal representative in collaboration with a QSP qualified supervising professional and through the CMDE process;
- opportunities for self-sufficiency, developing and maintaining social relationships and natural supports, and generalization of targeted skills across people and environments; and
- a balance between risk and opportunity, meaning the least restrictive supports or interventions necessary are provided in the most integrated settings in the most inclusive manner possible.

EIDBI does not include services provided by a parent, legal guardian or legally responsible person.

STATE: MINNESOTA

Effective: 07/01/2017

TN: 17-06

Approved: 12/11/17

Supersedes: 16-02 (15-14,14-08,13-17,13-07,11-04,09-04,08-16,07-08,06-02,03-35,01-21)

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5.a. Physicians' services:

- **Psychiatric services** may require prior authorization as specified in the Minnesota Health Care Program Provider Manual and on the agency's website. Coverage includes: diagnostic assessment, psychological testing, neuropsychological services, individual psychotherapy, family psychotherapy, multiple family group psychotherapy, group psychotherapy, medication management, electroconvulsive therapy single seizure, explanation of findings, unlisted psychiatric service or procedure, and biofeedback training.
- **Sterilization procedures:** Physicians must comply with all requirements of 42 CFR Part 441, Subpart F concerning informed consent for voluntary sterilization procedures.
- **Abortion services:** These services are covered when due to a physical condition, the abortion is medically necessary to prevent death of a pregnant woman, and in cases where the pregnancy is the result of rape or incest. Cases of rape and incest must be reported to legal authorities unless the treating physician documents that the woman was physically or psychologically unable to report.
- **Psychiatric consultations:** Consultations with psychiatrists, psychologists, licensed independent clinical social workers, licensed marriage and family therapists, and advanced practice registered nurses certified in psychiatric mental health by primary care physicians and other providers authorized to bill for physician services are covered services. If the recipient consents, consultation may occur without the recipient present. Payment for the consultation is made pursuant to Attachment 4.19-B, item 5.a.
- **Optometry services:** Physician services include services of the type which an optometrist is also legally authorized to perform and such services are reimbursed whether furnished by a physician or an optometrist.
- **Early Intensive Developmental and Behavioral Intervention (EIDBI) services:** A physician with a specialty in developmental or behavioral pediatrics and ~~with~~ at least 2,000 hours of experience and/or training in the examination and/or treatment of children with autism spectrum disorder (ASD) or a related condition, or equivalent documented coursework at the graduate level by an accredited university in the areas of ASD diagnostics, ASD developmental and behavioral treatment strategies and typical child development may act as the qualified supervising professional and provide EIDBI services as described in item 4.b.

STATE: MINNESOTA
Effective: 07/01/2017
TN: 17-06
Approved: 12/11/17
Supersedes: 14-08

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4.b.Early and periodic screening, diagnosis, and treatment services.

Effective for services provided on or after July 1, 2015, payment for **Early Intensive Developmental and Behavioral Intervention (EIDBI)** services is the lower of:

1. Submitted charge, or
 2. The resource based relative value scale (RBRVS) calculated rate;
- or

If an RBRVS rate is not available, the following state agency established rates:

- Comprehensive multi-disciplinary evaluation conducted by a doctoral prepared professional, per evaluation: \$285.38 (if the service is provided by a masters level trained provider: \$228.30)

For the following services, the agency established rate is based on the service being provided by a qualified supervising professional ~~(QSP)~~ or Level I provider ~~ABA or DBI developmental/behavioral professional~~; the agency established rate is reduced 20% when provided by an ~~ABA or DBI development/behavioral practitioner~~ Level II provider; the agency established rate is reduced by 50% when provided by a ~~development/behavioral support specialist~~ Level III provider.

- Individual Treatment Plan (ITP) development, per 15 minute unit: \$20.61
- Coordinated care conference, per provider per session: \$97.98
- ~~Applied behavioral analysis (ABA)~~ EIDBI intervention, per 30 minute unit: \$35.08
- Group ~~intervention~~ ABA, per 30 minute unit: \$11.68
- ~~Developmental/behavioral intervention (DBI)~~, per 30 minute unit: ~~\$35.08~~
- Group ~~DBI~~, per 30 minute unit: ~~\$11.68~~
- Observation and Direction of ~~ABA or DBI~~ EIDBI intervention, per 30 minute unit: \$35.08
- Family/caregiver training and counseling, per 15 minute unit: \$17.54
- Group family/caregiver training and counseling, per 15 minute unit: \$5.84

Necessary travel time to provide EIDBI services is paid using the same methodology that applies to provider travel time in item 6.d.A.