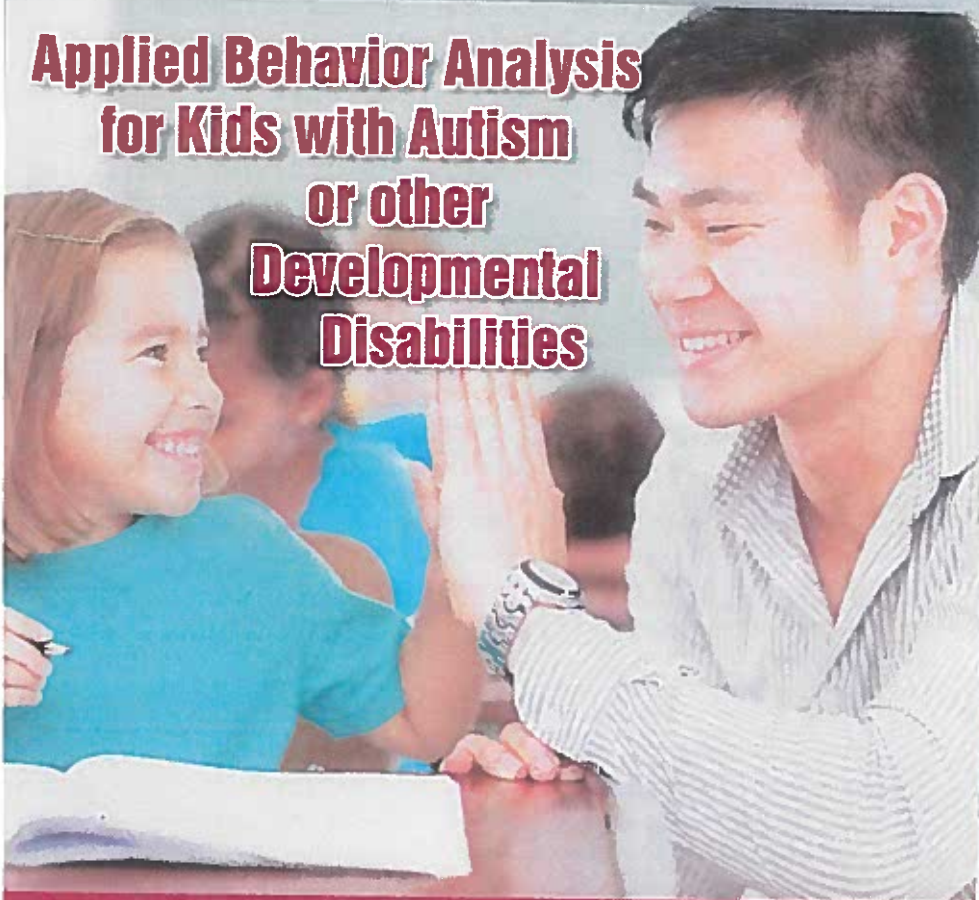


# Applied Behavior Analysis for Kids with Autism or other Developmental Disabilities



*New Health Insurance is in effect for children of whom are challenged with autism or a developmental disability.*

Everyone these days knows someone who has a child with autism, as Autism is diagnosed in 1 in 68 children (CDC, 2012). In fact, if you don't have a child with autism, you probably have a neighbor or relative whose family is challenged with Autism or similar developmental disability.

## **NEW ON THE HORIZON IN HAWAII: HEALTH INSURANCE FUNDING FOR ABA TREATMENT**

Health insurers in Hawaii are now covering Applied Behavior Analysis (ABA) in fully funded insurance plans, to the minimum required \$25,000 per year. Medicaid (Quest Program in Hawaii) also covers ABA treatment and has no fiscal cap,

by Amy Smith Weich

meaning that kids who require 30-40 hours a week can receive intensive treatment without the barrier of a funding cap. In addition, under the Early and Periodic Screening, Treatment and Diagnosis (EPSTD) program, Medicaid will provide a trial of ABA to children such as children up to age 21 with Down Syndrome, or other developmental disabilities. Parents should be advised that funding caps, along with a plethora of other provisions sometimes required by health insurers may violate Mental Health Parity and Addiction

Act of 2008 (MHPAEA).

### WHAT IS ABA THERAPY LIKE?

Well, ABA therapy can look different depending on the child or adolescent. An early learner (a non-verbal child or one with limited communication skills) would spend most his/her session time engaging in pairing and mand training using naturally occurring activities such as play,

with a Registered Behavior Technician (RBT).

“Pairing” is the process of pairing oneself with positive reinforcement and may take as long as a month, depending on the child’s learning history. Mand training uses the child’s motivation to get the child to echo a speech sound or whole word, sign language or a tablet device with photos, in order for the RBT to deliver the reinforcer.

For a school-age child who has social deficits, minor language deficits and maybe behavioral challenges, ABA may contain some fluency-based programs to increase speed of responding- we call this Precision Teaching. In addition, some social skills training, language acquisition programming, and behavior reduction protocols along with play skill targets may be worked on.

For children who may have not developed an adequate language repertoire, and are older (ages 10-18) may be in need of learning “life skills” so that they can achieve more independence from caregivers. These may include self-care (washing, bathing, dressing), light meal preparation, leisure activities, functional language acquisition, and perhaps inappropriate behavior reduction.

### BEING A SMART CONSUMER OF ABA

ABA is a life-changing evidence-based treatment, however the road to ABA ser-

vices may not be easy for parents to navigate. Parents should do their homework and interview potential ABA provider agencies in order to be smart consumers of ABA. Questions they should ask include: How long has the agency been providing ABA in Hawaii? How many BCBA’s on staff? How many RBT’s on staff? What

generally is the number of clients on a supervisor’s caseload (link to ABA practice

g u i d e l i n e s

[http://bacb.com/asd-](http://bacb.com/asd-practice-document/)

practice-document/)?

How many techni-

cians (RBTs) will

be assigned to work

with my child (more

than 1 is recom-

mended, and in full-

time 40 hours/week

cases 3-4 RBTs may be

necessary)? What is your

policy on session cancellations

or lateness? What type of parent training

and how much training do you offer?

Parents are their child’s best advocate and knowledge is key and should be given resources to learn about ABA, such as videos, books, and training by a Board Certified Behavior Analyst (BCBA). Training gives them the tools they need to generalize the skills their child learns in ABA, to implement behavior reduction procedures consistently across settings and home, and to promote generalization across caregivers.

Other things to consider are home-based ABA vs clinic-based ABA. Parents are usually required to be present during sessions in the home, whereas with clinic-based sessions, parents can drop off and pick up, or stay to observe the session. For home-based ABA, you should consider the impact on your family, space, privacy, time commitment required for therapy sessions, and your willingness to convert your home into a therapy center. You might also inquire about program materials parent are

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required to purchase (ie) toys, reinforcers, program supplies, curriculum items, which may be costly. Clinic-based ABA usually includes all of the toys, reinforcers, and materials necessary for a child's program.

If your child is non-verbal, he/she may not possess the prerequisite skills to benefit from school, therefore the clinical recommendations may be 40 hours a week. You will also want to inquire about the provider's ability to provide fulltime ABA (8 hours a day/5 days a week; 40 hours/week), and maintain adequate staff (at least 3-4 RBTs assigned).

Curriculum should also be inquired. Researchers advise against the use of "cook book" – you get the colors, shapes and numbers program whether you need it or not type approaches to programming, and suggest an individualized approach based on the clinical assessment for developing ABA programs for each child.

The triumphs of ABA quickly leave parents with overwhelming confirmation that they made the right choice in choosing an ABA provider for their child. Sometimes the results are not achieved as quickly, however the graphs indicate that the child is making progress. If ABA is done with fidelity should produce pretty immediate results and changes.

#### **CHOOSING AN ABA PROVIDER IN HAWAII**

Visit the Autism Speaks resource guide, a registry of service providers in Hawaii <https://www.autismspeaks.org/resource-guide/by-state/106/Applied%20Behavior%20Analysis%20ABA%29/HI>

You may also want to call your health insurance company and confirm that ABA is a benefit in your plan. The health insur-


ance company should be able to give you a complete list of the providers who they are in-network with.

If you are told that the company you work for does not offer ABA treatment as a benefit, you can ask if your company is a "self-funded" company,

which are ERISA companies not obligated to follow the state mandate.

Included in this link is a list to reference the self-funded companies who choose to cover ABA treatment. This link also includes a tool kit for parents who would like to approach their HR department and request that a rider for ABA be added.

Autism Speaks attorneys can also help with advocacy efforts. [https://www.autismspeaks.org/sites/default/files/docs/erisa\\_tool\\_kit.pdf](https://www.autismspeaks.org/sites/default/files/docs/erisa_tool_kit.pdf)

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**"Health Insurers  
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covering Applied Behavior  
Analysis (ABA) in fully  
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\$25,000 per year."**