General Information to remember

- * Trailer bill language enacted by California in 2011(SB 946) requires parents of children with autism to access their insurance for applied behavior analysis (ABA) and evidence-based behavior intervention prior to San Andreas Regional Center funding these therapies
- San Andreas or your health care provider can make a recommendation for these services if they are appropriate for your child.
- Ask your health plan to provide this behavioral health service to your child. If you are told that the services are not medically necessary, ask for your child to be assessed.
- If the health plan denies your request for an assessment or for the service, you may appeal the denial. Information about how to appeal will be included in the letter informing you of the denial.
- If the health plan denies your appeal or does not respond to your appeal within 30 days, you may request an independent medical review (IMR) from the Department of Managed Health Care. Information about the IMR process will be included in the denial letter. You can also obtain information about the IMR process at www.healthhelp.ca.gov or by calling 888-466-2219.
- San Andreas may request that you provide the response received from the IMR before funding for behavioral interventions will be considered.



Where can I find specific information about how to navigate my insurance plan?

The Autism Health Insurance Project has a website www.autismhealthinsurance.org

You can also call the Department of Managed Health Care at 1-888-466-2219 Or go to the website www.healthhelp.ca.gov

The California Department of Insurance also has a help line in their Consumer Communications Bureau 1-800-927-HELP

Where can I find more information about the autism insurance mandate law SB 946?

You can go to the website www.insurance.ca.gov

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Additional information can be found at http://www.sanandreasregionalcenter.org/

A PARENT'S GUIDE: HOW TO REQUEST ABA OR BEHAVIOR INTERVENTION THERAPY FROM YOUR INSURANCE COMPANY



NAME OF INSURANCE COMPANY
CHILD'S POLICY#
YOUR SERVICE COORDINATOR IS:
YOUR SERVICE COORDINATOR CAN BE REACHED BY PHONE AT
()OR BY
E-MAIL AT @SARC.ORG



"Consumers first through service, advocacy, respect, and choice"

What is ABA?

ABA stands for Applied Behavior Analysis. ABA is based on the principle that behavior can be changed in positive and meaningful ways using strategies that have been developed over decades or research. Behavior Intervention is another term for ABA.

How do I know if my child needs ABA or behavior intervention programs?

If your child has serious behavior challenges in the home or community and you suspect it is related to an autism diagnosis please speak to your Service Coordinator and your child's doctor. San Andreas may assess your child and make a recommendation for a behavior intervention plan. Your doctor may also recommend a separate assessment. Only San Andreas can recommend San Andreas funded behavior interventions.

How do I request funding for the behavior therapy as recommended at the IPP?

For PPO and EPO polices you can go directly to your child's pediatrician and ask for a prescription for the recommended services to take to a vendor that accepts your insurance. For HMO polices you can ask your child's pediatrician to give a referral or authorization to an in network provider for the recommended services. Or for all policies you can go directly to your insurance plan and request behavioral health services. The insurance company may request to do an insurance evaluation to determine medical necessity.

Is my insurance company responsible for funding recommended Behavior Intervention therapy?

Your insurance company is only required to cover what is covered under your specific policy or for fully funded plans any State or Federal Mandates. The California Department of Managed Healthcare includes all HMOs, Blue Cross and Blue Shield. The DMHC requires your health plan to provide ABA and evidence based behavior intervention therapy that is deemed medically necessary under your policy.

Can Behavior Intervention therapy be provided to help my child with school related issues?

No. Neither San Andreas nor your insurance will provide ABA in the school or for school related issues at home. Additionally, ABA cannot be used for the purpose of providing respite, day care or educational support.

How do I know what coverage I have?

You can find out what benefits are covered or excluded by your health plan in a document called the Evidence of Coverage, or EOC. You should receive an EOC from your employer or directly from your health plan on an annual basis. If you do not have one, you may request a copy. These documents may also be available on your health plan's Web site.

What is the time frame for insurance companies to respond to a therapy request?

Insurance companies have 30 to 45 business days to respond to your request.

What should I do if my insurance denies funding the therapy?

You may appeal the denial for services through an independent medical review (IMR). Information on how to appeal a denial of service should be included in the denial letter from your insurance company. This information is also available at www.healthhelp.ca.gov or by calling 1-888-466-2219.

What if my insurance company agrees to fund sessions, but the authorized sessions are less than the IFSP/IPP recommended therapy?

San Andreas will require that you exhaust your insurance benefits before we can consider supplementing behavior intervention sessions.

Will San Andreas cover my co-pays or assist with my deductibles?

San Andreas may cover co-pays and deductibles if the family income is less than 400% of the Federal Poverty Guideline (W&IC 4659.1 sec 7). Ask your Service Coordinator about the process What is a utilization review?

This process is when your health plan may periodically evaluate your child's progress in therapy to see if continuation of services is medically necessary.

What happens when the insurance sessions are exhausted, but your child continues to need behavior intervention?

San Andreas may fund behavior intervention therapy once the insurance is exhausted if the IPP team is in agreement. You should consult your service coordinator for options before the insurance funded sessions end.