Early Intensive and Consultative Behavioral Intervention Services for Children with Autism Spectrum Disorders Fact Sheet

Purpose of the Program
The CLTS Waivers provide funding for some specific services that are not covered by the Wisconsin ForwardHealth Medicaid card. For young children diagnosed with an Autism Spectrum Disorder (ASD), early intensive behavioral intervention (EIBI) and consultative behavioral intervention (CBI) are CLTS Waiver services designed to teach new skills and help reduce the challenging behaviors often found in children with an ASD. Eligible children may participate in these programs in any combination for up to three years, after which the child may qualify for ongoing waiver services at a less intensive level that address the more diverse needs of the growing child. The goal of the program is for the child to have fewer needs in the future and to make significant gains towards typical development, including an increase in social, behavioral and communication skills that the child can use at home and in their community.

Eligibility Criteria
For a child’s name to be added to the wait list for autism treatment services, a child must meet ALL of the following criteria:

1. Be under eight (8) years of age when approved by DHS for placement on the wait list.
3. Be a United States citizen or have acceptable immigration status.
4. Be a Wisconsin resident and a resident for six months if there is a waiting list.
5. Live at home with his or her family.
6. Require a level of care typically provided in either a Psychiatric Hospital or an Intermediate Care Facility for the Mentally Retarded (ICF-MR).
7. Be provided safe and appropriate care in the family’s home.
8. Not have income in their name in excess of the current standards for a child living in an institution.
9. Have a diagnostic evaluation that meets these requirements:
   a. The evaluation must have been completed by a qualified clinician.
   b. The clinician’s evaluation must state that the child has an Axis I diagnosis of Autism, Asperger Syndrome, or Pervasive Developmental Disorder not otherwise specified (PDD-NOS).
   c. The evaluation must have been completed no more than one year prior to application for CLTS Waiver funding for autism treatment services.
   d. The evaluation must include supporting documentation that includes a DSM-IV-R Axis I diagnosis and identification of the testing tools used.
   e. The tests used must be considered validated for the age of the child and the diagnosis given.
   f. The evaluation must support that the child is a good candidate for this treatment methodology.

In addition to the basic eligibility criteria above, the parents will be asked to confirm the following:

1. They agree to participate in at least 12 months of treatment at the chosen level of service (i.e., EIBI or CBI services);
2. That the child has not already received two or more years of treatment services at the EIBI and/or CBI levels, regardless of source of payment. Payer sources may include but are not limited to:
private insurance, Medicaid, private pay, or other state-funded programs (e.g., intensive or non-intensive services as defined by an insurer including 20-30 hours of treatment per week)

3. That a treatment provider has been identified who has agreed to provide treatment for the child. It is the parent’s responsibility to obtain written confirmation from the provider that they are willing and able to provide services to the child at the time the child becomes eligible for CLTS waiver funded treatment. The parents must provide a copy of this information to the county support and service coordinator, who will submit it to DHS as part of the application packet.

Program Benefits

EIBI and CBI services are typically provided on a one-to-one basis by a team, including a lead therapist, senior staff as well as line staff. The team develops and implements a treatment plan that is individualized to each child’s developmental needs. This treatment approach addresses specific skills for each child that are clearly defined in observable terms and are measured carefully by direct observation throughout each treatment session. Treatment funding provides two service level options for children. Services may be in the child’s home or in the community and be at 10-20 or 30-40 hours per week, depending on the clinical needs of your child. Services must last at least one year at the chosen level of service but no more than three years.

Service Details

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<thead>
<tr>
<th></th>
<th>Consultative Behavioral Intervention Services</th>
<th>Early Intensive Behavioral Intervention Services</th>
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<tbody>
<tr>
<td>Effective Date</td>
<td>After April 19, 2012, contingent on county waiver agency ability to authorize services through the third party administration process</td>
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<tr>
<td>Hours</td>
<td>10-20 per week face to face, including staffing and travel hours</td>
<td>30-40 per week face to face, including staffing and travel hours</td>
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<tr>
<td>Allowable costs</td>
<td>Treatment, service coordination, respite, and treatment-related adaptive aids</td>
<td>Treatment and service coordination</td>
</tr>
<tr>
<td>Service location</td>
<td>Home, center-based, &amp; community, based on the individual clinical needs of the child as determined by the lead therapist from the provider agency</td>
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Additionally, families who had a child in the program or on the wait list for treatment services prior to January 1, 2012 may also choose the former “Intensive In-Home” model which allowed for treatment at the 20-35 hours a week level, including staffing and travel hours. This option is being phased out based on the most recent research relative to treatment efficacy.

Prior to waiver funding becoming available, a family must choose a level of service for their child, and the family can opt to move down to a less intensive level at any point in the future. However, a family cannot choose to move up to a more intensive level of service, so careful consideration of the child’s needs based on a discussion with the treatment provider will be helpful.