



Behavior Services

Applied Behavior Analysis (ABA)

Applied behavior analysis (ABA) is a therapeutic intervention typically used for children or teens with autism spectrum disorder (ASD). ABA utilizes evidence-based practices in behavior analysis to help increase self-care/adaptive skills, functional communication, leisure and social skills, as well as decrease negative behaviors such as aggression, self-injurious behaviors and elopement. An RCEB funded ABA program occurs in the individual's natural environment at home and in community settings that are part of their regular routine (i.e. store, restaurant, park, etc.). RCEB cannot fund ABA to occur at the child's school or at an ABA clinic. ABA services typically utilize a 3-tier model with a registered behavior technician (RBT), supervisor, and director. Parents/Caregivers also participate in parent training with the supervisor or director as part of a child's ABA program. Most private insurance companies fund ABA for children and youth with ASD, and Medi-Cal funds ABA for children and youth with a variety of developmental disabilities. Insurance must be utilized if covered under their plan. ABA typically falls within the behavioral health treatment (BHT) category of medical insurance benefits.

Referral process for RCEB funding: For clients with Medi-Cal under the age of 21, Medi-Cal should fund ABA. For clients with ASD who have private insurance, there must be evidence that ABA is not a covered benefit and/or is denied by insurance prior to RCEB being able to fund. Documentation, such as an insurance denial letter or copy of exclusions section noting ABA is not a covered benefit must be provided for the current calendar year. For clients 18 and older, Case Manager should request a Clinical Team meeting with client/family in attendance to discuss request. All paper purchases for ABA should be submitted by CM Supervisor to ASD Coordinator, for review and signature.

ABA Social Skills Groups

Social skills groups are usually provided by an ABA provider or another professional. These services are provided in a group setting and typically occur in an ABA clinic or a community location. These groups are frequently covered by insurance as a form of behavioral health treatment (BHT). Insurance must be utilized if BHT is covered under the client's plan.

Referral process for RCEB funding: Medi-Cal and/or private insurance should be explored prior to considering RCEB funding. Medi-Cal typically funds BHT up to age 21. For private insurance, documentation, such as an insurance denial letter or copy of exclusions section noting BHT/social skills groups are not a covered benefit must be provided for the current calendar year. For clients 18 and older, Case Manager should request a Clinical Team meeting with

client/family in attendance to discuss request. All paper purchases for social skills groups should be submitted by CM Supervisor to ASD Coordinator, for review and signature.

Behavior Intervention Services (BIS)

Behavior Intervention Services (BIS) is also a form of ABA that is delivered in a train-the-trainer model. The goal is to provide family members and/or caregivers with the skills to manage challenging behaviors and/or increase self-care/adaptive skills through training, modeling, and coaching. BIS services are provided by a behavior consultant. BIS services are typically provided to family members and caregivers one or a few times per week. Direct services to the client are not provided. BIS is frequently covered by insurance as a form of behavioral health treatment (BHT) and is sometimes referred to as behavior consultation or parent-led ABA. Insurance must be utilized if BHT is covered under the client's plan.

Referral process for RCEB funding: As with ABA, insurance must be utilized for BIS if behavioral health treatment (BHT) is covered. Insurance may refer to BIS as behavior consultation or parent-led ABA. Medi-Cal and/or private insurance should be explored prior to considering RCEB funding. Medi-Cal typically funds BHT up to age 21. For private insurance, documentation, such as an insurance denial letter or copy of exclusions section noting BHT is not a covered benefit must be provided for the current calendar year. BIS purchases do not require clinical review unless the request for services is higher than 60 hours total over a 6-month period.

WRAP Services:

WRAP services (also referred to as wraparound) are for children and transition-aged youth who have mental health, social emotional, family support, and/or behavioral needs that require support to help them continue to live in their family home instead of moving into a higher level of care. WRAP services may also be utilized when a client is transitioning from a higher level of care and returning to the family home. The main goals of WRAP are to assist in placement stability and promote connections and support for the client and family members through safety planning, behavior intervention, family and individual coaching, and resource linkage. WRAP teams generally include a combination of specialists such as a care coordinator, family/client coach, behavior analyst or intervention specialist, or client/family partner. Some WRAP programs may also provide access to a psychiatrist to address medication needs as well as an on-call clinician to help during crises and encourage de-escalation techniques. Individuals and families can expect to interact with members of their WRAP team anywhere from 1-3 plus hours per week, depending on the needs of the individual/family.

Referral process: All generic resources must be explored first, such as services through local county mental health and/or private insurance. If these services and supports are denied or if what is available is insufficient to meet the needs of the client/family, in order to keep client in the family home, RCEB funding can be considered. The request for WRAP must be clinically reviewed prior to a referral being made.