



AUTISM

National Academies of Science, Engineering, and
Medicine's Independent Analysis of the DoD's
Autism Care Demonstration:
Public Commentary



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ABS Kids



Founded in
2011



4 states: CA,
UT, NC, and TN



≈2,500 clients
18 mo -18 yrs+



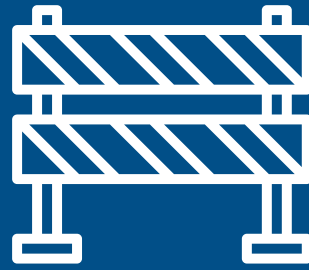
Center, Home,
and School
based services



Comprehensive
(60%) and
Focused
Treatment
(40%)



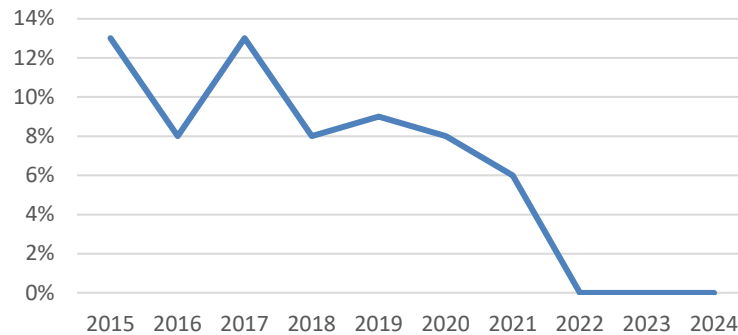
≈ 50 Payer
Sources



Tricare Barriers Impacting Access to Care

Former Tricare Provider 2015-2021

Tricare % of New Client Population



Access and Administrative Barriers

(e.g., credentialing, revenue collection management)



Service Limitations

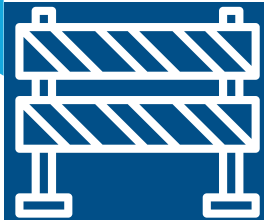
(e.g., assessment, goals, location of services, parent training)



Clinical Process Barriers

(e.g., re-referral, excessive documentation requirements, peer review/medical team conferences)





Administrative Barriers Impacting Access to Care

#1: Credentialing of RBTs

RBT Requirements



No grace period



Directly impacts access to care

Tricare Credentialing
of RBTs



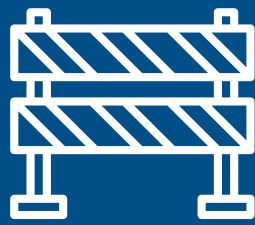
Lengthy process



Directly impacts access to care



Wait times up
to 1 year!



Administrative Barriers

#2: Revenue Collection Management

Claims

25 - 30%

of Tricare
Claims



Appealed

**Nearly
100%**
successfully
appealed

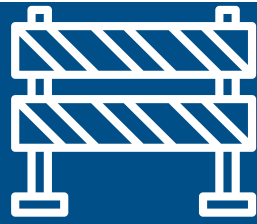


Resources

30 - 40%

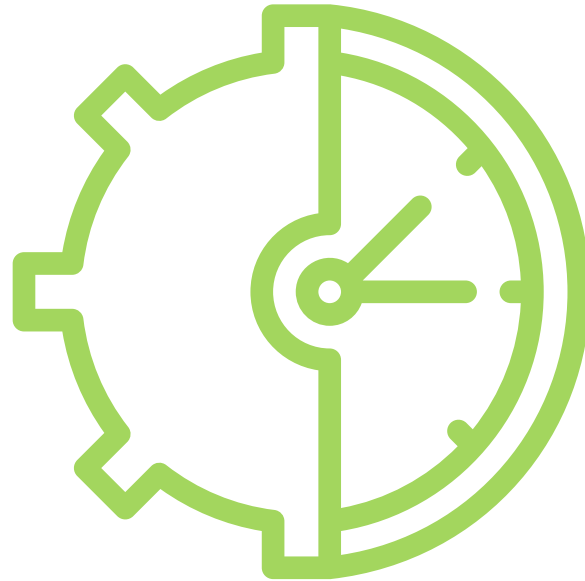
of company-wide
administrative
resources



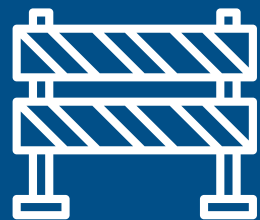


Service Limitations Impacting Access to Care

#3: Parent Training Limitations



Parent training participation limited to non-direct care and supervision dates of services.



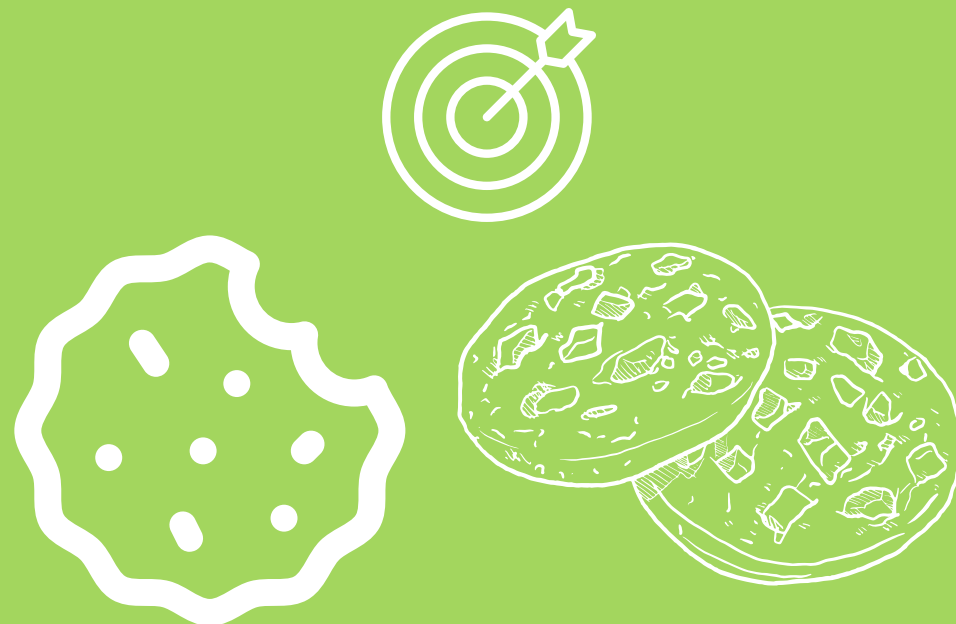
Service Limitations Impacting Access to Care

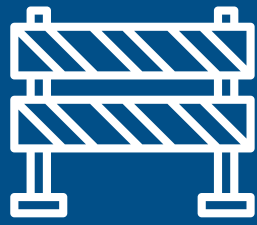
#4: Limitation on Treatment Goal Selection

NO ADLs



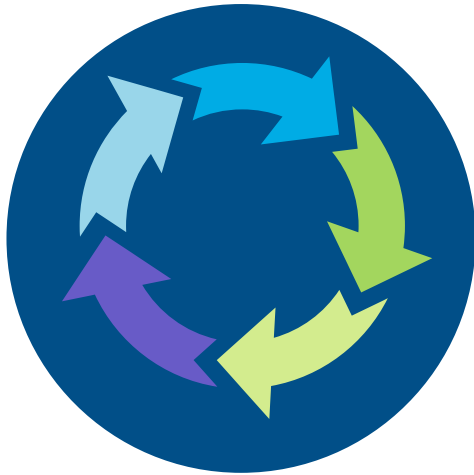
Excessive Interpretation of Goals as “Educational”





Service Limitations Impacting Access to Care

#5: Location of Service Restrictions



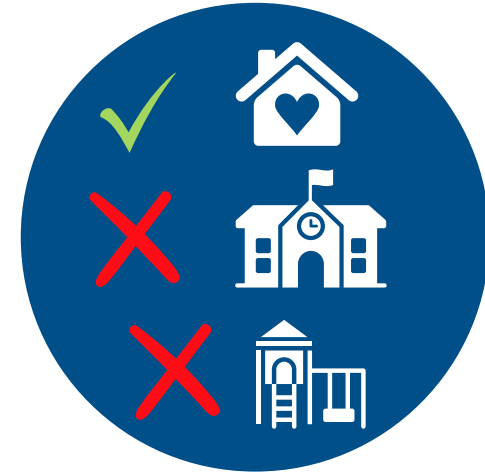
Continuity of Care

“to ensure continuity of care, sufficient ABA treatment and consultation should be delivered in subsequent educational and therapeutic settings to successfully support and transition individuals”
(CASP, 2020)



Locations

ABA services may be provided: home, school, community, center, residential, hospital/inpatient



Tricare Authorization

Tricare ONLY Authorizes Home (No school, no community)

Summary



The **goal** is for clients to access **quality** ABA services.



Administrative Burden



Concurrent Billing Restrictions



Risk/Reward Analysis



Policy Restrictions



If Tricare were to **align** itself with **industry standards and rates**, we would certainly be **one of the first providers** to reincorporate Tricare patients into our **patient population**.



Funding Source Barriers to ABA

Policy Restrictions	Tricare	ABS Kids Payer Mix
1. RBT Required	X	≈ 50%
2. Credentialing RBTs with Funder	X	0%
4. Specific ABA Assessment Tool Requirements	X	<10%
5. No ADL Goals	X	<5%*
6. Excessive Interpretation of Communication Goals as “Educational”	X	<5%*
7. Excessive Formatting Assessment Requirements	X	0%
8. Location of Service Limitations: School	X	≈ 50%
9. Location of Service Limitations: Community	X	0%
10. Parent Training limited to non-direct care/supervision dates of service	X	0%
11. Medical Team Conferences for Auth Approval	X	0%
12. Lengthy Report Review Periods = Gap in Services	X	0%
13. No Concurrent Billing of Direct Care & Supervision	X	0%
14. No Concurrent Billing of Direct Care & Parent Training	X	0%
15. Supervision and Parent Training Cannot be Billed Same Day	X	0%
16. Non-industry Standards Caps on Supervision	X	<3%

* Authorized w/justification