

## **Table of Contents**

**State/Territory Name: Florida**

**State Plan Amendment (SPA) #:16-0003**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Atlanta Regional Office  
61 Forsyth Street, Suite 4T20  
Atlanta, Georgia 30303



**DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS**

---

September 21, 2016

Justin M. Senior  
Deputy Secretary for Medicaid  
Agency for Health Care Administration  
2727 Mahan Drive, Mailstop #20  
Tallahassee, FL 32308

ATTN: April Cook

RE: Title XIX State Plan Amendment 16-0003

Dear Mr. Senior:

We have reviewed the proposed amendment to the Florida State Plan, submitted under transmittal number FL 16-0003. This amendment adds coverage for behavior analysis services by providing highly structured interventions with the goal of targeting and decreasing maladaptive behaviors for recipients under the age of 21 years for whom behavior analysis services are recommended by a licensed physician.

Based on the information provided, this amendment was approved on September 20, 2016. The effective date is March 31, 2016. We are enclosing the approved form HCFA 179 and plan pages. If you have any questions, please contact Cheryl L. Brimage at 404-562-7116 or by email at [cheryl.brimage@cms.hhs.gov](mailto:cheryl.brimage@cms.hhs.gov).

Sincerely,

//s//

Jackie Glaze  
Associate Regional Administrator  
Division of Medicaid & Children's Health Operations

Enclosure

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b>  <b>FOR: HEALTH CARE FINANCING ADMINISTRATION</b>		1. TRANSMITTAL NUMBER: 2016-003	2. STATE Florida
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE March 31, 2016	
5. TYPE OF PLAN MATERIAL ( <i>Check One</i> ):			
<input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT ( <i>Separate Transmittal for each amendment</i> )			
6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR 440.130(d)		7. FEDERAL BUDGET IMPACT: (in thousands)	
		FFY 2015-2016 \$42,620	
		FFY 2016 -2017 \$59,124	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 3.1-A page 5c (new) Attachment 3.1-B page 6b (new) Attachment 4.19-B page 3d (new)		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT ( <i>If Applicable</i> ):	
10. SUBJECT OF AMENDMENT: Behavior Analysis Services			
11. GOVERNOR'S REVIEW ( <i>Check One</i> ):			
<input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		<input checked="" type="checkbox"/> OTHER, AS SPECIFIED: Reviewed by the Deputy Secretary for Medicaid who is the Governor's designee.	
12. SIGNATURE OF STATE AGENCY OFFICIAL: //s//		16. RETURN TO: Mr. Justin M. Senior Deputy Secretary for Medicaid Agency for Health Care Administration 2727 Mahan Drive, Mail Stop #8 Tallahassee, FL 32308  Attention: April Cook	
13. TYPED NAME: Mr. Justin M. Senior			
14. TITLE: Deputy Secretary for Medicaid			
15. DATE SUBMITTED: 03-31-16			
<b>FOR REGIONAL OFFICE USE ONLY</b>			
17. DATE RECEIVED: 03-31-16		18. DATE APPROVED: 09-20-16	
PLAN APPROVED – ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: 03-31-16		20. SIGNATURE OF REGIONAL OFFICIAL: //s//	
21. TYPED NAME: Jackie Glaze		22. TITLE: Associate Regional Administrator Division of Medicaid & Children Health Opns	
23. REMARKS: Approved with following changes to blocks 7a, 7b and 8 as authorized by state agency on emails dated 6-10-16 and 09-15-16.			
Block # 7a changed to read: FFY 2015-2016 \$28,600; Block 7b changed to read FFY 2016-2017 \$59,124.			
Block #8 changed to read: Attachment 3.1-A pages 5c and 5d(new); Attachment 3.1-B pages 6b and 6c(new) and Attachment 4.19-B 3d (new)			

## BEHAVIOR ANALYSIS SERVICES

### Description

Behavior analysis (BA) services are highly structured interventions, strategies, and approaches provided to restore appropriate behaviors by decreasing maladaptive behaviors.

### Who Can Receive

Behavior analysis services are available for recipients under the age of 21 years for whom BA services are recommended by a licensed physician in accordance with 42 CFR 440.130(d) and are medically necessary for the restoration of the recipient to the best possible functional level.

### Who Can Provide

Services must be performed by a practitioner who meets one of the following:

- Lead Analyst
  - Licensed in accordance with Chapter 490 or 491, Florida Statutes, with training and expertise in the field of behavior analysis; or
  - Certified behavior analysts who meet the following:
    - Are credentialed by the Behavior Analyst Certification Board®
    - Has a master's degree from an accredited university or college in a related human services field
    - Possesses a minimum of 250 hours of classroom graduate level instruction, 1500 hours of supervised independent field work, 1,000 hours of practicum, or 750 hours of intensive practicum in behavior analysis
- Registered behavior technicians who meet the following:
  - Are credentialed by the Behavior Analyst Certification Board®
  - Are 18 years or older with a high school diploma or equivalent
  - Complete a 40 hour training relevant for behavior technicians
  - Work under the supervision of a lead analyst
- Behavior assistants who meet one of the following and work under the supervision of a lead analyst:
  - Are 18 years or older with a high school diploma or equivalent with at least:
    - Two years of experience providing direct services to recipients with mental health disorders, developmental or intellectual disabilities
    - Complete 20 hours of documented in-service trainings in the treatment of mental health, developmental or intellectual disabilities, recipient rights, crisis management strategies, and confidentiality
  - Has a bachelor's degree from an accredited university or college in a related human services field.

Allowable Benefits

- One behavioral assessments per recipient, per fiscal year.
  - The behavior assessment is used to identify specific factors associated with the occurrence of maladaptive behaviors, functional capacity, strengths and service needs used in the development of a behavior plan.
- Up to three behavior reassessments per recipient, per fiscal year.
- Up to 40 hours of behavior analysis services, per week.
  - The implementation of BA interventions and ongoing monitoring of the recipient's progress towards goals in the behavior plan
  - Behavior analysis interventions may include but are not limited to discrete trial teaching, chaining, prompting, fading, and shaping

Behavior analysis services require prior authorization from the Agency for Health Care Administration (Agency) or the Agency's designee.

In accordance with section 1905(a) of the Social Security Act, codified in Title 42 of the United States Code 1396d(a), services that exceed coverage may be approved, if determined medically necessary.

Exclusions

- Services funded under section 110 of the Rehabilitation Act of 1973 or under the provision of the Individuals with Disabilities Education Act.

## BEHAVIOR ANALYSIS SERVICES

### Description

Behavior analysis (BA) services are highly structured interventions, strategies, and approaches provided to restore appropriate behaviors by decreasing maladaptive behaviors.

### Who Can Receive

Behavior analysis services are available for recipients under the age of 21 years for whom BA services are recommended by a licensed physician in accordance with 42 CFR 440.130(d) and are medically necessary for the restoration of the recipient to the best possible functional level.

### Who Can Provide

Services must be performed by a practitioner who meets one of the following:

- Lead Analyst
  - Licensed in accordance with Chapter 490 or 491, Florida Statutes, with training and expertise in the field of behavior analysis; or
  - Certified behavior analysts who meet the following:
    - Are credentialed by the Behavior Analyst Certification Board®
    - Has a master's degree from an accredited university or college in a related human services field
    - Possesses a minimum of 250 hours of classroom graduate level instruction, 1500 hours of supervised independent field work, 1,000 hours of practicum, or 750 hours of intensive practicum in behavior analysis
- Registered behavior technicians who meet the following:
  - Are credentialed by the Behavior Analyst Certification Board®
  - Are 18 years or older with a high school diploma or equivalent
  - Complete a 40 hour training relevant for behavior technicians
  - Work under the supervision of a lead analyst
- Behavior assistants who meet one of the following and work under the supervision of a lead analyst:
  - Are 18 years or older with a high school diploma or equivalent with at least:
    - Two years of experience providing direct services to recipients with mental health disorders, developmental or intellectual disabilities
    - Complete 20 hours of documented in-service trainings in the treatment of mental health, developmental or intellectual disabilities, recipient rights, crisis management strategies, and confidentiality
  - Has a bachelor's degree from an accredited university or college in a related human services field.

Allowable Benefits

- One behavioral assessments per recipient, per fiscal year.
  - The behavior assessment is used to identify specific factors associated with the occurrence of maladaptive behaviors, functional capacity, strengths and service needs used in the development of a behavior plan.
- Up to three behavior reassessments per recipient, per fiscal year.
- Up to 40 hours of behavior analysis services, per week.
  - The implementation of BA interventions and ongoing monitoring of the recipient's progress towards goals in the behavior plan
  - Behavior analysis interventions may include but are not limited to discrete trial teaching, chaining, prompting, fading, and shaping

Behavior analysis services require prior authorization from the Agency for Health Care Administration (Agency) or the Agency's designee.

In accordance with section 1905(a) of the Social Security Act, codified in Title 42 of the United States Code 1396d(a), services that exceed coverage may be approved, if determined medically necessary.

Exclusions

- Services funded under section 110 of the Rehabilitation Act of 1973 or under the provision of the Individuals with Disabilities Education Act.

METHODS USED IN ESTABLISHING PAYMENT RATES

Payment rates for behavior analysis services are based on a state developed fee schedule. The Agency for Health Care Administration's behavior analysis rates are effective for services provided on or after January 1, 2016.

Florida Medicaid behavior analysis fee schedule can be located at:

<http://ahca.myflorida.com/medicaid/review/Promulgated.shtml> Payments are the lesser of the provider charges or the Medicaid maximum allowable fee schedule, which is the same as both governmental and private providers.