**Commonwealth of Massachusetts**

**Executive Office of Health and Human Services**

**One Ashburton Place, 3rd Floor**

**Boston, MA 02108**

**Applied Behavioral Analysis (ABA) for Individuals with ASD Aging out of the School System**

***REQUEST FOR INFORMATION***

**DOCUMENT #: 24EHSABAASDAGINGRFI**

**Issue Date: January 30, 2024**

# INTRODUCTION

## Background

The Executive Office of Health and Human Services (EOHHS) is the single state agency responsible for administering the Commonwealth’s Medicaid program and its Children’s Health Insurance Program (together known as MassHealth) in accordance with M.G.L. c. 6A, § 16, Titles XIX and XXI of the Social Security Act, M.G.L. c. 118E, and other applicable federal and state laws, regulations, waivers, and demonstration projects.

MassHealth provides comprehensive, affordable health care coverage for over two million low-income Massachusetts residents, including 40% of all Massachusetts children and 60% of all residents with disabilities. MassHealth’s mission is to improve the health outcomes of our diverse Members and their families by providing access to integrated health care services that sustainably and equitably promote health, well-being, independence, and quality of life.

Applied Behavioral Analysis (ABA) services are defined according to the Behavior Analyst Certification Board as the following:

“ABA is a well-developed scientific discipline among the helping professions that focuses on the analysis, design, implementation, and evaluation of social and other environmental modifications to produce meaningful changes in human behavior. ABA includes the use of direct observation, measurement, and functional analysis of the relations between environment and behavior. ABA uses changes in environmental events, including antecedent stimuli and consequences, to produce practical and significant changes in behavior.”

Types of ABA include, but are not limited to, discrete trial training, verbal behavioral intervention, and pivot response training. Parental and caregiver involvement in the process and continued use of the strategies outside of the formal sessions is important for the success of the treatment in the long- term. ABA is an evidence based behavioral intervention for children and youth with Autism Spectrum Disorder.

Currently, Applied Behavioral Analysis (ABA) services are covered by MassHealth for individuals who are under the age of 21. These treatments and services are provided when they are medically necessary to develop, maintain or restore, to the maximum extent feasible, the functioning of an individual. ABA is not available for individuals with ASD after 21 years and older. These individuals graduate or leave special education system and transition into adult services.

## Purpose of RFI

MassHealth has heard concern from advocates and families about individuals with intellectual and developmental disabilities (I/DD), including individuals with Autism Spectrum Disorder (ASD) who receive ABA prior to turning 21 and then no longer have access to the services once they turn 21.

Families and advocates have noted that some individuals with ASD struggle during the transition period between leaving school and enrolling in a day program. Additionally, when individuals with ASD attend a day program, day programs do not always have staff equipped to care for individuals with ASD.

The purpose of this RFI is to solicit input from Individuals diagnosed with ASD, Families or Caregivers, and advocates, day program providers, ABA Providers and respective subject matter experts (SMEs) in the ASD and ABA field about the following areas:

* + From your perspective, what are some of the unmet physical and behavioral needs/supports of youth diagnosed with ASD that are transitioning out of the school system?
* What is needed to best meet the needs of individuals with ASD who are transitioning out of the school system to ensure they maintain their health, wellness, and quality of life when they cannot attend a day program?
* What additional support is needed to meet the needs of individuals with ASD who are turning 21 and transitioning from the school system to a day program or other community supports?
* Are there adequate existing resources within day programs to provide support to individuals with ASD and to provide behavioral supports?
* Is the following model feasible, needed, and would it provide adequate support to individuals with ASD who are transitioning into a day program? MassHealth would cover time limited medically necessary ABA services for MassHealth members with ASD transitioning from a school setting into a day program. Key supports may include developing a behavioral intervention plan and training day program staff.

## DEFINITIONS

Capitalized terms used in this RFI shall have the following meaning, unless the context clearly indicates otherwise.

Applied Behavioral Analysis (ABA): Behavioral therapy for individuals with Autism Spectrum Disorder (ASD) to help them learn new skills and behavior that is medically necessary to develop, maintain or restore, to the maximum extent feasible, the functioning of an individual.

Autism Spectrum Disorder (ASD): A neurological and developmental disorder that affects how people interact with others, communicate, learn, and behave. Although autism can be diagnosed at any age, it is described as a “developmental disorder” because symptoms generally appear in the first 2 years of life.

COMMBUYS: Massachusetts’ online procurement system, available at <https://www.commbuys.com/bso/>. COMMBUYS links public purchasers, including MassHealth, in search of products and services with vendors who can provide them.

Day Program: Includes MassHealth Day Habilitation (DH) services, MassHealth Adult Day Health (ADH) services, and Department of Developmental Services Community-Based Day Support services (CBDS).

Executive Office of Health and Human Services (EOHHS): The executive branch agency within Massachusetts which oversees 11 health and human services operating agencies, and which is the single state agency responsible for the administration of the MassHealth program (Medicaid and the Children’s Health Insurance Program), pursuant to M.G.L. c. 118E, Titles XIX and XXI of the Social Security Act, and other applicable laws and waivers thereto.

MassHealth: The Commonwealth’s Medicaid program and its Children’s Health Insurance Program (together, “MassHealth”) administered by EOHHS in accordance with M.G.L. c. 6A, § 16, Titles XIX and XXI of the Social Security Act, M.G.L. c. 118E, and other applicable federal and state laws, regulations, waivers, and demonstration projects.

Request for Information (RFI): A tool for state agencies to gather information from a broad spectrum of interested parties.

# QUESTIONS FOR RESPONSE

EOHHS requests responses to the following questions. We encourage Individuals with ASD, Families or Caregivers, advocates, day program providers, ABA Providers and ASD and ABA SMEs (subject matter experts) to provide answers, comments, and suggestions in response to all or a subset of the questions for consideration.

This section is organized into three sections: (A) Individuals with ASD, Families, Caregivers, and advocates, (B) Day Program Providers, and (C) ABA Providers and ASD and ABA Subject Matter Experts (SMEs).

Respondents are welcome to answer any or all questions in this RFI. If EOHHS has not thought of a question to which you would like to respond, or you have information that you believe EOHHS should take into consideration, please submit that information as well.

## Individuals with ASD, Families, Caregivers and Advocates

MassHealth requests responses to the following questions. We encourage individuals with ASD, families, caregivers, advocates, and other interested parties, to provide answers, comments, and suggestions in response to all or a subset of the questions for consideration.

1. What are some of the behavioral needs and supports of individuals with ASD that are turning 21 and transitioning out of the school system?
2. How long have you or your family member received ABA services?
3. Please provide some examples on how the services advance your or your family member’s independence or functioning?
4. Can you share how you or others presently utilize ABA services, and please check all settings which apply?
	1. School setting
	2. Community activities
	3. Home setting
5. What needs do you continue to have as you or others you know are turning 21 and transitioning out of the school system?
6. What type of behavioral support is needed to best meet the needs of individuals with ASD who are turning 21 and transitioning out of the school system when they cannot attend a day program?
	1. How do these needs change if an individual has complicated medical factors, a co-occurring disorder, or a chronic condition?
7. What additional support is needed to support the transition of an individual turning 21 with ASD from the school system to a day program?
	1. For what duration is the support needed?
8. Are there adequate resources within day programs to support behavioral needs of individuals with ASD?
9. Is the following model feasible, needed, and would it provide adequate support to individuals with ASD who are over 21 and transitioning into a day program? MassHealth would cover time limited medically necessary ABA services for MassHealth members with ASD who have turned 21 and are transitioning from a school setting into a day program. Key ABA supports may include developing a behavioral intervention plan and training day program staff and then providing periodic oversight and analysis of implementation.
	1. What key supports should be covered? For what duration of time?
	2. What are the strengths of this model?
	3. What are the weaknesses?
10. Would you want your program to embrace a consultant model which would offer an ABA expert to consult with staff on member specific circumstances? What supports from an ABA provider would be most helpful to your program? What criteria or measures should EOHHS focus on to measure the success of such a model?

## Day Program Providers

MassHealth requests responses to the following questions. We encourage Day Program Providers to provide answers, comments, and suggestions in response to all or a subset of the questions.

1. What is needed to best meet the needs of individuals with ASD who are transitioning out of the school system while they are waiting to find an appropriate day program?
	1. How do these needs change if an individual has complicated medical factors, a co-occurring disorder, or a chronic condition?
2. Does your day program have experience working with individuals with ASD? If yes, in what ways do you provide support for complex behavioral needs, (e.g, trainings, behaviorist or ABA consultants, etc)
3. Does your day program have experience implementing ABA therapy? If yes, what types of programs has your day program implemented and for how long?
4. Do you have credentialed providers who currently serve individuals with ASD in your day program? What about non-clinical staff?
5. Is there a method to determine what level of support the individual with ASD requires and for parsing out interventions relative to the level of intensity? (Example - needs of those with profound autism vs. those who have ASD, but require ABA for time-limited transition assistance, and then intermittently for maintenance)
6. Is there a software platform that your day program currently uses for participants to assess for behavioral conditions? If so, what is it and how many years has your program been using it?
7. Has your day program served individuals with known risk factors, such as aggression, self-harm, mood/behavior dysregulation? If yes, please describe those risk factors and how your day program accommodated those participants.
8. Are there specific known risk factors that would make it difficult for your day program to serve and meet an individual’s needs?
9. Should there be a credentialing or certification process to identify which staff can serve individuals that have historically received ABA? If yes, what would the credentialing process look like?
10. Are there any positions (licensed or unlicensed) you would need to hire if your program was required to offer ABA services to eligible participants? If so, please list those positions and the number of FTEs you would need to hire.
	1. How many of the FTEs would be providing direct care?
11. What type of staffing model would you implement to serve this population? How does it differ from your current staffing model?
12. How would your program respond to an ABA provider training the day program staff, giving them an observation period, and having them write up a plan on how your program should be implementing ABA in your day-to-day practice?
13. Is the following model feasible, needed, and would it provide adequate support to individuals with ASD who are transitioning into a day program? MassHealth would cover time limited medically necessary ABA services for MassHealth members with ASD who have turned 21 and are transitioning from a school setting into a day program. Key ABA supports may include developing a behavioral intervention plan and training day program staff.
	1. What key supports should be covered? For what duration of time?
	2. What are the strengths of this model?
	3. What are the weaknesses?
14. Would your program be ready to embrace a consultant model which would offer an ABA expert to consult with your staff on member specific circumstances? What supports from an ABA provider would be most helpful to your program? Could your staff be responsible for implementation and consistency on applying behavioral interventions such as ABA where appropriate and as directed by the ABA provider?
15. What challenges or gaps do you foresee if we were to implement either of the models above?

## ABA Providers/SMEs

MassHealth requests responses to the following questions. We encourage ABA Providers/SMEs, to provide answers, comments, and suggestions in response to all or a subset of the questions for consideration.

1. What is your experience with Applied Behavioral Analysis (ABA) for individuals with ASD who are 21 or older?
2. Can you please describe the criteria that you would use to determine if an individual 21, or older, with ASD with a complex Behavioral Health condition is appropriate for receiving ABA support?
3. What type of model would you implement to serve individuals 21 or older with ASD who have just aged out of school and are in a transition period before they enter a day program?
4. If MassHealth covered an appropriate ABA clinical provider to provide medically necessary time limited behavioral intervention and supports to individuals with ASD that are turning 21 and transitioning into a day program, would you participate in such a model? Would you prefer a model where you (the ABA provider) would be an external consultant providing advice and support to day program staff or would you prefer to work directly with the MassHealth member on site? Please explain why you prefer one model over the other.
	1. What barriers or risks do you see in implementing this new service? Do you have any suggestions about to overcome identified barriers/risks?
	2. Are there any positions (licensed or unlicensed) you would need to hire to provide this new type of ABA support? If so, please list those positions and the number of FTEs you would need to hire.
	3. What should the rate be for this new service?
	4. What geography can you serve?
	5. Does the service need to be in person? How much can happen via telehealth?
	6. What would be the communication platform?
	7. What technology would be required?
	8. What follow-up is needed?
	9. What oversight from the State or the ABA provider would be required for the Day Habilitation Providers? For how long?
5. What type of staffing model would you implement to serve this population?
6. Should there be a credentialing or certification process to identify which Day Habilitation providers can serve individuals that have historically received ABA?
7. What challenges or gaps do you foresee if we were to implement such a model?

# RFI RESPONSE INSTRUCTIONS

## RFI Response Instructions

EOHHS requests that RFI responses be submitted by **Friday, April 19, 2024, no later than 4:00 p.m.** Eastern Time. Responses should be submitted via email to the following address:

* + EOHHS-Procurement@mass.gov

Parties interested in responding to this RFI should prepare a typewritten response that includes a cover sheet that states the respondent’s name, organization, address, telephone number, e-mail address, and affiliation or interest. Responses should be sent with the email subject line “ABA RFI Response.” **Responses must be submitted electronically.** Questions should be answered in order of appearance and numbered according to the RFI question number. Respondents are invited to respond to a subset or all of the RFI questions; please respond to as many as you feel are appropriate. Responses, including any attachments thereto, should be clearly labeled and referenced by name in the RFI response. No part of the response can be returned. Receipt of RFI responses will not be acknowledged.

## Additional Information

1. Electronic Distribution

This RFI has been distributed electronically using the Commonwealth of Massachusetts procurement record system (COMMBUYS). COMMBUYS is an electronic mechanism used for advertising and distributing the Commonwealth of Massachusetts’ procurements and related files. No individual may alter (manually or electronically) the RFI or its components except those portions intended to collect the respondent’s response. Interested parties may access COMMBUYS at the following address: https://www.commbuys.com/bso/.

Questions specific to COMMBUYS should be made to the OSD Help Desk osdhelpdesk@mass.gov or by telephone at (617) 720-3197.

1. RFI Inquiries

Interested parties may make written inquiries concerning this RFI until **5:00 p.m. on Monday, March 11, 2024**. Written inquiries may be sent via email to the RFI contact listed in **Section IV.A**. Microsoft Word is the preferred file format; a plain text email is also acceptable.

EOHHS will review inquiries and prepare written answers to questions, at its discretion, which are of general interest and relevant to the preparation of a response to the RFI. The written answers will be posted on the COMMBUYS website ([www.commbuys.com](http://www.commbuys.com)). Only written answers are binding on EOHHS.

1. RFI Amendments

Interested parties are solely responsible for checking COMMBUYS for any addenda or modifications that are subsequently made to this RFI. The Commonwealth and its subdivisions accept no liability and will provide no accommodation to interested parties who fail to check for amended RFIs.

1. Use of RFI Information

Information is being solicited in this RFI to assist EOHHS in the utilization of creating a model that would serve the needs of ASD individuals for ABA therapy after they have aged out of the school system and before entering a day program. EOHHS reserves the right to accept or reject, in part or in full, any information contained in or submitted in response to this RFI. The RFI is not binding on EOHHS and shall not obligate EOHHS to issue a procurement that incorporates any RFI provisions or responses. Responding to this RFI is entirely voluntary, will in no way affect EOHHS’ consideration of any proposal submitted in response to any subsequent procurement, and will not serve as an advantage or disadvantage to the respondent in the course of any procurement that may be issued. Responses to this RFI become the property of the Commonwealth of Massachusetts and are public records under the Massachusetts public records law, M.G.L. c. 66, § 10 and c. 4, § 7, cl. 26, regarding public access to such documents. However, information provided to EOHHS in its response to this RFI and identified by the respondent as trade secrets or commercial or financial information shall be kept confidential and shall be exempt from disclosure as a public record to the extent permissible by law (see M.G.L. c. 4, § 7, cl. 26). This exemption may not apply to information submitted in response to any subsequent procurement.