

Dear Members of the BHOC:

The Operations Committee met on March 2nd and reached consensus **to recommend the ASD Guidelines be approved by the Council with no revisions.** We all agreed that the process specific to obtaining services for children with autism stepping down from an inpatient facility required clarification. The summary below reflects the discussion and clarification.

Susan Walkama, Co-Chair Operations Committee

Summary of discussion at the Operations Committee regarding the ASD Level of Care Guidelines for comprehensive diagnostic evaluation:

The ASD level of care guidelines for the comprehensive evaluation was discussed at the Operations meeting on 3/2/18. Dr. Mubbashar expressed concern in two specific areas. First, he was concerned that the LOC guidelines emphasized the need for a validated evaluation tool when a validated evaluation may not appropriately score or evaluate a child with ASD with certain characteristics. It was clarified that the proposed LOC guidelines say that a validated evaluation tool *should* be used, it is not required. The second concern was related to the perception that an evaluation was needed for a child who was on an inpatient unit and that need for an evaluation may delay the discharge of the child to the community. It was agreed, that this discussion, though very worthwhile, was not applicable to the LOC guidelines because the inpatient unit would never seek authorization from Beacon to do an evaluation since inpatient is paid at an all-inclusive rate. Based on this clarification, it was decided that the LOC guidelines should remain as proposed and Dr. Mubbashar agreed with this. Specific to the second issue, there was discussion about whether a child who is being treated on an inpatient unit with specialty in treating children with ASD would need a separate evaluation before receiving home based services. The group felt that a separate evaluation was not needed in such a case. Bill Halsey agreed to review the practice with Beacon to make sure they receive and document what they need from a hospital inpatient psychiatric unit in order to authorize community based services and not put undue burden on the child or family to seek a separate evaluation before starting community based services. Please see below for a proposed remedy for this issue.

For a child who has not been evaluated by a licensed practitioner and determined to have a diagnosis of autism spectrum disorder and is in an inpatient psychiatric unit, Beacon would need the following information from the inpatient unit to satisfy the need for an evaluation:

1. Verification of an ASD diagnosis based on DSM-V
2. Severity rating or DSM-V symptom severity checklist (identifies the number of symptoms exhibited using the DSM-V)
3. Confirmation that the child would benefit from community based/home based services
4. Recommendations on specific behaviors to target at home