

Resolution calling on MassHealth to enforce existing administrative regulations and statutory authority pertaining to the provision of Applied Behavioral Analysis Services

- WHEREAS:** In America today, one in 36 children have a form of Autism Spectrum Disorder (ASD); and
- WHEREAS:** The first years of life are the most consequential in human development, as well as predictive, for how the course of an individual's life, educational attainment, and other quality-of-life metrics. Despite everything we know about early intervention for children with ASD, Massachusetts has an acute shortage of key practitioners who are crucial in the provision of ABA services: Applied Behavioral Analysts (BCBA) resulting in a waitlist of 2,000-3,500 children ages 2-5, at any given time; and
- WHEREAS:** While diagnosable by a specialist by age 2, the average age of autism diagnosis in Massachusetts is 5.3 years old, per the National Autism Data Center, and the wait time for children with ASD, and their parents/guardians, can be for years on end, putting these children at severe risk of failing to receive critical intervention in what is a narrow and ever-closing window of human neurological development; and
- WHEREAS:** Massachusetts operates under a “two-tier” delivery model of ABA services rather than a “three-tier” delivery model, like California and Michigan; and
- WHEREAS:** Under the “three-tier” delivery model, there is, a Board Certified Assistant Applied Behavior Analyst (BCaBA), a mid-level provider type with supervisor authority licensed by the Department of Public Health; and
- WHEREAS:** Access to care is almost doubled under a 3-tier model as one BCBA is able to oversee 10-16 clients in a 3-tier model (with support from 1-2 BCaBAs), but only 6-10 in a 2-tier model with no support supervision from BCaBAs; and
- WHEREAS:** The clinical competency of brand new BCBAs is enhanced as they spend significant time as a mid-tier BCaBA supervisor, shadowing experienced BCBA clinicians and gaining hands-on experience that is not available under a 2-tier model; and
- WHEREAS:** The per-child costs are lower when a BCaBA mid-tier supervisor is part of the care team, as the reimbursement state’s reimbursement rate for a BCaBA is below that of a BCBA; and
- WHEREAS:** MassHealth can exercise its authority to implement the three-tier model by establishing a rate of payment for BCaBAs and fully implementing the regulatory framework established by the Department of Public Health governing licensed ABA providers; **NOW, THEREFORE, BE IT**

RESOLVED:

That the Somerville City Council urges the Executive Office of Health and Human Services and MassHealth, without delay to fully recognize BCaBAs for the purpose of reimbursement and implementation of the three-tier delivery model for ABA services.