

## The Right Door for Hope, Recovery and Wellness

Chapter Title	Chapter #		Subject #
Clinical	C		310.12
Subject Title	Adopted NEW	Last Revised NEW	Reviewed NEW
Autism Testing			

### PROCEDURE

#### **Application**

This procedure shall apply to the clinical services of The Right Door for Hope, Recovery and Wellness (The Right Door).

#### 1. The purpose of Autism Testing

- 1.1. The Right Door provides identification, assessment, and diagnosis to determine the specific needs of a recipient to develop an individual plan of services so that planning, linking, coordinating, follow-up, and monitoring can assist the recipient in gaining access to services. Assessment and diagnosis are intended so that The Right Door services can be determined and not an end in themselves.
- 1.2. It is not expected that individuals will know all aspects of the Community Mental Health autism process. Discussion should occur throughout the process to ensure persons/families understand the benefit of ABA therapy and that the function of an autism evaluation is not to rule-in / rule-out an Autism Spectrum Disorder (ASD) diagnosis, but to determine a member's eligibility for CMH services [MCL - Section 330.1206]. Consideration should be taken when authorizing the autism/ABA assessment process. The Right Door should provide the ASD evaluation if it will lead to possible services, but not necessarily ABA, and the parents/guardians/person should inform The Right Door upfront that they want services if the person is eligible. A Medicaid Health Plan should provide the ASD evaluation if the guardians/parents/person only want to rule in / rule out an ASD diagnosis and state upfront that they wish no additional services beyond the ASD evaluation.
- 1.3. An Adverse Benefit Determination (ABD) for the denial of the autism evaluation service request would be provided. The ABD should state: "Your Medicaid Health Plan is responsible for providing services to you" and include the referral information to the MHP for the ASD evaluation request. The Autism and Special Education Resources form can be found on the intranet.

#### 2. Requests for services by Primary Care

- 2.1. Primary Care – If a primary care provider is requesting autism testing, The Right Door requires the following to accompany the referral request:

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- 2.1.1. M-CHAT – Autism Screening for 18 months – 3 years of age old children
- 2.1.2. Social Communication Questionnaire (SCQ) – for 4 years of age children and up
- 2.1.3. Have medical concerns been ruled out?
  - 2.1.3.1. Gastrointestinal, Tongue Tie, Other medical issues
  - 2.1.3.2. If medical concerns have not been ruled out, The Right Door requires that these are ruled out prior to testing for Autism.
  - 2.1.3.3. Access clinician will connect with primary care provider if the person/family does not have one.
  - 2.1.3.4. The primary care/vision/dental provider(s) should provide the following screening information when/if available:
    - 2.1.3.4.1. Vision
    - 2.1.3.4.2. Hearing
    - 2.1.3.4.3. Dental
    - 2.1.3.4.4. Speech Evaluation
    - 2.1.3.4.5. Occupational therapy evaluation

### 3. Requesting Autism Testing at Intake or at Service Requests

- 3.1. At Intake, post assessment and qualifying for services, if a person/family requests autism testing, the intake clinician must complete the autism testing “referral checklist” and ask the following questions:
  - 3.1.1. Do they desire to have Applied Behavioral Analysis (ABA) services?
    - 3.1.1.1. If no, inquire as to if other services are desired or could be beneficial for them/their family.
  - 3.1.2. Are there concerns in home, at school or both?
    - 3.1.2.1. If concerns at home, describe.
    - 3.1.2.2. If there are no concerns at home, testing should be navigated through the school.
      - 3.1.2.2.1. Access clinician should provide the Autism and Special Education Resources form found on the intranet.
    - 3.1.2.3. If the school has completed an evaluation and/or the child has an Individual Education Plan (IEP) please request a release of information or a copy of the evaluation and/or the IEP.
  - 3.1.3. Have medical concerns been ruled out?
    - 3.1.3.1. Gastrointestinal, Tongue Tie, Other medical issues
    - 3.1.3.2. If medical concerns have not been ruled out, The Right Door requires that these are ruled out prior to testing for Autism.
    - 3.1.3.3. Access clinician will connect with primary care provider if the person/family does not have one.

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3.1.3.4. The primary care/vision/dental provider(s) should provide the following screening information when/if available:

3.1.3.4.1. Vision

3.1.3.4.2. Hearing

3.1.3.4.3. Dental

3.1.3.4.4. Speech Evaluation

3.1.3.4.5. Occupational therapy evaluation

3.1.3.4.6. M-CHAT

3.1.3.4.7. SCQ

3.1.4. If under 3 years of age, have they had an Early On evaluation?

3.1.4.1. If no, Access clinician will assist with a referral to Early On.

3.1.4.2. If yes, please request release of information to coordinate care.

4. Requesting Autism Testing when open to other services

4.1. Staff must fill out the Autism Testing referral checklist and form.

4.2. If coordination needs to occur to obtain testing results the primary clinician should assist in coordinating.

4.3. If referral needs to be made clinicians can provide or reference the Autism and Special Education Resources form found on the intranet.

5. If a family qualifies for ongoing services and desires ongoing services, the Access Clinician should review the welcome letter for the referred services.

5.1. If referred to Children's Case Management, the family must meet at least 2 times a month while awaiting testing.

References:

- MCL - Section 330.1206 - Community mental health services program; purpose; services.

Kerry Possehn, Chief Executive Officer	Date		