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STATE OF HAWAII KA MOKU'ĀINA O HAWAI'I DEPARTMENT OF HUMAN SERVICES KA 'OIHANA MĀLAMA LAWELAWE KANAKA Office of the Director P. O. Box 339 Honolulu, Hawaii 96809-0339

March 22, 2023

TO: The Honorable Senator Joy A. San Buenaventura, Chair Senate Committee on Health & Human Services

FROM: Cathy Betts, Director

SUBJECT:SCR 132/ SR 152 - REQUESTING THE DEPARTMENT OF HUMAN SERVICES' MED-QUEST
DIVISION TO TAKE STEPS NECESSARY TO ENSURE THAT ADEQUATE PROVIDER RATES
ARE ESTABLISHED FOR APPLIED BEHAVIOR ANALYSIS SERVICES.

Hearing: March 24, 2023, 1:02 p.m. Conference Room 225 & Via Videoconference, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) offers comments. PURPOSE: This resolution requests that DHS Med-QUEST Division (MQD) take steps necessary to ensure that adequate provider rates are established for applied behavioral analysis services (ABA); to assess current reimbursement rates for ABA; and to submit a report of its findings and recommendations on appropriate reimbursement rate increases, including any proposed legislation, to the Legislature no later than twenty days prior to the convening of the Regular Session of 2024.

MQD can assess reimbursement rates for ABA services and submit a report on its findings to the Legislature no later than twenty days before the convening of the Regular Session of 2024. As background, when the Medicaid reimbursement rates were developed for ABA, MQD analyzed other payers of Tri-Care and available commercial rates and matched them. Currently, the primary utilized service code is differentiated by the provider level, e.g., Licensed and Board Certified Behavioral Analyst, Board Certified Assistant Behavioral Analyst, or Registered Behavioral Technician. This ABA rate paid by MQD continues to be equivalent to Tri-Care for two of the three providers. Additionally, a brief review of several other states' Medicaid fee schedules for ABA showed that Hawaii rates tend to be higher than most and about the same as others. A more comprehensive analysis can be conducted as it is well understood that all health care providers face challenges, including those providing ABA services, particularly on the neighbor islands.

Thank you for the opportunity to provide comments on this measure.



Committee on Health and Human Services

Friday, March 24, 2023 1:02 p.m. VIA VIDEOCONFERENCE Conference Room 225 State Capitol 415 South Beretania Street

SUPPORT SCR 132/SR 152 RELATING TO THE DEPARTMENT OF HUMAN SERVICES

Chair San Buenaventura, Vice Chair Aquino, and members of the Committee:

On behalf of the Hawai'i Association for Behavior Analysis (HABA) we thank you for the opportunity to submit testimony in strong support of SCR 132/ SR 152 which requests the department of human services Med-QUEST division take steps necessary to ensure that adequate provider rates are established for applied behavior analysis services. Applied behavior analysis (ABA) is a medically necessary service provided for QUEST beneficiaries under the age of 21 with an autism diagnosis for intensive behavioral therapy (IBT), as mandated by section 1905(r) of the Social Security Act for Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Autism is classified as a mental health condition, included in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) and ABA treatment is the leading behavioral health treatment to ameliorate symptoms associated with this diagnosis and focuses on improving independence and decreasing the level of supports and services needed over the lifetime.

Providers across the state have reported they are not able to meet the needs of QUEST members largely due to difficulty hiring and retaining providers given our high cost of living and the demand for increased wages. Reimbursement rates for QUEST services were set in 2015 and have not increased, creating a hardship for behavioral health providers. This has resulted in significant delays for beneficiaries to access services, as well as not being able to meet the full service needs for children and families in our state.

Below market reimbursement rates—the current reimbursement rate for Registered Behavior Technicians (RBTs) is below market rate in Hawaii. The American Medical Association (AMA) Current Procedural Terminology (CPT®) codes for ABA services are carrier priced, meaning the <u>Centers for</u> <u>Medicare & Medicaid Services (CMS) Medicare Physician Fee Schedule (MPFS)</u> does not currently set rates for our services. This means that other measures that are focused on bringing Medicaid payments to 100% of Medicare (like SB397 SD2), would not include ABA services. This has resulted in a lack of parity for these intensive behavioral health services in our state.

Other payors in the state, including the Department of Education (DOE) and Department of Health (DOH) Development Disabilities Division (DDD) pay higher rates for these services, with a difference of \$25 per hour for DOE neighbor islands and \$19.45 for DOH-DDD respectively.

Other states, with lower costs of living, have increased their reimbursement rates over the years while the QUEST reimbursement rates have remained the same. A sample of Medicaid state rates for RBTs is included in Table 1.

Funder	RBT rate per hour
Alaska Medicaid	\$76.08
Arizona Medicaid	\$81.48
Nevada Medicaid	\$52.04
Oregon Medicaid	\$55
Hawai'i Medicaid	\$50

Table 1. Medicaid rates in other states for comparison with links to state fee schedules.

Waitlist for services, limited provider network—QUEST beneficiaries are too often faced with a lack of access to services across the state, especially on neighbor islands. Providers report having to maintain waitlists, with families sometimes waiting for years to access their medically necessary behavioral health treatment. Research demonstrates that early intensive intervention and provision of services in line with the professional standards of care for treatment dosage produce the best gains for individuals and can decrease the costs of care over the lifetime.

Due to low reimbursement rates and the high cost of living here in the islands, there is a shortage of providers, creating provider network adequacy issues. An increase in reimbursement rates would allow providers to pay livable wages and create additional jobs to serve QUEST beneficiaries.

We urge you to pass these resolutions to address the urgent need for parity in payments for applied behavior analysis services for the Medicaid population. Thank you for the opportunity to submit this testimony.

Mahalo,

10B20T

Kristen Koba-Burdt, BCBA, LBA Legislative Chair Hawai'i Association for Behavior Analysis