



Behavioral Gerontology SIG Insurance Committee 2023-2024

Purpose of Committee: To discuss and outline current insurance coverage options for behavior analysis services aimed at older adults.

Members: Gordon Bourland, Julio Ventura, Jonathan Baker, Marianna Jackson, Claudia Drossel and Alexandra Doran

Meeting timeline: This group initially convened in October 2023.

- **10/26/23:** Initial meeting with SIG Chair, Zoe Lucock, to introduce group and discuss scope. Member roles were discussed and assigned. The group agreed to invite Dr. Maranda Trahan to join the next meeting and discuss her experience accessing funding for ABA services.
- **1/8/24:** Dr. Trahan spoke about her experience with accessing insurance funding and/or private pay to provide ABA services to older adults. She gave an overview of various pathways to funding (Medicaid waiver and options in various states, which are discussed below). Dr. Trahan currently provides ABA services in home through private pay agreements. She advocated for private pay.
- **3/20/24:** Committee discussed funding for older adults with NCD versus funding for older adults in general, lobbying state representatives and how to increase overall awareness of ABA for older adults, and behavioral gerontology competencies.

Executive Summary

Across the three meetings, payment options were identified for the following coverage options. The process for securing this funding varies across sources and states.

Current Coverage Options

- **Private Insurance:** The committee is not aware of any private insurance companies who reimburse for behavior analytic services for older adults.
- **Medicare:** Generally, Medicare does not reimburse for services. Medicare has approved billing codes for caregiver training and behavioral services.
- **Medicaid:** Medicaid waivers vary by state and some have reimbursed BCBA's for services. BCBA's can review their state's specific eligibility criteria and call the state



office to request more information regarding provider requirements for psychological services.

- **Supplemental Insurance Plans:** Some individuals have long term care insurance. If this is the case, their specific plans can be reviewed to see if ABA services can be covered.
- **Private Pay:** Currently, this is the best option for BCBA's to provide services to older adults.

Example of funding in Two States

- Oregon: Community First Choice is a specific waiver that has reimbursement available for positive behavior supports.
- Maryland: This state requires specific gerontological training to be approved as a provider. With proof of gerontology training, BCBA's can provide services eligible for reimbursement.

Barriers and Challenges

- **Awareness:** Lack of awareness among providers and patients regarding behavior analytic services and their scope. Our group discussed various activities to begin building awareness (i.e., more effective outreach at conferences within BA/outside of BA, community outreach)
- **Policy Limitations:** Current policies do not recognize the BCBA credential and thus restrict access to services. Approved behavioral gerontology competencies may be required to practice within a broader scope.
- **Reimbursement Issues:** Currently, very few states/plans will reimburse a BCBA for providing services. Notable pathways to reimbursement are above: Medicaid waivers and private pay.
- **Training:** Behavioral gerontology competencies are not currently required; however, specific training is highly recommended to ensure effective and ethical practice in this field. Developing and offering competencies specific to behavioral gerontology is warranted.

Committee Recommendations

Due to the variability across states, creating a comprehensive list of recommendations for each state is beyond the scope of this committee. Instead, the committee put together relevant information and resources to allow behavior analysts to pursue specific insurance funding opportunities.



Furthermore, it is recommended that the SIG establish a database of available service and funding opportunities, enabling members to share information and access these resources if they are interested in providing behavioral gerontology services.

Recommendations for work needed in other areas

The committee recommends convening experts from different areas within the SIG pertaining to various areas of potential funding opportunities, scheduling an initial meeting to discuss options and identifying if additional experts are necessary, summarizing funding options and, identifying mechanisms for pursuit.

Appendix A. Specific links to resources

- **Private Insurance:** This committee has not identified options for reimbursement through private insurance companies. Further investigation is warranted.
- **Medicare:**
 - In 2024, Medicare released caregiver training codes for physicians and qualifying clinical professionals. Psychologists are listed as approved providers of caregiver trainings. Behavior analysts must get clarification about approved provider credentials prior to service delivery to ensure reimbursement (<https://givershealth.com/post/cms-finalizes-caregiver-training-services-in-2024>)
 - Behavioral health integration services have billing codes available for psychologists, however accessing the codes requires a prescription from a physician to provide services (https://aims.uw.edu/wordpress/wp-content/uploads/2023/11/CMS_FinalRule_BHI_CheatSheet.pdf)
- **Medicaid:** Medicaid waivers vary by state. BCBAAs can review their state's specific eligibility criteria and call the state office to request more information regarding provider requirements for psychological services. Below are two sample avenues to accessing services.
 - Oregon: Community First Choice. BCBAAs must first apply to become an approved Medicaid provider in Oregon. For specific steps and forms, use this link: <https://www.oregon.gov/oha/hsd/ohp/pages/provider-enroll.aspx>
 - Maryland: This state requires specific gerontological training to be approved as a provider. With proof of gerontology training, behavior analysts can provide services eligible for reimbursement. Furthermore, specific provider



addendums may be necessary. More information and the provider application can be found here:

<https://health.maryland.gov/mmcp/provider/Pages/enrollment.aspx>

- For more information about specific states, it is recommended that you visit your own state's website. Since there is not a central page for this information, conducting a google search is helpful. You can search terms like "Medicaid provider enrollment" along with your state name. Additionally, behavior analysts interested in learning more can enhance their knowledge by taking the "Starting your own practice in Dementia care" course available on the Abilities website (<https://www.abilities.today/learn>).

- **Private Pay:** With proper training, BCBA's have provided services via private pay. Currently, this is the most common and recommended path to providing services in behavioral gerontology. Behavioral gerontologists can view trainings on how to begin a private pay practice through Abilities Behavior Services (<https://www.abilities.today/seniors-with-dementia>).